

SEND and Alternative Provision Strategy & Partnership Board
29 January 2026, 10.30 – 12.30, Meeting Room 14, County Hall North, Horsham

Chair

Brian Pope, Independent Chair

WSCC

Adrian Dyka, Interim Assistant Director Corporate Parenting

Andrew Parker, Head SEND & Inclusion

Claire Hayes, AD Education & Skills

Daniel Ruaux, Director of Children's Services

Doug Thomas, Head APC

Kathryn Kellagher, SEND Development Officer

Nadia McGarry, SEND Improvement Lead

Natalie McNeill, Designated Social Care Officer

Rebecca Turner, Head of Commissioning

Vicky Richardson, Head of Practice, Improvement & Inspection

Education and schools

Phillip Potter, Head Oak Grove College

Matthew Whatford, Imberhorne School

Simon Brown, Chichester College

Liz Mellor, Horsham Nurseries

NHS Sussex ICB

Amanda Sangster, AHP Divisional Director - Planned Care

Caroline Tozzi, Joint Director Children & Young People, Strategic Lead for SEND

Toby Silverman, SEND Improvement Manager

Parent Carers

Clare Eels, West Sussex Parent Carer Forum

Rowan Westwood, West Sussex Parent Carer Forum

Department for Education

Liz Flaherty

Luke Parker

NHS England SE SEND Advisor

Adeline Gibbs

Councillor Representative

Jacquie Russell, Cabinet member

Apologies

WSCC

Anna Parsons, Early Years SEND Lead (maternity cover)

Sam Taplin/Graeme Potter, Public Health

Heidi Farr, Head of Assessment & Family Safeguarding Central

Karen Furse, Head of Standards & Effectiveness

Kieron Lyons, AD Children's Social Care and Early Help

Loretta Rogers, AD Adult Operations

Education and schools

Nicky Hiscock, Governor Parklands Primary

Lisa Harris, Rumboldswyke

NHS Sussex ICB

Isabelle Hodgson, Community Paediatrician and Interim Designated

Clinical Officer for SEND, NHS Sussex

1. Welcome

- Brian reflected on progress over the past two years, during which the Board has matured and is more effective. It must now focus on evidencing impact on children, young people (CYP) and families, not just activity.
- To ensure meeting time is spent on scrutiny and strategic challenge, rather than listening to long presentations, it was agreed that:
 - Presenters must submit papers a week in advance for circulation with the agenda
 - Board members must read the papers in advance
- We need to focus primarily on the five Ofsted Areas for Improvement from the 2023 SEND Local Area Inspection, with minimal distraction from other system issues.
- The Board must strengthen how it measures impact, which will be through structured capture of CYP and family voice.

2. Action Log

See action log.

3. Report by Exception

DfE suggested a review of all five Ofsted areas for improvement at every meeting. We have a system where we look at the areas in depth on a quarterly basis. It was proposed that we keep this system but supplement it with a standing Report by Exception. This would allow for timely escalation and avoid long gaps between updates.

Preparation for Adulthood update – Supported Internships

- Supported Internships
 - Funding and GDPR issues are now resolved and Woodlands Meed is developing 12 placements, with good examples of partnership working with colleges and employers.
 - There are positive case studies at Chichester College with a supported internship leading to potential permanent employment and the ceasing of the CYP's EHCP. It was suggested that he and another CYP attend a Board meeting at Chichester College (to be scheduled) to share this example of good practice.
 - The WSPCF reported that there are some parental concerns around supported internships and there needs to be clearer information about the benefit for CYP.
- Transitions to adult services
 - One of West Sussex's Connected Council programmes is around transitions to adult services. This will be discussed at the board in February.

4. Risk Register

Board members were asked to review the SEND Risk Register and forward any suggestions to Brian and Kathryn by 13 February, for sign-off next month.

- Consider scoring on Risk Register, perhaps one as the inherent risk score, and a second after mitigating actions.
- The board could then review those that have a high score.
- The risk register should be considered in reports to the board.

Action

4.1 Board members to review the Risk Register and forward suggestions to Brian and Kathryn by 13 February, for sign-off at the February board.

4.2 Claire / Dan to consider scoring on the Risk Register, options including inherent risk scores and those after mitigating actions.

4.3 Once signed-off, the risk register is to be considered in board reports.

5. Terms of Reference review

The board are to review the Terms of Reference and forward amendments to Kathryn for sign-off at the February board.

- Caroline has emailed across job title amendments.
- It was agreed that we would next review the TOR in July, to take account of the ICB merger.

Action

5.1 Board members to review the TOR and forward any changes to Kathryn by 13 February, for sign-off at the February board.

6. Health quarterly update

Area for Improvement 1: Local Area health leaders should act swiftly to identify and address waiting well arrangements, and gaps in service provision to meet the full range of needs of children and young people with SEND. This includes speech and language provision, neurodevelopmental pathways and CAMHS.

There is an ongoing commitment to maintain focus on this area of work, while recognising the challenges brought but significant organisational change (ICB / Local Government Reform). The five priority SEND areas endorsed by the Children's Board in June 2025 are:

1. **Long waits for health services (including in-pathway waits):** Therapy Services; Wheelchairs; ND Pathways; and Emotional and Mental Health
2. **Health input into Education Health and Care Plans** – EHCNAs Timeliness and Quality; Annual Reviews; and Tribunals
3. **Transition Pathways** – Early Years and Post 16
4. **Inclusion in Education and Other Settings** – Special School Nursing; Managing medical Conditions in Education and Other Settings; Education Based Prevention Work
5. **Advice, Support and Engagement** – Coproduction with Parent Carers and Children and Young People; SENDIASS and Mediation; Support Whilst Waiting Offers

As part of the shift to strategic commissioning within ICB, Caroline now contributes to commissioning discussions, around meeting statutory requirements.

