

Lancashire Health and Wellbeing Board - SEND Sub-Committee

Minutes of the Informal Meeting held on Monday, 21st June, 2021 at 10.00 am in MS Teams

Present:

Chair

County Councillor Jayne Rear, Cabinet Member for Educations and Skills

Committee Members

County Councillor Cosima Towneley, Cabinet Member for Children and Families
County Councillor Michael Green, Cabinet Member for Health and Wellbeing
Debbie Corcoran, Greater Preston CCG
Kevin Toole, Fylde and Wyre CCG

1. Welcome, introductions and apologies

The Chair welcomed all to the meeting.

There were no apologies received.

2. Minutes of the Last Meeting held on 22 March 2021

Resolved: that the minutes of the meeting held on 22 March 2021 were confirmed as a correct record.

3. Lancashire Special Educational Needs and Disabilities Partnership - Update on the Accelerated Progress Plan

Zoe Richards, Senior Programme Manager for SEND, Lancashire and South Cumbria presented the Accelerated Progress Plan Highlight Report for the end of May to the Committee and it was noted that the Committee had also been provided with the highlight report for the end of April too in the agenda pack circulated prior to the meeting. The Committee were reminded of the actions that would be reported on in the highlight report and an update on each action was provided to the Committee for challenge and scrutiny as detailed below:

Action One – Leaders' Understanding of Local Area

Following feedback received from the SEND Sub-Committee, the highlight report has been improved to reflect the suggestions made, in terms of when an action has been delivered and how it relates to the priorities listed in the Accelerated Progress Plan. This is illustrated in the top right hand box on the highlight report.

The Committee were informed, that Action 1, is very much on target, however there is an amber risk as health data continues to be an issue and that is due to the fact that there is not a national requirement to collect SEND data and there are no SEND flags on the data either. Whilst the health data is improving, a point has not been reached yet in terms of being satisfied that it is in a strong position, however, this is a national issue, not a local issue and Zoe Richards confirmed that she had raised this with the national SEND Lead for NHS England and they have taken it to the training that the Lead delivers to the Inspectors as well as to the Department for Education, to ensure that the relevant people do understand that this is not a quick fix for officers. Zoe Richards outlined that the health data that is now supplied to Sarah Callaghan, Director for Education and Skills, Lancashire County Council is improving, to make sure that the service can deliver the robust data dashboard across the system.

Surveys are also being conducted in Action 1, however, there are also surveys that are happening under other headings also, such as ASD Transitions (Action 3) and the Local Offer (Action 5) being the main ones, although there are some in relation to Joint Commissioning (Action 2) as well. It is important to note that work is still being carried out under Action 1, and this is an example of where each of the actions start to inter-relate.

Sarah Callaghan and Zoe Richards were thanked for all their work in producing the highlight reports and acting on the comments made by the SEND Sub-Committee to help improve the report at each meeting.

An issue was raised with regards to the monitoring visit and thanks was given to the officers, for the feedback stating that it had gone well. The Committee requested to see a copy of the letter if it was available and also, when speaking to the action plan, if officers could highlight any specifics against the areas that have been given, to ensure the Committee are aware of the Department for Education's view and scrutiny. Zoe Richard's provided the Committee with the verbal feedback for Action 1, where they had been asked challenging questions by the Department for Education. Satisfaction had been noted around the improvements around the Leaders' understanding of the local area as well as the way in which the partnership had been strengthened, partly due to covid and partly due to the improvements of the programme management approaches. In terms of the letter, Sarah Callaghan agreed to check as to whether the letter from the Department for Education could be shared with the Committee.

