

AGENDA

Meeting:	SEND Programme Board	
Purpose or Mandate:	To provide strategic oversight and direction for the implementation of the SEND reforms	
Date:	27 November 2023	
Place:	Teams Meeting	
Times:	12:00 – 15:00	
Members:	Lisa Nobes (LN) (Joint Chair) EI Mayhew (EM) (Joint Chair) Ros Somerville (RS) (Joint SRO) Lianne Joyce (LJ) (Joint SRO) Wendy Allen (WA) Lawrence Chapman (LC) Codrutza Oros-Marsh Nicki Howlett (NH) Paul Hill (PH)/Sarah Gibbs (SG) Nicki Cooper (NC) Adrian Orr (AO) - Julia Grainger rep Rebecca Hulme (RH) Nic Smith-Howell (NSH) Garry Joyce (GJ) Nicola Roper (NR) Rowena Mackie (RM) Claire Smith (CS)	Chief Nursing Officer, East and West ICBs Interim Director CYP, SCC AD, Inclusion (CHW, SCC) Associate Director of Nursing- CYP and MH SEND Programme Manager CEO SENDAT AD Children's Social Care SENDIASS CFYP Suffolk NSFT Public Health AD, Education, Skills & Learning (CHW, SCC) Great Yarmouth & Waveney ICB AD of Integrated Community Paediatric Svcs AD Children's Transformation (SCC/ICBs) AD, ACS <i>Head Teacher Northgate School</i> SPCF Chair
Invited to Attend	Izzy Connell (IC), Headteacher SES – Priority Lead Mark Gower (MG), GY&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 Ilott (JI)– Engagement Hub Lead Francesca Alexander (FA)– Head of SEND Hannah Holder (HH) – DCSSO Jack Walker (JW) – DCO Michael Hattrell (MH) NSFT – In place of Nicki Cooper	
Invited Guests:	Sophie Cooke Project Officer, Harriet Wakling, Head of Intelligence Hub, Lauren Sheldrake (Lead Family Services, (Case Study)), Joseph Dunton	

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

Item No	Estimated Timing	Item Description	Lead Officer	Attachment *To be provided at meeting
1.	10:00 - 10:05	Welcome & Introductions.	EM	-
2.	10:05 – 10:45	Case Study	LS	Presentation*
3.	10:45 – 11:00	SPCF- Update	CS	Presentation*
4.	11:00 – 11:20	SEND Integrated Strategy Update KPI's & Health Dashboard	LJ/RS	Item 4a - Health Dashboard Item 4b - SEND KPI
5.	11:20 – 11:35	Consultation – Approach and timeline update	WA	Item 5 – Consultation
	11:35 – 11:45	Break		
6.	11:45 – 12:15	All age Autism Strategy	JD	Presentation*
7.	12:15 – 12:30	LL EHCP Implementation	Harriet W/Sophie C	Presentation*
8.	12:30 – 12:45	Agree minutes and action log	EM	Item 8a - Minutes September-23 Item 8b Action Log
9.	12:45– 12:55	Forward Plan	EM	Item 9 - Forward Plan
10.	12.55– 13:00	Any Other Business	All	
		Next Meeting is scheduled for Thursday 25 January 2023 10am – 1pm		

SEND - Suffolk

A breakdown of various SEND related data and general activity linked to young people. This includes nationally published data by NHS Digital and also local NSFT, Suffolk County Council and Norfolk & Waveney ICB reporting.

If you require a demo of the dashboards please contact a member of the team via the link below.

