

**NHS** Hampshire and Isle of Wight

## Isle of Wight SEND Partnership Board

?	25 <sup>th</sup> November 2024, 9:30am
×	Via Microsoft Teams

Name	Initial	Role	Organisation
Anthony Harper (Chair)	AH	Deputy Director for Children's Care	NHS Hampshire and Isle of Wight
Ashley Whittaker	AW	Strategic Director of Children's Services	Isle of Wight Council
Cally Wareham	CW	Cluster Lead for Children and Young People Services	Child and Adolescent Mental Health Service (CAMHS)
Claire Collins	CC	Service Manager	Autism Inclusion Matters (AIM)
Daron Perkins	DP	Service Manager Adult Social Care (Learning Disability and Mental Health Services including transitions)	Isle of Wight Council
Cllr Debbie Andre	DA	Cabinet Member for Adult Social Care and Public Health	Isle of Wight Council
Emma Meek	EM	Senior Delivery Manager for Children's Care	NHS Hampshire and Isle of Wight
Heather Morris	HM	Strategic Manager SEN and Inclusion	Isle of Wight Council
Jade Kennett	JK	Service Manager Strategic Development	Isle of Wight Council
Cllr Jonathan Bacon	JB	Cabinet Member for Children's Services	Isle of Wight Council
Kathy Whitewood	KW	Head of Service	Isle of Wight Youth Trust



Laura Gaudion	LG	Director of Adult Social Care and Housing	Isle of Wight Council
Mark McCurrie	MM	Independent SEND advisor for Safety Valve Agreement	Commissioned by Department for Education (DfE)
Matthew Powell	MP	Associate Director: Special Educational Needs and Disabilities / Designated Clinical Officer	NHS Hampshire and Isle of Wight
Mark Rodwell	MR	Service Manager for Corporate Parenting (Children's Services)	Isle of Wight Council
Naomi Carter	NC	Service Director for Education, Inclusion and Access	Isle of Wight Council
Rachael Burden	RB	Senior Transformation Manager for Maternity and Child Health	NHS Hampshire and Isle of Wight
Rachael Williams	RW	Education and Inclusion Manager	Isle of Wight Council
Ruth Hayles	RH	Youth Justice Service Manager	Isle of Wight Council
Samantha Rooney	SR	Assistant Principal	Isle of Wight College





1 2 3	Minutes	Action
1.	Welcomes, introductions and apologies Introductions were made by everyone. Apologies have been received from Amie Cass, Jo Dare and Abigail Metcalfe.	



<b>2</b> .	Insights from young people
	Abigail Metcalfe sent apologies but had sent an update to be shared within these minutes:
	The Isle of Wight NHS Youth Forum are planning to do surveys/research on the impact of having a sibling with SEND and neurodiversity. We could share findings with this group to evidence where we need additional support.
	IOW NHS Youth Forum and Artswork (who helped us create sensory garden) are collaborating (alongside other young people) to improve the Youth Trust reception and CAMHS front and waiting area. Next year of funding starts in April so it may be worth linking with them if spaces need to be made SEND friendly.
	NHSE Children and Young People's Transformation Board are scheduled to meet with Sue North and team who head up Learning Disability and Autism for NHSE by end of January. Is there anything island specific that could be raised there, either as a positive example or questions/challenges?



3.	Insights from Parents/Carers	Action
	Apologies received from Parent Carer Forum representatives.	AW to initiate
	The Parent Carer Forum group has decided to cease operations and disband. AW wanted to thank the parents and carers who have led Parent Voice and dedicated so much of their time representing the voices of children, young people and families on the Island over the years. This means that currently there is not a formal Parent Carer Forum on the Island. The Integrated Care Board and the Council will need to work with parents and carers to decide how to re-establish a Parent Carer Forum group. This could be achieved by for example inviting all parents of children who have an EHCP to join a group, led by the ICB and Council initially. Firstly, the purpose would be to listen to voices in the interim and secondly, to provide a forum where parents and carers may come forward to establish a new forum. The ICB and Council could provide some structure for it to become established over time by the parents and carers. AW expressed the need for the forum to be representative of a full range of needs and ages.	discussion with key colleagues around setting up new PCF



4.	Update on System Workforce Board	Action
	LG is the chair of the Isle of Wight System Workforce Board. This reports directly to the Isle of Wight Health and Care Partnership. This has been in place for a few months. One of the main workstreams is the development of the Workforce Strategy for the Isle of Wight across Health and Social Care system. Membership on the board has increased and is representative of our wider system. On the 4 <sup>th</sup> December there is a workshop to finalise that strategy. After this, the strategy will be circulated to the Island Health and Care Partnership for partners' input with a request for it to be adopted by sovereign organisations. AW will be representing Children's Services at the workshop.	LG to share this in future with members of this meeting
	AW thanked LG for her leadership in driving this forward.	
	AH raised whether a SEND competency framework sits within the Workforce Board. LG confirmed that the System Workforce Board is system wide and more strategic, therefore this work would sit somewhere else. There are multiple frameworks around competency which respective subject matter experts take responsibility for.	<mark>Action</mark> HM, Competency
	AW shared that one of the recommendations from the Local Government Association SEND Peer Challenge was relating to a whole Island workforce strategy for SEND. This detail around competency framework may sit within the action plan that will be created as a result of the peer challenge.	Framework to be built into SEND
	MP raised that there is already an existing SEND Competency Framework that is used by other Local Authorities which can easily be adopted.	action plan.