Sarah Callaghan reported that there is still more work to be done in terms of analysis of data which is where the focus is now, with regards to the more finer details including the trend analysis, which is a piece of work to be developed further, in looking at local data against national and statistical neighbours and being able to demonstrate it and shape improvement. The Committee raised, that in the action plan, it is focused on the process, however what impact is that having on those KPIs, and an update was requested from officers, so the Committee could see not only the breadth and depth of the work, but also that the actions are the right ones and are progressing against the KPIs that the Committee agreed originally. Zoe Richard's clarified that at the July meeting, the focus will be on the KPIs. The Committee noted that from the beginning an enabler has been demonstrated and in the background, there is an excel spreadsheet that demonstrates the more appropriate and robust KPIs that are being described for the Department for Education, as being KPI enablers and this was described to them in the monitoring meeting and there was no pushback to taking that approach. It was also confirmed that

this would be demonstrated by Sarah Callaghan and Zoe Richards, along with Helen Marsden who are preparing for the meeting in July, a quarterly report of April, May and June, against the KPIs and what will happen next.

A request from the Committee was also made for further information/assurance on:

Point 3 of actions delivered – update on the survey to be added to the Local Offer and that there had been some initial findings reported to the Partnership Board. The Committee requested that they also be updated with a summary of what the Partnership Board has been presented along with feedback from the Board.

It was noted that the Local Offer website has changed and progressed and there is a lot more richness to it, however the Committee felt it would also be useful to know what the parents and carers feedback has been on the changes.

It was also felt that a recap would be beneficial, on how parents and carers are engaged around the Local Offer and this would give the Committee assurance that it is being driven by the officers and what parents and carers are reporting back.

A request was also made for examples of feedback in a "You Said, We Did" document to be shared with the Committee so they are sighted on feedback on comments/actions and how it is being actioned and closing the loop.

Zoe Richards commented, that they had found it incredibly valuable, that through doing the "Think SEND" events in April/May, the consultation process is now underway on the SEND Plan for 2021-2025 and some of the feedback that has been received, has also helped with the "You Said, We Did" approach and Zoe Richards agreed to give an example of this at Action 3 – ASD Pathway Waiting Times.

A further request was made that in terms of further information on evidencing the outcomes of the actions being brought to the Committee as outlined above, it was felt this would be better circulated outside of the meeting to enable members to come back to this meeting, prepared with either more assurance or more areas that could be raised by way of challenge.

Sarah Callaghan confirmed that she would present the "You Said, We Did" document to the Data Sub-Group.

Action 2 – Joint Commissioning

The Committee were informed that this action, is well on target for delivery, apart from two areas of risk, one which relate to the implementation of the Bowel and Bladder Framework, although the Committee were asked to note that since the circulation of the report, Central Lancashire Clinical Commissioning Groups (CCGs) have approved the funding of the commissioning gaps and this is still being addressed for West Lancashire and will be covered in the June report. Secondly, in terms of the Specialist Nursing Service and Special School Nursing improvements, it has been highlighted with the Collaborative Commissioning Board, that this was going to be an area that would take longer than the September deadline. However, there is a plan in place for each of these risks and work is still ongoing.

In terms of all other aspects of the Joint Commissioning work, the Committee were informed that the work will be completed. However, there is an area of work that has been picked up on that the Inspectors in the letter referenced "consumables such as continence", and a piece of work is currently being undertaken to ensure that any areas of consumables that may need to be addressed are also picked up during the period of the Accelerated Progress Plan.

The Committee sought clarification on why the "Action in the next six months" column in the highlight report were all blank and what happens to the actions that have not been completely delivered against or the areas that have not had the impact that would have been hoped for. Zoe Richards confirmed that the column could actually be blanked out as there were only five months left of the process and what has been found is that all of the actions are fitting into the next three months and there may be slippage under the West Lancashire Bowel and Bladder Framework and on Specialist Nursing Services and Special School Nursing, however it is not slippage in terms of the Accelerated Progress Plan, it is slippage in terms of the overall work that will then be covered within the SEND plan and the transition into a more sustainable way of working as opposed to still highlighting ongoing areas of work. It is important to demonstrate, that based on the work that the Department for Education asked of officers, the actions are being completed and any other actions that would follow-on, would then appear within the SEND Plan 2021-2025.