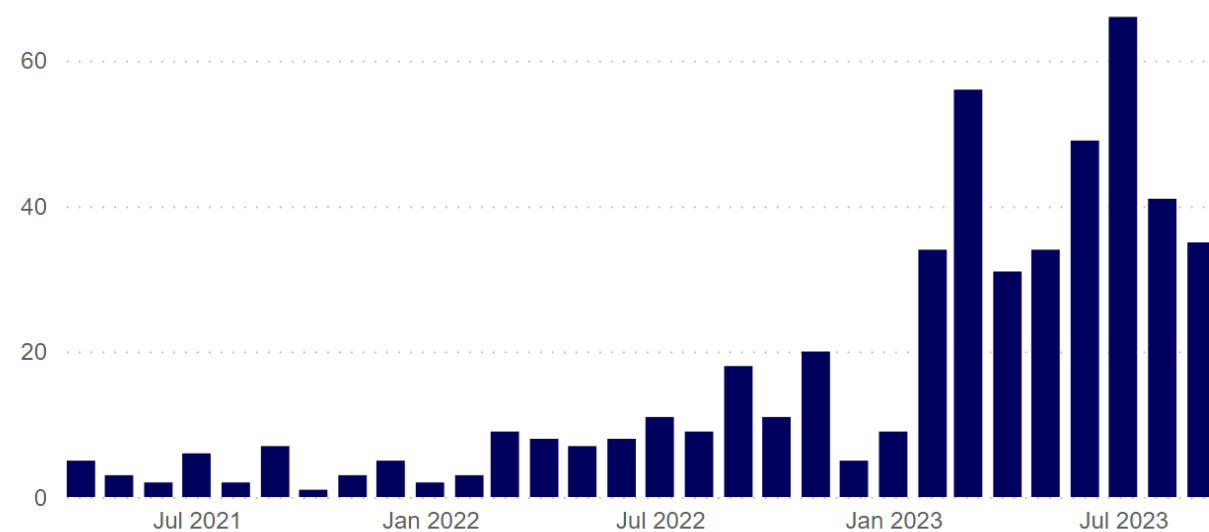
- 1.0 SEND Identified (Section 23)
- 2.0 EHCNA Advice Requests
- 5.0 Emotional Wellbeing IAPT Outcomes
- 6.0 LD Annual Health Checks
- 7.0 NSFT Waiting Times
- 8.0 SNEE ADHD Assessment Waiting Times
- 8.1 SNEE ADHD Treatment Waiting Times
- 8.2 SNEE ASD Assessment Waiting Times
- 8.3 Waveney NDD Waiting Times
- 9.0 RTT Paediatric Services
- 9.1 Community Paediatric Contacts
- 9.2 Community Paediatric Waiting Times
- 9.3 Waveney SLT Waiting Times
- 9.4 Waveney OT Waiting Times
- 9.5 Waveney Physio Waiting Times
- 10.0 Dynamic Support Registers (DSR)
- 10.1 Tier 4 Admissions
- 11.0 Personal Health Budgets

1.0 Health services are required to make a Section 23 notification to the Local Authority if they believe a child under school age has, or is likely to have, special educational needs or a disability (SEND)

Data Source: Suffolk County Council

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021/22	5	3	2	6	2	7	1	3	5	2	3	9	48
2022/23	8	7	8	11	9	18	11	20	5	9	34	56	196
2023/24	31	34	49	66	41	35							256

Total S23s Submitted



Organisation	2021/22	2022/23	2023/24
Suffolk County Council		90	124
ICPS	16	50	10
Health Visiting Team		12	53
Thurston Health Visiting		5	18
Children and Young People			14
Butterflies Children's Centre	7	3	
Forest Heath Health Visiting Team		6	4
Newberry Child Development Centre	9	1	
CYP Health		2	7
Stowmarket Health Visiting Team		1	8
Bury Health Visiting Team		5	3
High Suffolk Family Hub		5	1
South Suffolk Health Visiting Team			6
Total	48	196	256

Child primary area of need	2021/22	2022/23	2023/24
Speech Language Communication	10	144	178
Autistic Spectrum Disorder	20	29	58
Global Development Delay	11	10	3
Complex Health Needs	4	9	3
Social, Emotional, Mental health Difficulties		2	10
Specific Learning Difficulties	1	1	1
Hearing Impairment	2		
Speech Language & Communication Need (SLCN)			2
Awaiting some info			1
Total	48	196	256