Discussion points

- It was acknowledged that there have been positive developments in terms of support whilst waiting. What we need to focus on now is evidencing this has had a positive impact on families and ensuring we have consistent data from all providers.
- More evidence is needed from all providers on outcomes and satisfaction.
 - COAST (Crisis Outreach Acute Support Team), launched 2025 to offer intensive, short-term multidisciplinary support to CYP experiencing a mental health crisis) is now fully staffed and is reducing Tier 4 hospital admissions for CYP.
 - Average wait times for initial assessment have improved within community CAMHS teams, falling from 42 weeks (October 23) to 10 weeks (September 2025). Caroline to find out how this was achieved.
- There are four Child Development Centres (CDC): three are provided by Sussex Community NHS Foundation Trust, and Worthing is provided by the University Hospitals Sussex NHS Foundation Trust. While Worthing has a different organisational structure, the four centres work closely and medical officers work across all four to improve consistency.
- SCFT are working to reduce wait times in Children's SALT. In the past year the number of children waiting has reduced by over 600, from 1878 to 1265. The number of children waiting for over 18 weeks has also reduced from 714 to 323.
- There are a number of feedback mechanisms in place: complaints, incidents, PALS, Friends & Family Tests, parent groups. These could be used to strengthen the impact element of the next health update.
- This could be laid out as: This is the problem, This is what we've done, Has it helped.
- Area for Improvement 2: video-fluoroscopy. This is monitored on a monthly basis.
 - For next time, we need to see evidence of a reduction in fluoroscopy hospital admissions
- Area for Improvement 3: EHCP timeliness
 - Training is being delivered to SENAT teams to improve input to Sections C and G, with ongoing refinement from real-life examples.
 - June to September data to be included in April update; recent Sussex advice return rate at **43%** (up from 33% in June).
 - Caroline to meet with Surrey to understand how they have achieved a 90% health advice return.
 - Sally has picked up annual reviews with no health updates, and will be working on how to evidence that the health aspects have been checked.
 - Schools confirmed that complex health developments are dealt with outside the EHCP process.
 - This can cause challenges with transition to college, when a college accepts a CYP based on the EHPC. They subsequently learn of health issues through conversation with schools, which can affect the placement decision.
 - From the providers' perspective, the same workforce responds to EHCNA/annual review requests as well as the actual provision of work.

ACTIONS

6.1 It was agreed to develop the health report to evidence impact and to include evidence from all providers (Sussex Community NHS Foundation Trust and University Hospitals Sussex NHS Foundation Trust). For April update.

6.2 April health update to include evidence of a reduction in fluoroscopy hospital admissions following the equipment being fixed and changes made to the service following the Contract Performance Notice

6.3 Caroline to find out how community CAMHS teams achieved a fall from 42 weeks (Oct 2023) to 10 weeks (Sept 2025) in average waits for initial assessment. For April.

6.4 Caroline to meet with counterparts in Surrey to understand how they have achieved a 90% health advice return. By April.

6.5 Sally to review how health contributes to annual reviews. For April update.

7. EHCP Timeliness quarterly update

See attached paper.

- SENAT restructure now implemented with two service managers (one for EHCNA, EOTAS and Tribunals, and one for Review & Monitoring, Post-16 and Preparation for Adulthood). They have also appointed an operational lead to implement change, to improve consistency and quality. The development of middle managers is key to improving monitoring and performance management across SENAT.
- Various AI projects are being considered to increase productivity, freeing up time for SENDOs to engage better with partners.
- A business case is being developed to embed OT and SALT professionals in SENAT, to inform decision making, review therapeutic provisions and support tribunal processes.
- There is a proposal to create a dedicated SEND Brokerage Team, which should improve process and oversight in this area and create additional capacity within SENAT to focus on engagement with families and schools, EHCPs and Annual Reviews.
- The EP Service will undergo Function and Form after the publication of the White Paper.

Discussion points:

- While they understand that the drive for changes in SENAT is to increase capacity to engage with families and schools, WSPCF is disappointed that communication and responsiveness is not a higher priority, and reiterated the need for a specific, resourced Communication Plan.
- We need to consider how to manage the ripple effect of increased productivity in SENAT – for example there will be more consultations with schools.
- There is a feeling that we've been here before and are still to see the improvements. What are we doing differently this time?
 - Within CYPL, the lens of improvement was focused on Social Care for many years. It's now focused on SEND & Inclusion, which gives us access to better support.
 - The corporate position around using digital tools to improve efficiency will support improvements in SENAT.

- The previous review of SENAT was inward focused and led by the service itself. It was challenging for other senior leaders to influence SENAT which was an insular service.
- We need to increase SENDO output – not because they aren't working hard enough, but because of the amount of work they have that prevents them from writing plans. We need to consider what noise we can take away from SENDOs so they can focus on writing plans.
- Other LAs have affected timeliness by setting up temporary, dedicated backlog teams, which work alongside a business as usual team. This would mean we had two reports coming into the Board – one for the backlog and one for Business as Usual.
- Setting up the SEND Brokerage team should give back hours to SENDOs.

ACTIONS

7.1 Develop a specific, resourced Communication Plan.

7.2 Consider setting up a temporary, dedicated backlog team to work alongside a Business as Usual team.