With regards to the Specialist Children's Nursing Service review, understanding was sought from the Committee, on the process on how that will be commissioned and when will something different be in place. Zoe Richards confirmed that the review has been undertaken and there is a Task and Finish Group that is underway a project plan that has been developed. The project plan takes it to 18 months of delivery which will fall within the context of the SEND Plan for the ongoing delivery. It is again an area that suffers from it coming from feedback from parents and carers attending focus groups and completing surveys for the Inspectors as it is uncertain what the specifics are that they have identified and the review process demonstrates that this is actually a very broad scope and the capacity and funding is not available to be able to deliver everything immediately, therefore it will be a longer piece of work to be able to deliver on that. However, assurance for the Committee and the monitors is that the project plans with milestones are in place to enable officers to demonstrate what is being done. There is also a paper for this piece of work that is being presented to the Strategic Commissioning Committee in July 2021. Hilary Fordham, Chief Operating Officer, Morecambe Bay Clinical Commissioning Group (CCG) also commented that as the work that has been done around special school nursing, community nursing and the Bowel and Bladder Framework, it has become apparent, that the understanding of interconnectedness between all of the areas of work, being relatively small teams, is that the professionals work across a range of different areas, and to develop a complete Framework across the whole area of responsibility that is effectively nursing services and therapeutic services for this particular cohort of service users and their families, will enable a more robust and sustainable approach to be built and will move into the SEND Improvement Plan that is being developed for 2021-2025. Due to the Covid-19 pandemic the NHS has been unable to commit as much funding to this area and commitment will be sought from the Strategic Commissioning Committee to a more sustainable funding process, post pandemic.

It was outlined to the Committee that in the risk section, there is a transition process being required for adopting the new continence policy and the Integrated Care Partnership (ICP) areas are developing local plans and clarity was sought from the Committee as to how this fitted into the Integrated Care System (ICS) footprint and how it is ensured there is consistency and a standard offer across the whole of the geography. Zoe Richards outlined that the delivery is on an ICS footprint, with also an ICP delivery and then going down to localities, where there is warranted variation. If there is no warranted reason for variation, then the locality would be expected to be delivering on the ICP basis which will also link in with the ICS. Hilary Fordham, who is the lead for the ICS Commissioning Group, the Children and Young Peoples Network, provided further information to the Committee on that approach. Hilary Fordham outlined that the ICS, ICP and neighbourhood working, are still all coming to terms of what it will look like for the future. There was a lot of talk with the Inspectors at the revisit in March 2020 with regards to the ICS and ICP and the whole issue around warranted and unwarranted variation. Lancashire has a very diverse population with very diverse needs and this is something that needs to be recognised, that a framework can be set and an expectation of outcomes for people with SEND, that will enable the ICPs to deliver that appropriately to meet the needs of the population in their area. The next step on the journey is to address the needs at a neighbourhood level not just an ICP level.

Zoe Richards was asked if she felt that the links were right, for her and her team to enable the right influence with the ICS and it was confirmed that she felt they were. Zoe Richards also informed the Committee that she on the Commissioning Network for Children and Young People for the ICS, which involved Local Authorities as well as Health Commissioners. Zoe Richards also commented that she has very strong relationships with all the Commissioners who are very supportive. Even though relationships prior to the inspection in March 2020 were good, they have grown in strength since then and even stronger relationships have now been developed, which will help for the longer term work that will be carried out.

Advice was given from the Committee, in that ICPs and Primary Care Networks are embryonic and developing together, therefore, the earlier links are formalised, and contacts made as developments happen, would be more beneficial. Officers were informed, that there is a forum on the Fylde Coast, Network of Networks and that this could be a single point of contact that would give access to all the Primary Care Networks on the Fylde Coast.