Note: this data is sourced from Suffolk County Council and therefore covers the full Suffolk area, including Waveney

1.0 Health services are required to make a Section 23 notification to the Local Authority if they believe a child under school age has, or is likely to have, special educational needs or a disability (SEND)

Commentary

Section 23 notifications

Community Health Children and Young People, Suffolk County Council:

The spike in Section 23 referrals from February 22 onwards, was the result of a change in process for the School Nursing team, where staff were required to automatically complete a Section 23 referral following a Schedule of Growing Skills (SOGS) assessment. The introduction of this methodology vastly improved the Pathway for families in the following ways:

- Access to 3-6 monthly contact
- Access to the Little Stars Group
- Support to go to school placements
- Increased visibility for vulnerable children
- Early Years Advisors to help access specialist provision
- Children are seen at 2-year check stage
- Signposting - Literacy Trust, CBeebies resources, Infolink, Suffolk Local Offer
- Earlier recognition of additional needs

This has led to the total number of referrals in the first six months of the 2023/24 year surpassing the total for the previous year – 196 for 12 months vs 256 for 6 months. The data also shows the shift from Section 23 referrals primarily coming from specialist services in 21/22 to almost exclusively emanating from Suffolk County Council and Health Visiting Teams in 23/24, allowing earlier intervention. The key areas of need have shifted away from Complex Health Needs and Global Developmental Delay to Speech Language and Communication, and this is likely due to identifying difficulties in these areas at the 2-year stage – which gives time for interventions prior to attending school. Although referrals for Autistic Spectrum Disorder were high in 21/22, the figures show double the referrals made already in the first 6 months of 23/24, which may indicate that teams are becoming more attuned to recognising additional needs. The new online process for making Section 23 notifications is now live.

2.0 Report of number of EHCNA advice requests received by health provider responded to within 6 weeks of receipt

Data Source: Suffolk Community Services Monthly Report Pack/NSFT

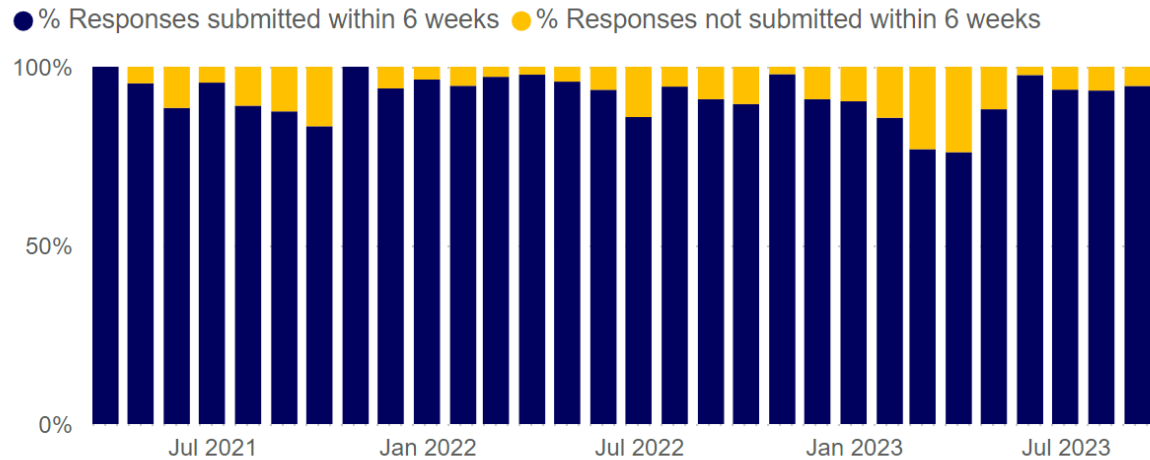
Integrated Community Paediatric Services SEND Advice Requests

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021/22	84	95	90	105	79	62	43	11	80	113	57	100	919
2022/23	94	89	102	81	125	76	85	109	114	99	50	76	1,100
2023/24	29	144	145	102	153	158							731