5.	Draft Performance Dashboard	
	AW shared that we do not currently have a performance dashboard. It has not yet been agreed what metrics should be used to measure success. A draft performance dashboard needs to be created for early 2025 and from April 2025 it would be populated regularly to measure impact of work.	
	The Data and Insights Team within Children's Services is now full in terms of staffing. Once we have agreed on what Key Performance Indicators are used, it could be a job for them to co-ordinate the dashboard. Some data would be supplied by the Council, some by NHS colleagues so we will need to be clear on who is supplying what etc. It would be produced	Action
	quarterly. AH shared that they now have a Children's Care dashboard which can be broken down by Local Authority areas. It is workflow led, including detail on number of referrals and length of waiting lists.	MM to send AW anonymised spreadsheet
	AW showed everyone a draft of the Key Performance Indicators that we might include in the performance dashboard. This will be sent out with the minutes. Views and comments on this were welcomed.	of other local area's metrics that
	LG suggested it could be useful to include children in homeless accommodation who have SEND, to ensure they are supported appropriately. LG also mentioned the inclusion of data on disabled facility grants.	they use. <mark>Action</mark>
	There will be a need to find out what data already exists and is reported on, as a good proportion of it we will already have. It is not about creating something from scratch but about pulling information together in one place.	AH and HM to discuss outcome
	AH mentioned the need for data around transitions, particularly preparing for adulthood. This is difficult to measure.	measures for transitions



ô.	Break	
<b>.</b>	Deep Dive: Local Government Association SEND Peer Challenge Report	
	AH asked if anyone had any comments on the report they wanted to share.	
	AW's reflections are that it was a really worthwhile exercise to inform long term improvements. The LGA spent four days meeting with partners and colleagues, they also joined the last SEND Partnership Board virtually. They also audited 19 random Education, Health and Care Plans (EHCP) before their visit. They were able to see a mix of age ranges and provisions in the EHCPs selected. There is a separate report on these findings which will be included with these minutes.	
	Feedback from colleagues they met with was that inspectors were positive in their approach. AW shared a presentation which showed the 12 recommendations. This will be included with these minutes.	
	<ol> <li>Develop a SEND strategy and delivery plan based on findings of this report with rigorous multi-agency governance and shared arrangements for understanding spend</li> </ol>	
	We acknowledge the need for new strategy for the Island and know we need a rigorous multi-agency governance. It was felt that the right people are involved in this work.	
	<ol><li>Coproduce and deliver a comprehensive communication strategy, setting out what happens when and what to do if delays occur.</li></ol>	
	They received feedback from colleagues and families. They felt more communication could be implemented. If we are to develop a 3 or 5 year strategy does everyone know what we are going to do and when. Ashley highlighted that there is no one here today in attendance from schools themselves,	
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## Hampshire and Isle of Wight

3. Strategic school placement planning must be flexible and adaptable, designed to meet the needs of the children and young people rather than expecting them to conform to category focused provision.

Significant progress has been made on this in the last 6 months, with the opening of the Studio School in East Cowes. There is still a lot more to do so this recognises the need to have an adaptable and flexible approach on the Island which meets the needs of children and young people. We also need to ensure those children that are educated other than at school have appropriate support in place.

4. Develop and deliver an effective identification and early intervention process and improve ordinarily available provision in mainstream schools as part of a graduated approach, with jointly commissioned investment available to children and young people without an Education, Health and Care plan, especially speech and language and other therapies.

When children have needs identified, they are going to statutory process too quickly. Assessments should be earlier and result in a more graduated response, with assessment and plans prior to the statutory EHC process. Additional support should also be available without a plan. If we get early intervention right, then some children will not need to accelerate through the statutory system. We particularly need to think about how we get therapeutic support in place without the child have an education health and care plan.

5. Improve content and accessibility of a co-produced Local Special Educational Needs and Disability Offer.

The Local Offer website will need co-production with families. This is in the process of being done.

- 6. Develop comprehensive workforce and training strategy that enables families and voluntary sector organisations to participate, maximising impact of existing local services.
- 7. Ensure the education, health and care plan annual review process is the single mechanism to monitor progress, inform decision making and determine resource allocation.

Heather is leading on the work around statutory process and annual reviews.



8. Undertake a strategic review of children who are Electively Home Educated.

The national average for home education is 1.4%, compared with around 3.7% on the Island. There are many different reasons for this, the first one being that philosophically that is what some families want to do. But secondly, there is a group of families who have been dissatisfied with mainstream education and decided to home educate, but this wouldn't have been their preferred option. The third group is families who are electively home educating their children and we don't know the quality of education provision being provided at home. RH shared that many of the children supported by the Youth Justice Service are not receiving an education; we know that children are more likely to come to the attention of police if they don't have a positive use of their time.