Sarah Callaghan, Director for Education and Skills, Lancashire County Council advised the Committee that the Authority had restructured the SEND Inclusion Service, Early Help, Children and Family Wellbeing Service and the School Improvement Service on the Integrated Care Partnerships (ICP) footprint and are working with schools in clusters and teams around the school model, so there will be that ability to link in to the Primary Care Networks. Therefore, going forward there will be that ability to understand from an individual schools' perspective, what the relationship is like with the bigger County wide agenda.

Zoe Richards presented to the Committee an example of where there are connections between actions. On Action 1 it mentioned the "SEND is Everyone's Business" briefing has had a positive impact on some commissioning decisions that have been made on pieces of work that need to be delivered on and the timing was right for Central Lancashire Clinical Commissioning Groups (CCGs) and the presentation followed a few days later by a decision group that decided that they would implement the Bowel and Bladder Framework detailed in Action 2.

Area 3 – Autism Spectrum Disorder (ASD) Pathway Waiting Times

The "You Said, We Did" that was raised earlier in the meeting was reflected on at this action, by Zoe Richards, providing an example. Acting on behalf of the providers and using the intelligence that was available for the Think SEND events, the update that was provided and feedback that was received from families who attended the event, it was reported that it was not actually their experience of what was happening. Therefore, this fed back to the providers, which in turn found that there has been a different way of identifying the waiting list sources. Unfortunately, that meant that there had been additional numbers identified and added on to the waiting list. The Committee noted however, the positives to come out of this, were that as a result of being responsive and improving the relationship with the providers, it has meant that the issue has been identified, responded to and now being managed.

Zoe Richards reported that there was an issue raised, in relation to ASD and the delivery of a significant reduction in the waiting times, which is unlikely within the timeframe due to the increased numbers of referrals. Whilst waiting times are being reduced, there is also an increase in the numbers of referrals that are coming through. This is a national issue and may well be due to families being with their children more during the lockdown periods, however, this is unconfirmed. Therefore, as a result, even though funding has been put into a waiting list initiative, the increase in demand has not been able to be addressed for the services. However, due to the improvement of the partnership working, with Lancashire County Council, there is a Specialist Teaching Unit, and the Lead Officer has been involving Zoe Richards and her team and working with Special Educational Needs Co-ordinators (SENCOs) and it was noted that the schools have responded really positively, indicating that they want to work with health to improve the way in which delivery is being made on the graduated response which has now been identified as the pre-referral phase. The Specialist Teaching Unit have also asked for improvements and there has been a submission of an expression of interest to NHS England for funding in relation to a graduated response approach that will enable work to be carried out much closer with schools to support families from the point of need as identified, rather than waiting until there has been a diagnosis or somebody is discharged at conclusion of assessment. Within that expression of interest, in relation to support offers throughout the pathway, this includes the extension of the new pathway navigator roles. There have been some gaps identified in relation to equity across the ICS and in relation to how those roles are delivered, and that is also included in the expression of interest.

In terms of other work that is being carried out, the Committee were asked to note that work around the data for ASD, is that it was recognised that work was done on the basis of the intelligence that was already held in August and September. Through the work that has been done there is now more robust data, which is important linking back to Action 1 and again is an example of how the actions link into one another. So although the position

is not perfect with the waiting list increase, it is a demonstration of how the leaders now know what questions to ask, what challenges to present and how to work as a whole system together to ensure the intelligence is improved. There is also a data quality improvement programme for health, which is consistently improving the ASD data, across the service.

The Committee raised a query in terms of how many young people, after an initial meeting, have found that they have not been on the right list or that they did not need the help they assumed they would need. Zoe Richards confirmed, that at the start of the process, the referral to diagnosis rate was unusually low, and should have had a ratio of around 80-85% and it was around 54-60% which showed that too few people were going through and actually having a diagnosis and this is now changing as improvements are made. There is still a position where people who are not necessarily receiving the right support and is why work began with colleagues in the Specialist Teaching Unit on the pre-referral graduated response approach, which enables a much more robust process. The immediate need, is to address the need that has been identified, and that is the approach that has been developed through a co-produced autism pathway pyramid, which families were involved in creating, as well as schools and will now be used as part of the expression of interest and included in the "Landscape" (Lancashire and South Cumbria Autism Project and Evaluation) model and allows work with schools, to strengthen the pre-referral graduated response period, which will ensure that children do get support onto the right pathway if they need a referral. Evidence from Fylde Coast, on the Neuro Developmental pathway approach, shows that Lancashire should have stayed on that approach and the Inspectors were wrong in taking that approach off them. The way that the adoption of the expression of interest for the funding for ASD assessment, is to move back onto a sustainable model which is the Neuro-Developmental pathway.