Integrated Community Paediatric Services SEND Advice Responses

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021/22	59	43	52	45	55	48	48	26	66	56	75	71	644
2022/23	45	72	62	71	72	66	67	48	77	62	49	52	743
2023/24	46	42	86	78	90	93							435

ICPS Advice Responses



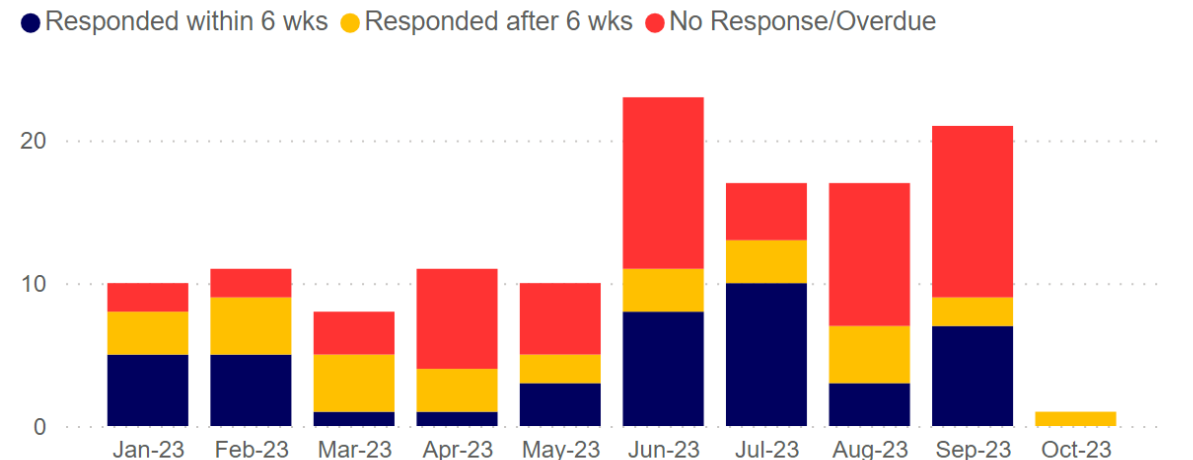
NSFT SEND Advice Requests

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2022/23										10	11	8	29
2023/24	11	10	23	17	17	24	16						118

NSFT SEND Advice Responses

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2022/23										8	9	5	22
2023/24	4	5	11	13	7	9	1						50

NSFT Advice Responses



Note: NSFT advice request data contains incomplete response dates and hence may change over time as responses are sent and dataset is updated

2.0 Report of number of EHCNA advice requests received by health provider responded to within 6 weeks of receipt

Data Source: Suffolk Community Services Monthly Report Pack/NSFT

Commentary

Education, Health and Care Plan Needs Assessment (EHCNA) Advice Requests

Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust (SNEE):

- There is an increasing number of requests coming through to ICPS teams, in addition to the team receiving all EHCNA early warning notifications which places additional burden on the clinical team admin staff locally.
- Compliance has dropped when there has been a higher number of requests sent to teams. Most ICPS services are compliant with 6 weeks with challenges to meet full compliance seen in Medical and Paediatric Speech and Language teams. SLT and Paediatricians receive more advice requests and are the services under most operational pressure currently with high service demand.

Norfolk and Suffolk NHS Foundation Trust (SNEE):

- NSFT have revised the process for EHCNA advice requests and have now managed to commit clinical time to the management alongside dedicated admin in order to embed the revised process.
- ADHD team have developed a new care plan which will support the timely response to requests in their service which represents a significant proportion.
- Approx 50 Suffolk CFYP staff attended workshop with DCO team in Sept 23 focussed upon health advice, including quality and timeliness
- Most of the outstanding requests relate to one specific team where additional support is being offered to increase compliance and workshop has helped in understanding requests and processes. Service lead continues to monitor capacity issues which has impacted on timeliness of response.

