

SEND and Alternative Provision Strategy & Partnership Board
25 June 2024, 10.30-12.30, Committee Room 3, County Hall, Chichester

Brian Pope, Independent Chair

WSSC

Jenny Boyd, AD Children's Social Care/Early Help

Claire Hayes, Head of Early Help

Claire Prince, Head of SEND & Inclusion

Vince Clarke, Children First Transformation Director

Louise Fox, Head of Service Assessment and Family Safeguarding

Vicky Richardson, Head of Practice Improvement and Inspection

Sarah Clark, Head of Virtual School

Kathryn Kellagher, SEND Development Officer

Marie Foley, Head of Data, Projects and Systems

Nadia McGarry, SEND Improvement Lead

Charlotte Hornsey, Head of Early Help

Sam Taplin, Public Health

Charlotte Smith, PWG 4 lead AP

Shaun Jarvis, Alternative Provision

Lauren Boal, Voice and Participation Officer

Jay, SEND Youth Ambassador

Education and schools

Phillip Potter, Head Oak Grove College

Simon Brown, Head of SEND, Chichester College

Mark Wignall, Head, Downlands Secondary

Nicky Smith, Parklands, School Governor

Health and Commissioning

Sally Kean, Children's Commissioning Manager

Parent Carers

Rowan Westwood, West Sussex Parent Carers Forum

Apologies

WSSC

Lucy Butler, Director of Children's Services

Loretta Rogers, AD Adult Operations

Fiona Mackison, Public Health Strategic Commissioning Lead

Amy Leftwich, Public Health

Karen Furse, Head of Standards & Effectiveness

Daniel Ruaux, AD Corporate Parenting

Andy Thorne, Strategic Finance Business Partner

Grace Hall, Early Years SEND Lead

Steve Trippier

Education and schools

Claire Kenyon, Busy Lizzies, Early Years

Doug Thomas, Head APC

Lisa Harris, Head Rumboldswyke

Zoe Gordon, Head North Mundham

Health and Commissioning

Caroline Tozzi, Integrated Care System Health Lead

Department for Education

Liz Flaherty

Councillor Representative

Jacque Russell, Cabinet member

Parent Carers

John Clifton, West Sussex Parent Carers Forum

1. Action Log

Nov 23 Action 5.1 Close Action WSPCF presentation on parental feedback. CH is setting up a regular communications with parents and a response to the survey coming out this term.

Nov 23 Action 5.2 Close Action A series of meetings is being planned for the autumn term. These are in addition to the Outcomes framework (6 week data).

5 March Action 5.1 Close Action The National SEND Dashboard publication is on hold because of the election. MF to forward the dashboard when it is circulated.

29 April Action 6.1 Ongoing action around health data and the timeliness of health contributions. Kate Courtney has left the DCO role and the work will be continued by Caroline Tozzi.

2. EHCP Response Plan

See attached presentation. This reflects the changes referenced in the action log. We have identified the data errors in Mosaic that result in Null figures and SENAT is working to fix these.

- Our target is that we will complete 49% of EHCPs within twenty weeks by July 25. This will put us in line with the national average and is a more realistic target than was previously set.
- Social care timeliness – May figures look wrong. MF to check.
- Lengthy consultations with schools are contributing to the delays in issuing EHCPs.
- 37% of requests do not lead to assessment, which suggests that thresholds are not fully understood by partners and that our focus should not just be on timeliness. The DBV programme is focused on improving inclusivity in mainstream schools.
- The WSPCF raised two ongoing concerns:
 - the ratios between the priorities and how they are being looked at.
 - the timeframe for putting us in line with the national average has been extended twice.
- Include the average number of weeks it takes to complete an EHCNA in the data set.
- From September, there will be a Review and Monitoring team in SENAT and they will hopefully be able to attend more annual review and have conversations with schools about the impact of EHCPs, and if they are still required.

ACTIONS:

2.1 Check the social care timeliness figures which look wrong.

2.2 Include the average number of weeks it takes to complete an EHCNA

3. Measures for the Ofsted Improvement Plan

See attached presentation.

