

**MINUTES**

<b>Meeting:</b>	SEND Programme Board	
<b>Purpose or Mandate:</b>	To provide strategic oversight and direction for the implementation of the SEND reforms	
<b>Date:</b>	28-03-2024	
<b>Place:</b>	<b>Teams Meeting</b>	
<b>Times:</b>	10:00-13:00	
<b>Members:</b>	<p>Ros Somerville (RS) (Joint SRO)  Wendy Allen (WA)  Lawrence Chapman (LC)  Codrutza Oros-Marsh (COM)  Nicki Howlett (NH)  Paul Hill (PH)/Sarah Gibbs (SG)  Nicki Cooper (NC)  Adrian Orr (AO)  Rebecca Hulme (RH)  Nic Smith-Howell (NSH)  Garry Joyce (GJ) (RSO) <b>Chair</b>  Nicola Roper (NR)  Rowena Mackie (RM)  Claire Smith (CS)</p>	<p>AD, Inclusion (CHW, SCC)  SEND Programme Manager  CEO SENDAT  AD Children’s Social Care  SENDIASS  CFYP Suffolk NSFT  Public Health  AD, Education, Skills &amp; Learning (CHW, SCC)  Great Yarmouth &amp; Waveney ICB  AD of Integrated Community Paediatric Srvs  AD Children’s Transformation (SCC/ICBs)  AD, ACS  <i>Head Teacher Northgate School</i>  SPCF Chair</p>
<b>Invited to Attend</b>	<p>Izzy Connell (IC), Headteacher SES – Priority Lead  Mark Gower (MG), GY&amp;W ICB DCO  Kathryn Searle (KS) IES/WS ICB  Clare Besley (CB), Integrated Service Manager - Priority Lead  Fran Arnold (FA), Head of Children Social Care Field Work  Julia Illott (JI)– Engagement Hub Lead  Francesca Alexander (FA)– Head of SEND  Hannah Holder (HH) – DCSO  Jack Walker (JW) – DCO  Michael Hattrell (MH) NSFT – In place of Nicki Cooper  Nicola Rice (NR) – NSFT  Anna Butcher AB (Project Manager) – Note Taker  Sophie Cooke (Project Lead Officer)  Emma Connell-Smith (Project Lead Officer)</p>	
<b>Invited Guests:</b>		

**PART A – contains items that could be disclosed in full to the public and staff**

No	Item Description
1.	Welcome & Introductions.
2.	<p><b>Case Study</b> (Nic Smith-Howell)</p> <p>Nic Smith-Howell presented a case study in the form of a PowerPoint presentation</p> <p>Nic chose one of the complex cases which was looked at as part of the 'Deep Dive' during the Ofsted inspection.</p> <p>'Bina'</p> <p>History - Born in India and with small head circumference, suffered seizures soon after birth, but not much other information was available. Some investigations took place but limited understanding of what her needs were at the time.</p> <p>Parents moved to the UK for work when Bina was aged 2, in 2015. GP referred to acute services. Health Visitor referred to community services.</p> <p>Diagnosis of cortical visual impairment which also included bilateral cerebral palsy, microcephaly, global developmental delay and feeding difficulties.</p> <p>Significant amount of involvement over the next 2 years which included referral to the following.</p> <ul style="list-style-type: none"> <li>• Ipswich Child Development Centre for full multidisciplinary assessment</li> <li>• Genetics team at Addenbrookes hospital for family to join genome study</li> <li>• Dietetics</li> <li>• Paediatric surgery - gastrostomy fitted,</li> <li>• Suffolk Communication Aids Resource Centre</li> <li>• Therapy focussed Suffolk – Intensive review of posture and functional assessment</li> <li>• CP integrated pathway for musculoskeletal monitoring</li> <li>• Other investigative procedures including MRI</li> </ul> <p>The family have been given additional support with housing adaptations, Bina's visual impairment, and management of her epilepsy.</p> <p>She attends a Suffolk special needs school 3 days per week and an EHCP – In place since September 2018,</p> <p>Reviewing documentation identified huge amount of involvement with professionals - Approx 30 health appointments over the last year. Main findings included;</p> <ul style="list-style-type: none"> <li>• Large amounts of documentation and supporting information within the school that wasn't necessarily reflected as fully within the EHCP as it could have been, although the EHCP was deemed to be adequate.</li> <li>• Annual reviews had a degree of variance in production. The child's needs are well known and supported and therefore these probably could have been reflected better in the EHCP.</li> <li>• Communication – Parents first language is Hindi and not sure how much English they understand. SALT plan doesn't address this.</li> </ul>