5.0 Emotional wellbeing and mental health services have a positive impact for SEND

Data Source: NHS Digital - Quarterly Talking Therapies data/local Waveney data

Alliance	Dec-20	Mar-21	Jun-21	Sep-21	Dec-21	Mar-22	Jun-22	Sep-22	Dec-22	Mar-23	Jun-23
Ipswich & East Suffolk											
16 to 17											
Percentage Deterioration			15						18		
Percentage Improvement	42	62	46	41	72	62	51	53	57	57	55
Percentage Recovery		38		34	56	34	34	42	39	29	31
Percentage Reliable Recovery		38	34	34	56	28	31	33	36	29	29
18 to 25											
Percentage Deterioration	4	6	5	5	7	8	6	6	7	9	5
Percentage Improvement	66	64	57	62	66	60	63	60	67	71	63
Percentage Recovery	45	47		42	47	41	42	40	48	46	39
Percentage Reliable Recovery	44	45	39	38	45	39	40	36	45	43	37
Waveney											
16 to 17											
Percentage Improvement	33	56	63	43	57	50	38	25	30	67	40
Percentage Recovery	67	33	50	20	43	22	50	50	29	50	33
18 to 25											
Percentage Improvement	36	30	26	25	21	22	16	12	18	17	14
Percentage Recovery	57	33	44	40	36	40	36	46	30	45	40
West Suffolk											
16 to 17											
Percentage Deterioration				22	24						
Percentage Improvement	45	69	57	61	44	59	61	54	57	67	67
Percentage Recovery		44		36	29	53	50	28	41	40	30
Percentage Reliable Recovery		31	41	36	25	47	44	28	33	35	26
18 to 25											
Percentage Deterioration	10	6	5	7	6	11	11	6	7	6	6
Percentage Improvement	68	60	66	66	60	56	62	66	66	71	63
Percentage Recovery	51	42		45	43	43	39	50	47	46	45
Percentage Reliable Recovery	49	39	45	42	39	40	37	46	44	43	40

Definitions

Deterioration

The number of referrals ending the period having finished the course of treatment where the following is true:

- there are two or more PHQ-9 scores and two or more ADSM scores (known as 'paired scores').
- where there is an increase from the first to the last score on either the PHQ-9 measure or the ADSM measure, or both, that is greater than the reliable change threshold for that measure.
- neither the PHQ-9 measure nor the ADSM measure has a decrease from the first to the last score that is greater than the reliable change threshold for that measure.

Improvement

There is a clinically significant improvement in condition following the course of treatment. Measured based on first and last scores on patient questionnaire

Recovery

A referral has moved to recovery if they were defined as a clinical case at the start of their treatment (at 'caseness') but not when they finish the course of treatment

Reliable Recovery

A referral is reliably recovered if they meet the criteria for both the improvement and recovery measures

Note: the above percentages are calculated from figures where those lower than 5 have been suppressed and should therefore be applied cautiously

Percentages within given groups will not add up to 100 as a single patient may have one or all three of improvement, recovery and reliable recovery recorded