9. Co-produce research and guidance to understand and strengthen areas of development for transitions for all ages and stages

Support is also needed for young people that will be qualifying for support in adulthood, we also need to manage family expectations where children who have an EHCP may not meet criteria for support under the Care Act.

10. Develop a shared outcomes and impact framework with multi-agency oversight and performance monitoring.

What does success look like for children/young people and families? Not what we think it looks like.

11. Investment is required to develop the skills and capacity to deliver further improvement in the Educational Psychology Service. There also needs to be further investment to create an integrated 0-25 Commissioning team, Designated Social Care Officer and Participation and Co-production Officer posts.

AW shared there is a significant challenge around Educational Psychology. Naomi and Heather are working to identify how we can access additional educational psychology capacity, to ensure we can get statutory assessments within 20 weeks back on track. The timeliness for this is below 10% currently, this is because we don't have the ability to get advice from Educational Psychologists to assess needs or indeed to issue a plan.



They also recognised that there are opportunities around how we commission placements.

12. Create a high needs sub-group of the Schools Forum to ensure that schools are at the heart of funding decisions, coproduction and joint owners of the Designated Schools Grant recovery plan.

Funding comes from various different 'pots'. Special Educational Needs is funded from the high needs block, which is from the Designated Schools Grant, which is in a significant overspend. They are recommending we establish a sub-group of schools forum which looks specifically at the high needs block. The council cannot solve this problem on its own, we need Early years, Schools and Post-16 providers on board to help do things differently.

HM said from discussions with a number of people, the visit from the LGA was encouraging. They met with a lot of people and could see that we know where our strengths and weaknesses are. It felt that when I met with them individually and as part of group meetings, we were collectively saying that things were under review. They saw this as a positive and could see the steps taken in such a short space of time.

AH reflected that some of these recommendations are sizeable, and some are quick wins.

These recommendations will drive some of the SEND Inspection preparation work that is going on. HM shared an update on this work. Colleagues from Education, Health, Children's Social Care and Adult Social Care have been meeting fortnightly to focus on the Annex A documentation and requesting evidence from teams. In the Spring term, the quality assurance process will start for some of the data that has been received for Annex A. Further dates for dry runs will be confirmed.

The team have been reviewing the actions from the previous Local Area inspection, although this was some time ago it is useful to demonstrate how we have collectively moved those actions forward. A session is taking place this week to focus on the action plan and there will be another session before Christmas to collectively review the peer challenge reports.

AH asked people in attendance if they felt engaged in the process and if there are any areas where people feel they could be more involved.



	The SEF was shared with the regional SEND Mental Health and Learning Disability team for the NHS and the really positive feedback about the construction and detail of it. AH has asked whether it can be used as an exceeding a list of things that happen on the Island that is good practice and examples. AW asked about progress of the multi-agency audit tool for EHCPs. AH said there was a meeting last week w to look at a system for this. There is a cost implication to this, but it would allow NHS to join in with quality ass data. Further discussions about a system will need to happen fairly quickly. As part of Safety Valve group have quality of EHCP's but also MP has been looking at quality of advice that is submitted by health professionals f HM shared that draft plans will come through this board. As part of the Local Area Inspection, there is a Powe inspection' and another one that has been made collectively from across education, health and care to roll out leads so their officers can be sighted and confident during the inspection process.	emplar. AW is ith Southampton urance and view been looking at or EHCPs. rPoint for 'what is	
8.	Actions from previous meeting AM had raised concerns around keeping siblings involved during SEN processes. HM raised this with the Parent Carer Forum	To be discussed v PCF when this is	
	Communication for parents with regard to cygnet and other courses and support	This will be carried the next meeting t update	
	AW and LG were going to check representation for the Adult Workforce Board around Educational	Education Psycho on the next agend	





9.       Any other business         NC shared an update on Education psychology. Recruitment is underway for a Principal Education Psychologist and Education Psychologists. The design of the team has been scoped out and the workload that is required. Adverts have been extended until after Christmas. The adverts are Soulbury contracts rather than Isle of Wight terms which is gaining more		
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<ul> <li>Hampshire are currently undertaking the last assessments as contracted, however there is a backlog which we will need locums to pick up.</li> <li>NC said that Assistant Education Psychologist roles were advertised but had to be withdrawn. These posts had a lot of interest as they do not require the same qualifications as an Education Psychologist. It would be remiss to appoint to these positions if they did not have the support and depth from a Principal Education Psychologist.</li> <li>CC mentioned the co-production forum. HM said that one session has taken place for the Rise project and there was another</li> </ul>		



result of this, sessions may have to be paused for now. HM has a follow up call with the DfE this week. CC said that young people aren't aware of the reason the session was cancelled. It would be good if the young people involved had an explanation.	Action HM to feedback CC's comments to DfE
<ul> <li>Forward plan</li> <li>January <ul> <li>Pathways into adulthood</li> <li>Preparation of Local Area Inspection (10-15 minutes as standing item)</li> <li>SEND Self-Evaluation (updates from LGA SEND Peer challenge)</li> <li>Education Psychology</li> </ul> </li> </ul>	