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	<p><u>Strengths –</u></p> <p>Really strong multi-agency partnership working in place with a huge amount of involvement across a number of professionals.</p> <p>Overall, the EHCP was deemed adequate, but the detail could be improved in certain areas. Potentially for children with very complex needs we could have professionals writing directly into plan sections, rather than providing evidence to be translated.</p> <p>Jack – Comments</p> <p>Therapists writing directly into a plan also came up in Anna’s feedback from professionals as part of the Strategy work, that a more effective and efficient ways of working are wanted by professionals.</p> <p>Also highlighted in the review - paediatrician letters sent to the school weren’t visible in the amended EHCP’s – and this had been a learning point.</p> <p><u>Questions</u></p> <p>Jack – Requesting information on how the family initially accessed services.</p> <p>Nic – Identified that the GP referred quite quickly to the acute and that Health Visitors are notified of any child that moves into the area.</p> <p>Jack – Asked how this would work with a child over 5?</p> <p>Nic – Identified that we are reliant on the GP.</p> <p>Ros – Identified Izzy is leading on the annual review training and asked if there could be a focus on supporting special schools with including professional advice in EHCP’s.</p> <p>Acknowledged that SC is looking at liquid logic and whether professionals could write directly into plans.</p> <p>Nic – Highlighted that largely information is being translated onto plans through cut and paste but there is scope for plans to be co-produced in a better way.</p> <p>Ros – Clarified that plans are about what is current and pertinent, what are the child’s needs and how are you going to meet them, not the child’s entire story.</p> <p>Izzy – pointed out that AR training is generic and based on the Council for Disabled Children and given a Suffolk context. It’s applicable to any educational setting for children with a wide range of needs.</p> <p>Hannah – Social care having a challenge getting contributions into AR’s across the board and a particular issue for DCYP. Information from the AR not being shared back to family services. Designed a form to try and address this - having a real push on that this year.</p> <p>Fran – Identified that FS are looking at quality of amend alongside QA team. Previously focus has been on quality of new EHCP’s now looking at quality of AR’s.</p>

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	<p>Mark – Concerned discussion is getting stuck in the process of the EHCP document, rather than the actual content of what the child or young person’s needs are. Need to be focussing on partnership working, outcomes for children and young people.</p> <p>Fran – Highlighted the quality of the AR’s is also looking at the use of liquid logic, how we track outcomes and progress and seeing the quality of provision.</p>
3.	<p><b>Governance</b></p> <p>Area highlighted in inspection was the strengthening the governance of the local area partnership. A governance proposal went to Shadow accountability board and is awaiting sign off by ICB.</p> <p>Proposal identifies a 3-tiered governance process that will include an Improvement Board, Programme Committee and Programme Office. Details of proposals, membership, TOR and the type of reporting that will be going to each of those is included in meeting pack for anybody to provide additional comments.</p> <p>Ros – Requested that these are checked to ensure they have been updated to reflect inclusion of SPCF within the entire structure.</p> <p>Mark – Requested that we ensure terms ICB and SNEE and Norfolk and Waveney are used consistently in the documents. Also is their representation from Waveney providers as we have from the rest of the Suffolk providers.</p> <p>Gary – Requesting highlight of any inconsistencies in language to allow for review.</p> <p>Ros – Providers and where they sit within this governance structure discussed yesterday at Seniors Officials Meeting with the DfE and providers. Intent is to have providers spread throughout the structure from all parts of the system. Still awaiting decision on Suffolk’s intervention.</p> <p>Nic – Identified risk of people duplicating effort if attending all of the committees. Although different role for each, if papers are the same there’s an inevitability it could get stale because the same information will be shared repeatedly. Need to ensure committees are purposeful and not operational.</p> <p>Gary – Agreed there will be some elements of duplication, however these meetings can be reviewed.</p> <p>Graham – Identified that we will need to ensure the meeting items are very purposeful and distinct and relate to the particular purpose of each committee. Conscious of people’s time and using it effectively.</p> <p>Graham – Highlighted that frequency of the meetings identified in slides are out of date. The improvement board will meet bi-monthly until September (every 2 months) and this committee is going to meet monthly until September.</p> <p>Nic – Identified commitment from the system is what is needed but it’s going to be challenging due to volume of work. Not just commitment of high-level meetings, but also the workstreams will require meetings as well as well.</p>

