

Lancashire Health and Wellbeing Board - SEND Sub-Committee

Minutes of the Meeting held on Monday, 13th September, 2021 at 10.00 am in Teams Virtual Meeting - Teams

Present:

Chair

County Councillor Jayne Rear, Cabinet Member for Educations and Skills

Committee Members

Debbie Corcoran, Greater Preston CCG

County Councillor Michael Green, Cabinet Member for Health and Wellbeing

Kevin Toole, Fylde and Wyre CCG

County Councillor Cosima Towneley, Cabinet Member for Children and Families

1. Welcome, introductions and apologies

The Chair welcomed all to the meeting.

There were no apologies.

2. Disclosure of Pecuniary and Non-Pecuniary Interests

There were no disclosures of interest in relation to items appearing on the agenda.

3. Minutes of the Last Meeting held on 21 June 2021

Resolved: That the minutes of the informal meeting held on 21 June 2021 be confirmed as a correct record and signed by the Chair.

4. 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 which highlighted the improvements made since the last meeting of the Sub-Committee.

Members were informed that the 12-month Accelerated Progress Plan (APP) monitoring review meeting would be taking place with the Department for Education and NHS England on 29 September 2021. At this meeting, it would be assessed if sufficient progress had been made on the five areas of concern as highlighted in the Accelerated Progress Plan. It was also clarified that sufficient progress did not mean that everything had been done but rather that the monitors were satisfied that sufficient progress had been made since the initial inspection of 2017 and the revisit inspection of March 2020.

The evidence to be presented at the monitoring meeting on 29 September 2021 included the Accelerated Progress Plan attached at Appendix A of the report and the Self-Assessment sheet attached at Appendix B of the report. It was noted that since the agenda publication for the meeting, minor changes had been made to the Self-Assessment document and the updated version would be circulated with the minutes.

It was also noted that officers were confident with the progress made since the initial inspection and they were able to demonstrate this at the monitoring meeting.

Members were given a brief overview of the Self-Assessment document, which contained the documents that were to be presented at the monitoring meeting and the following points were highlighted and clarified:

- In terms of the Key Performance Indicator (KPI) Enable Document, it was noted that in March 2020, an agreement was made with the Department for Education and NHS England that the KPI scorecard being used in the Accelerated Progress Plan was not working well and was not a good measure on whether the improvements being made were working.
- It was noted that included in the evidence being provided at the monitoring meeting was the Accelerated Progress Plan Update document, the Self-Assessment document and the Accelerated Progress Plan presentation. The Accelerated Progress Plan Update document was included as it was felt that it was important to demonstrate to the Department for Education that work was being done instead of doing surveys that identified what people's opinion of the services were. A copy of these documents would be circulated to members after the meeting.
- Documents being provided as evidence at the monitoring meeting were the SEND Plan and the Turning Words into Actions documents and these were crucial in demonstrating that the work had been carried out.

It was further noted that shortly after the revisit in early March 2020, the Country entered the first national lockdown in response to the COVID-19 pandemic. This had an impact on the delivery during the early days, as staff members were redeployed or asked to work on the COVID-19 response. However, it was further noted that following the COVID-19 response, the integration with partners had grown in strength, and that working more closely together had quicker and better outcomes as had been demonstrated during the past 18 months.

Members were taken through the presentation which highlighted the current progress made on the Accelerated Progress Plan, with each of the five areas of concerns taken in turn.

Action One – Leaders' Understanding of Local Area

The following points were highlighted:

- It was noted that the action plans and highlight reports were now used as standard to provide not only the Leaders with updates on step by step targets but also by the teams delivering the projects.

- It was further noted that surveys, focus groups and data dashboard had been used to illustrate the impact and effectiveness the changes had been having and to ensure the projects were being kept on track and to change direction when needed. In terms of the data dashboard, it was noted that it was reported to the parent carers that 100% of families had been contacted on where they were on the Autism Spectrum Disorder waiting list. However, following feedback received from the parent carers, it was noted that this was not the case and following conversations with the providers, it was identified that some families had been missed and the situation had since rectified.
- It was clarified that the variations around the actual KPI figures as shown in the report was due to a number of surveys being conducted across different services. As such, the results were varied.

Members expressed their thanks for the work put into the report and the format it had been presented in.

In terms of questions from the Sub-Committee, the following points were raised:

- Challenge was received in terms of the variations and the Board that although the surveys being used were not an ideal way of tracking the progress being made, it was expected that they be used as a mechanism for measuring progress by the Department for Education.
- Clarity was sought on the ambitious targets that were being aimed at, and the Board noted that it was believed the targets were achievable and that improvements were not only being made on the five areas of concern, they were being made right across the SEND service.
- In terms of the updated Self-Assessment document, it was noted that track changes would not be applied to show members what changes had been made, as the document was the final version being provided to the Department for Education and NHS England as evidence at the monitoring meeting. However, members were informed that the changes made to the document were minor and mainly around the format of the document.

Action Two – Joint Commissioning

The following points were highlighted:

- It was noted that prior to the review meeting in March 2020, there was already a strong commissioning relationship and that relationship had continued to grow and strengthen throughout the pandemic.
- Members were informed that all schools had been informed of who their public health nurse was, so no school would be left at a disadvantage of who they had available to seek advice or support if there were sickness within the school.
- It was also noted that work was continuing to deliver the projects that were part of the four year SEND plan and members were informed that positive comments had already been received, including a comment from a commissioner who had observed the services that were being provided and was reportedly please with the results.