Working with the Partner Working Groups (PWGs), including health colleagues, we have put together a set of proxy indicators against the five Ofsted recommendations. A draft was circulated to WSPCF who have come back with constructive challenges.

There are a number of outstanding elements, which we need to make practical decisions about in the next two weeks, as the measures should already have been sent to the DfE. These are proxy indicators for us to monitor if we are on track and can be reviewed in six months. Alongside these we have the detailed action plans of the PWGs which are reported into this board.

Areas of Improvement 1 and 2

- 1/2.3 physiotherapy target is higher than baseline. The baseline should be an average for the year. SK to clarify.
- The area of improvement includes all NDP pathways but the only statistic is about autism referrals. The indicators need to reflect all providers and include all pathways as they have very different waiting times.
- The area of improvement is also about gaps in provisions. CT to come up with a proposed proxy indicator.
- The CAMHS improvement from 9% to 80% is very ambitious and needs clarifying – it's important that targets are realistic.

Area of Improvement 3

- QA process – WSPCF to audit three EHCPs that have been through the audit process. QA activities to be included in SEND Performance slides and to have a quarterly focus at the Board meetings. Currently focusing on newly written EHCPs but as we develop our QA activities, we will look at annual reviews and amendments to EHCPs. We also need to look at the quality of advice from schools, health, social care and EPS.

Area of Improvement 4

- 4.1 – these are the actual numbers for what we are/will be providing. GO to provide an indicator from the SEND Sufficiency strategy around the number of actual need.
- 4.4 – will have data by end of week.

Area of Improvement 5

Need to consider what we should be measuring and why in relation to transitions to adulthood.

- 5.5 – include numbers of CYP with EHCPs on supported internships alongside percentage.

ACTIONS:

3.1 - 1/2.1 to reflect all providers and all NDP pathways, not just autism

3.2 - 1/2.3 review physiotherapy target, should be an improvement on the baseline

3.3 - 1/2 include a proxy indicator for gaps in provision

3.4 - 1/2.5 review CAMHS target which is very ambitious

3.5 – 4.1 provide an indicator from SEND Sufficiency strategy around the number of actual need

3.6 – 5.5 include numbers of CYP with EHCPs on supported internships alongside percentage. Link with Mike Smith.

3.7 – MF to circulate updated version of the metrics

4. Update from West Sussex Parent Carer Forum

See attached presentation - **WSPCF Year 1 1 & Post 16 College Survey April 2024**

- Key learning point – conversations around post-16 options need to start early – Y9 in secondary schools with all students. Where CYP have an EHCP, these conversations also take place during the annual review meeting.

- Many CYP don't know what they want to study at college until they get their GCSE results in August, which means that the transition can feel rushed. There are no entry requirements for T levels. Post-16 provisions tend not to turn CYP away but will make an offer, which isn't always what a young person wants.
- There needs to be more choice for neurodiverse CYP.

The survey will be shared with the transitions PWG.

5. Improvement Plan: Partner Working Groups

See attached presentation.

PWG 4: Alternative Provision

- We have a DPS for alternative provisions that have been quality assured by Charlotte's team.
- An investment in outreach would help young people stay in mainstream. Some secondary schools provide an enhanced mainstream offer.

ACTIONS:

5.1 Unfortunately we ran out of time to focus on the workstreams under this PWG and agreed that Charlotte should have 10 minutes at the beginning of the next meeting to go through these.

6. Feedback from young people

See presentations on the APC Project and JWR with Lived Experience

APC project

- Relationships with staff are very important to CYP and generally they felt they had better relationships with APC staff than in mainstream. They preferred the smaller setting with the relationship model with staff.
- This needs to be balanced against the small number of key academic subjects offered at APC compared to mainstream schools.
- CYP wished that there were secondary options for those who can't cope with large mainstream secondary settings.

CYP with Lived Experience

CYP gave a moving and inspiring account of their determination to get a full education, which has included time in mainstream primary and secondary schools, time as an inpatient at Chalkhill Education Centre, time as an outpatient with blended learning, mainstream college and now university where they are studying for an integrated Master's degree in biomedical science.