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	<p>Wendy – Requested feedback for the governance structure by next Wednesday. Next week will be sharing meeting dates with attendees.</p>
4.	<p><b>Update on Draft SEND Strategy</b></p> <p>Anna – Gave overview of SEND Strategy and progress.</p> <p>Wendy – Partnership meeting 2 weeks ago agreed extension to allow for co-production, new revised timeline reflects this.</p> <p>Anna – 729 responses from professionals, parent/carers and some young people. No real surprises in the responses. Feedback given told us the top 3 areas people wanted to see improved were very clearly –</p> <ul style="list-style-type: none"> <li>• waiting times</li> <li>• communication and listening</li> <li>• increased availability of places for children.</li> </ul> <p>This was shared back out to the system to identify that we had listened and read the responses, and these were the findings.</p> <p>The vision was formed by collating information from across the partnership and working group used this information to develop the vision statement and logo, using the words most frequently referenced. Further feedback was sought requested and overall, this was positive, with some changes suggested which will be adopted.</p> <p>4 logos have been designed following feedback from Rebecca that the logo should be chosen by young people. We worked with the engagement hub who spoke to approx. 80 young people face to face to ensure they understood what was being asked of them and they could give rationale for their choices. SPCF however have requested this is shared more widely, so the 2 most popular logos were selected and shared via various digital platforms.</p> <p>SPCF – Identified she'd not been able to find the link to share this.</p> <p>Wendy – Agreed to forward this to SPCF.</p> <p>Anna – Coproduction working groups identified the priority areas.</p> <ul style="list-style-type: none"> <li>• Communication and Information,</li> <li>• Right Support Right Time,</li> <li>• Quality and Timeliness</li> <li>• Preparing for Change.</li> </ul> <p>The slides detail specific areas of focus under the priorities, however we have since gained feedback as part of the second consultation that will alter these slightly. The headings however will be remaining the same.</p> <p>Wendy – Slide outlines findings from the Ofsted/CQC inspection and the priority areas we need to focus on, which align with feedback from families. Some similarities of the headings to the last SEND strategy, but it is clearly identified that</p>

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	<p>these are the areas families want us to focus on. Need to now focus on being able to measure the outcomes, to ensure we can see the impact.</p> <p>We have a couple of weeks to finalise first draft and within this time will be having a series of co-production sessions to create this. Areas of focus include.</p> <p><b>Foreword</b> - SPCF asked if Andrew Reid could be the author. A draft version of that which will be shared with colleagues.</p> <p><b>Context</b> - Originally looking at data to set the context. However, Rebecca suggested to take format of 'What it's like to be a young person/ parent/carer/practitioner in Suffolk'. SPCF provided with raw data and will use this alongside feedback to identify parent/carers experience. Contextual data will be included alongside each area.</p> <p>Summary outline of progress against previous SEND strategy.</p> <p>Strengths, challenges and barriers to be identified. Some discussion about the word 'challenges". Likely to be different strengths and challenges in different parts of the system.</p> <p>Anna leading on section of how strategy has been co-produced.</p> <p>A Summary Action Plan which will include the summary actions from the PAP. This will state objectives and impact alongside intended ways of measuring this.</p> <p>Further sections will include the governance and oversight as previously discussed, appendix which will contain the full action plan and a glossary of terms.</p> <p>Fran – Asked how we're engaging with teachers and family service co-ordinators on what it's like to be a practitioner in Suffolk?</p> <p>Wendy – We have shared a jam board with all family service managers for them to gain input from the teams.</p> <p>SPCF– Asked for submission date for 'what it's like to be a parent/carer in Suffolk'</p> <p>Wendy – 16<sup>th</sup> April</p> <p>SPCF – Identified challenge of achieving this within the timeframe.</p> <p>Wendy – Agreed this could be pushed back several days.</p>
6.	<p><b>SEND Local Area Inspection – Priority Action Plan</b></p> <p>Ros – PAP signed off by Ofsted and no further changes can be made to this. Monitoring will be in the form of 6 monthly meetings with the DfE. DfE acknowledged work already happening however a lot of work still to do.</p> <p>The big difference is Governance of the Local Area Partnership and that we are evidencing impact of outcomes and improved experience for children and young people.</p>