The Committee were informed of the frustrations and disappointment in terms of not being in the position it was hoped to be on this action due to the surge in referrals and if the surge had not happened, enough work had been put in and the Committee were assured by this.

The Committee welcomed the support that is being put into this action and that the Pathway Navigators are possibly acting as a triage service.

Further challenge on this action was raised by the Committee and Hilary Fordham addressed the issues. The Committee noted that children and young people have different needs and that is why the move is needed to the Neuro-Development pathway and some children may well have an ASD diagnosis and also a mental health need and diagnosis, therefore separating out neuro-developmental issues which will include ASD from those children who have a mental health issue will ensure they are on the right pathway. Outside of the meeting, some work will be done on figures to provide to the Committee, further information on what has been seen in terms of increases of referrals and what the waiting lists therefore look like.

Sustainability going forward needs to be around the neuro-developmental pathway not just ASD and this is the support strategy that a child/young person/family needs to help them manage the situation that they are in.

Action 4 – Transitions in Healthcare

The Committee were informed that there are still ongoing risks around Adult Services that has been related to covid. It was noted that there were improvements with each of the providers around that engagement and there are projects being developed where conversations are immediately going to "and what about the transitions". An expression of interest is also being submitted for Adults as well as previously reported for ASD and both projects are around an all age support offer to ensure there is something from 0 to adulthood. They are slightly different offers however it is something that enables that transition process. There is also work ongoing in relation to continuing care around complex needs, and again work is linked in with the Local Government Association Review and transitions is part of those conversations as well. The Committee noted that what is being found, is that transitions for health care and other areas of the transition work, conversations are more likely now that people are very engaged with this as a topic. It will be difficult to complete this action by September due to covid, it is now on target in terms of ongoing delivery that people are engaged with the work that is being done. There is also now a strengthening of the data requirements, Data QUIP, which is a programme that is happening within health and it has been found that providers were sharing templates between each other, so they do not have to do the work individually, showing much more joined up working around how transitions are approached in health care. The Committee were asked to note that there is not a way in which data can be separated out in relation to SEND for transitions and the approach that is being adopted for this is that if transitions are improved for all children and young people moving into Adult Services, then improvements are being made for those with SEND as well.

Challenge received from the Committee was that engagement with Adult Services has been a challenge from day one. It was noted that the Committee had addressed this at a previous meeting and officers had acted on this at that point and fed back to this Committee that it had been carried out. Zoe Richards informed members, that because of the escalation, it has made an impact and improvements are being seen. The escalation has seen a move in providers taking greater responsibility and some of those providers have created group specifically about transitions including Adult Services. There is still more work to do, however it is about embedding a culture and a new way of working for Adult Services colleagues.

The Committee raised that in terms of the "No wrong front door" policy, often the front door of choice is Primary Care and there appears to be no indications on what is happening in terms of further engagement or influence within Primary Care by this Committee, as transitions in health care will have a starting point within Primary Care. The officers were asked if there was anything more that could be happening in that respect and Hilary Fordham responded to the challenge, stating, that the linkage between Primary Care Networks and Schools at a neighbourhood level is where some of the attention needs to be focussed on a more general approach around children. There are quite a number of children, who transition from Children's Service to Adult Services and will transition back to Primary Care, rather than a specialist service, which leads back to Primary Care and this is something that being looked into to make making this is being dealt with. Conversations have been had about the different routes through transition, specifically about when somebody requires a transition back to Primary Care and what it should look like. There are two points from this, one that is specific to transitions and another which is a more

general issue about how the scope is broadened and the thought process of the Primary Care Networks around this cohort and this area of work.