Action Three – Autism Spectrum Disorder (ASD) Pathway Waiting Times

The following points were highlighted:

- Members were informed that currently there was around a 17 week wait on the Autism Spectrum Disorder waiting list, whereas in January 2021 it was around 27 weeks. It was noted that the shortest waiting periods were along the Fylde Coast, while the longest waiting periods were in the north of Lancashire. The Board were informed that the reason for the difference in waiting periods was due to how the Pathways were being run as they differ throughout different areas of Lancashire.
- The Board also noted that work was continuing to better manage those long waiting times in the north of Lancashire and an investment had been made to tackle it and to reduce the waiting period. It was reported that they had now reduced the list by a third by identifying efficiency savings and appointing new staff to support in triaging.
- The differences between warranted and unwarranted were clarified and members were informed that warranted meant that the wait was necessary such as due to the child's age, whereas unwarranted was due to the length of the waiting list. A reason for unwarranted was if someone had been encouraged to get a referral for Autism Spectrum Disorder, when, it may not be the right thing for them.
- Members were informed of the new Digital Referral Platform which was used to make referrals to Autism Spectrum Disorder. It was noted that different messages would appear on the system, depending on who was in completing the form, such as a teacher, teaching assistant, health care professional, GP, etc. with each of the messages providing various suggestions for filling in the form.
- It was noted that a Pilot scheme had been set up across 13 schools in Lancashire and South Cumbria with Health Care Practitioners and Parent Carer Forums which was to help understand how increasing the support for schools from health could better understand how to support somebody who needed to be identified.
- It was noted that feedback had been received from families and a services manager who had stated that they had noticed a difference in services due to the new strategies in place.
- Members were shown a waiting list trajectory graph that outlined the number of people that would be on the Autism Spectrum Disorder waiting list if no investment had been made, if investment had been made and if additional investment was made. A copy of the trajectory graph would be circulated to members outside of the meeting.

In terms of questions from the Sub-Committee, the following were raised:

- Following concerns raised about the difficulties in obtaining a diagnosis and no support being given for someone until that diagnosis, the Board noted that a diagnosis was not needed or a health care plan in place in order to receive support and further work was required in order to get this message into the community.
- A suggestion was made that members of the Sub-Committee could speak to GP's on the Health and Wellbeing Partnerships to re-enforce the message about support that was available and in doing so, spread the message in their communities. The Board noted that officers were enthusiastic about this and that it would be a good idea.

- Following a question on how the variation could be tackled in the Pathways, it was noted that an open conversation was needed between the commissioners and officers with the right experience to discuss it openly and to discuss what could be done make improvements.

Action Four – Transitions in Healthcare

The following points were highlighted:

- It was noted that transition in Healthcare was a long-term issue and it should be recognised as part of the progress made during the last 12 months.
- It was also noted that what had been expected to be delivered in this area had been delivered apart from where young people had reported that their experience had been poor. The Board were informed that the reason for this was that only those young people who had had a poor experience would respond to the surveys and those who had had a good experience had not responded.
- Members were informed that this area was now in a position where all Adult Services were engaging. However, it was noted that the focus of Adult Services was needed on a case by case basis, as different young people require engagement from different adult services.
- Members were also informed that October 2021 would be the first month that the transitions data would be reported. It was expected that the data reported would help the transitions groups and SEND improvement groups to ensure they were addressing the right children and young people in the right way by seeing who have had a SEND Plan in place and those who had had a SEND conversation.
- It was reported that there was one minor risk with action four which was in relation to the delivery of the Accelerated Progress Plan. This was due to those who had had a bad experience with the service and would respond to the surveys, so the data did not provide an accurate picture.

In terms of questions from the Sub-Committee, the following were clarified:

- In terms of the surveys, it was noted that it was identified only using generic surveys that were not working well. However, work was underway with the providers to conduct the surveys at the start of the transitions process and throughout the process. Therefore, the surveys would become provider and service led, instead of system led.
- Following concerns around communications, the Board noted that work was underway to improve communications in a more joint approach, so that messages would be clearer when engaging with the communities.
- Members raised concerns around the expectation on sufficient progress being made on action four. The Board were informed that this was the one action that still required additional work, however there was only a small amount of work that could have been done differently than what had already been carried out.
- Following a question on if there was any follow through with an individual, it was noted that there was no follow through as the data only allowed everyone to be followed at once. However, officers were enthusiastic about this idea and it could be something that could be explored during the ongoing work around preparing for adulthood.

Action Five – Local Offer

The following points were highlighted:

- Work was progressing on a new landing page on the website to help increase awareness.
- Work had commenced to conduct a survey on how people would prefer to receive information, such as via newsletters or by other means.
- It was noted that a directory had been put in place on the website which included 850 services and continued to grow. Following initial issues around making it live, it was noted that the issues had now been resolved and the directory was now active.
- Following concerns that people had been struggling to access information on the Local Offer, it was noted that work on promoting the offer continued and that improvements to the search functionalities for accessing the information had taken place.

In terms of the communication plan, feedback would be received following the monitoring meeting and plans were in place for this.

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.

5. Urgent Business

There were no items of urgent business.

6. Date of Next Meeting

It was noted that there were no further meetings of the Sub-Committee scheduled and that the Sub-Committee was only established for 12 months.

The Board requested that following the monitoring meeting that was due to take place on 29 September 2021 with the Department for Education and NHS England, that a meeting of the SEND Sub-Committee be arranged for November 2021, in order to receive the outcomes of the review and to discuss further as to whether there was a need for the Sub-Committee to continue.

L Sales
Director of Corporate Services

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