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	<p>DfE questioning whether strengthening or changes are required SCC felt there was a need to do both.</p> <p>Revisit will be in 18 months from the publication of the letter, which was at the end of January 2024, so we have less than 18 months before our revisit.</p> <p><b>Review reporting and monitoring of Impact Measures</b></p> <p>Graham – Has put together a dashboard to identify what we currently report on and where the gaps are and how we compare to other comparable authorities. Acknowledges a number of different reporting documents in different places, some measuring outcomes and some processes. Measures will need to be more dynamic going forwards and include parent and young person feedback.</p> <p>Gary – Identified considerable time taken to pull together but now getting some consistent reporting. Need to look at the this now and identify indicators that can demonstrate impact.</p> <p>Jack – Nothing of note within the data to report. The health dashboard is always a work in progress, started being more about activity, but want to make it more about outcomes and experience.</p> <p>Meeting with NSFT to look at obtaining regular data regarding outcomes pre and post clinical intervention for CYP across Suffolk.</p> <p>Mark - Need to report in a more effective way that demonstrates improvements and productivity. A meeting on the 8<sup>th</sup> April to look at developing more meaningful high impact measures.</p> <p>Previous meeting meetings checked for accuracy.</p>
7.	<p><b>Agree Minutes and Action Log</b></p> <p>Wendy – Went through items on the action log.</p> <p>The only action requiring more discussion is in regard to the presentation that Jack and Mark were going to bring.</p> <p>Jack – Due to present today on the new East of England guidance around EHC needs assessments and the role of health in these. Queried this last week, it needs to be decided about where it needs to go, to make sure we’re all on the same page.</p> <p>Ros – Agreed this could start in the programme office and then come to the programme board.</p>
8.	<p><b>Forward Plan</b></p> <p>Wendy - Extra ordinary programme board on 29<sup>th</sup> April to sign off the SEND Strategy</p> <p>Graham – We’ll be looking at the PAP and bringing updates from each area to the next meeting. Going forwards the PAP and the SEND Strategy will be a key focus of this meeting.</p> <p>Ros – It was suggested at the Senior Officials Meeting yesterday with the DfE that case studies should also include the voice of Head SENCO’s and Chief Execs.</p> <p>Next Case Study to be brought by Hannah Holder</p>

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	<p>Gary - Next meeting 23<sup>rd</sup> May including Locality update from SES, PTS and Health, Attendance at section 19, NDD updates and Young Persons Network will be in attendance as well.</p> <p>Wendy – The agenda may change quite significantly to align with PAP and SEND Strategy. Young People’s Network will need half of the next meeting and will need any questions in advance.</p> <p>Ros – Requested amendment of the logo that is out for consultation to remove the 2 remaining puzzle pieces from the picture.</p> <p>SPCF – Reported positive meetings with the chair of the Improvement Board and the new director coming in July. Communication will go out to families about this.</p> <p>Gary – offered transport to enable SPCF to get to the next meeting.</p>
9.	<p><b>Any Other Business</b></p> <p>N/A</p>
	<p>Next Meeting is scheduled for 23<sup>rd</sup> May 2024</p>