Zoe Richards also reported that they were requested to pause on the engagement with the Primary Care Networks due to the Covid Vaccination Programme and engagement will recommence from July 2021. The Committee were informed that there are two sides to this, one is in relation to the engagement of Primary Care Networks and building up a knowledge and understanding of the transition process and also partly about working with Paediatricians, as evidence has been found that some Paediatricians are still dealing with 20+ aged young people, due to not seeing an obvious route to an Adult Service. Initial conversations have been had and engagement work will need to take place, with Paediatricians in helping them to understand their role in the transition process to Primary Care.

Area 5 – Local Offer

The Committee noted that as reported earlier, there are changes already happening with the Local Offer and the Directory of Services will be available soon, which will be an ongoing development. The link will be available at the next meeting of this Committee in September. In terms of the actions, this piece of work has been brought up to date and development of the work will continue, due to the understanding of what it is that families want. There is piece of ongoing work that has been funded through NHS England, through a successful bid, around understanding and strengthening the health input to the Local Offer and what has been found from initial information that has been received, which is that people have not restricted themselves only to health, they have given solid and robust information that can be used and gone broader than health and given some suggestions on other areas and that has fed into the survey that has been done for the Local Offer through the Parent/Carer Forum.

Once the Directory is completed, other work on improvements will be carried out including the SEND Partnership webpage and the Facebook page to ensure communications are shared in terms of the Local Offer. The next steps are about improving how people know that the Local Offer exists, know what information is on there and how knowledge is strengthened in transitions in health care and the ASD core offer, the pathway pyramid that has been developed and co-produced with people and included in the Local Offer. Feedback has been received at the Think SEND events, that people want a better understanding of how to navigate their journey through SEND and this is also something else that will be included in the Local Offer. Officers were confident that this action will be delivered by the end of September.

Clarification was sought in terms of communications and how schools and the public in Lancashire were going to be informed about the Local Offer and whether there was a communications plan for it? Zoe Richards confirmed that a meeting was due to take place on 22 June 2021 on communication and engagement activities both in terms of how communication is done with the successes of the Accelerated Progress Plan and also how the ongoing work the SEND Plan is also communicated. A request was made that County Councillors be kept informed on communications as they can relay information to their communities also.

In summary, alongside Actions 1, 2 and 5, it is believed that those actions will have been delivered on confidently by the end of September, apart from those areas that have been identified broader pieces of work under the Joint Commissioning, which is impossible to deliver within the timeframe. With Actions 3 and 4 ASD and Transitions having slight delays, that again, everything has been done to mitigate against those delays, however, will be deliver the best that can be within the timeframe.

Thank-you was expressed, and the Team commended on the success of the Local Offer and the Think SEND events and the wider success of this programme.

Resolved: That the Health and Wellbeing Board – SEND Sub Committee:

- i) Noted the progress of the Accelerated Progress Plan (APP) on the give areas of concern, including the areas highlighted in 'red' or 'amber'; and
- ii) Challenged and questioned progress on the work being carried out to deliver the Accelerated Progress Plan (APP), including highlighting any areas of concern that the SEND Partnership is to provide further assistance on.
- iii) Requested that Sarah Callaghan seek clarity on whether the monitoring visit letter from the Department for Education could be shared with the Committee.
- iv) Will be provided with further information on evidencing the outcomes of the actions in the highlight report as reported on at Action 1.
- v) Will be provided with further information on the increase in referrals and waiting lists are for Action 3.
- vi) Inform County Councillors on the communications plan for the Local Offer (Action 5), so they can share within their communities.

4. Date of Next Meeting

Monday, 13 September 2021 at 10.00am, format to be confirmed.

L Sales
Director of Corporate Services

County Hall
Preston