6.0 Number of young people aged 14-25 with learning disability receiving annual health check

Data Source: NHS Digital

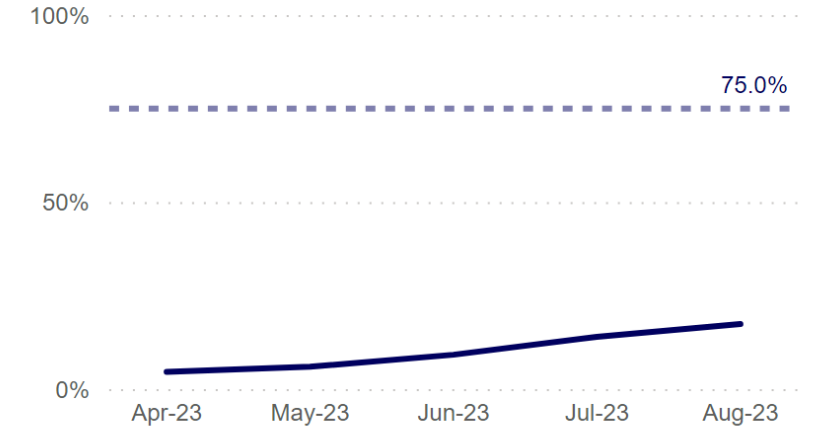
Summary - 14 to 17 Year Olds

	Apr-23	May-23	Jun-23	Jul-23	Aug-23
Checks (Cumulative)	16	21	33	51	64
Register	347	352	359	365	368
Uptake	4.6%	6.0%	9.2%	14.0%	17.4%
Declined (Cumulative)	0	0	1	3	2
Action Plan Achievement	100.0%	100.0%	90.9%	92.2%	92.2%

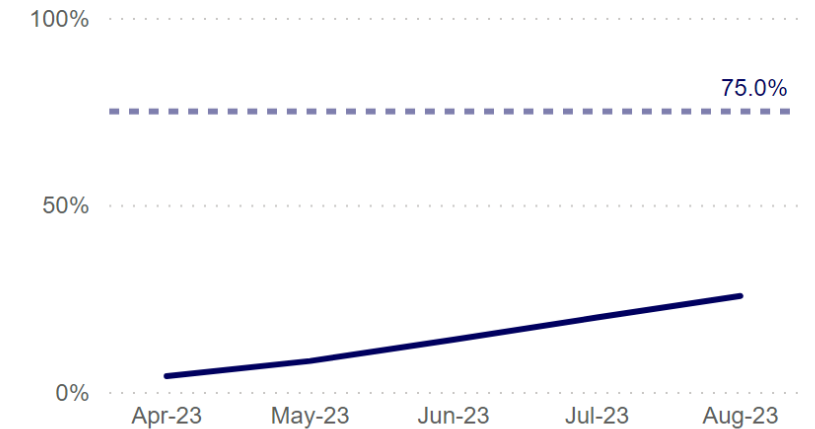
Summary - 18+ Year Olds

	Apr-23	May-23	Jun-23	Jul-23	Aug-23
Checks (Cumulative)	177	348	589	841	1,085
Register	4,200	4,207	4,219	4,223	4,227
Uptake	4.2%	8.3%	14.0%	19.9%	25.7%
Declined (Cumulative)	2	4	11	19	28
Action Plan Achievement	82.5%	87.4%	90.0%	91.3%	90.5%

Health Checks Uptake % (cumulative)



Health Checks Uptake % (cumulative)



6.0 Number of young people aged 14-25 with learning disability receiving annual health check

Data Source: NHS Digital

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Learning Disability Annual Health Checks

SNEE ICB:

- The SNEE LD AHC patient experience survey that is in development. The aim is to push this out through practices via the 'Let's Talk SNEE' platform so that people receive a link after they have had their LD Annual Health Check
- DCO attendance at Suffolk SENCO Forum to promote LD AHCs and new comms from the SNEE LD AHC Steering Group with links to LD Liaison Nurses
- A dedicated learning disability health check support area for primary care health professionals is now live on the SNEE ICB website. A collection of nationally produced and locally adapted easy read documents, videos, toolkits, guidance documents and links and contact details to the Suffolk LD Liaison team
- SNEE LD annual health check steering group has been established and has developed a 'Don't miss out' poster which highlights annual health checks and health action plans. Digital copies and posters have been distributed, and the DCO team have ensured this information has made its way to Education colleagues via SENCO Forum, Local Offer and 'Suffolk Headlines' website
- Several quality improvement projects are underway. These include the LD friendly practice pilot with 3 GP surgeries in Ipswich & East Suffolk and West Suffolk, and the LD deep dive into GP registers
- Peer educator programme continues whereby peer educators (people with a learning disability) talk to their peers through annual health check workshop about the importance of an annual health check. The peer educators will start visiting special schools/colleges in 2023/24 with the school nursing team

6.0 Number of young people aged 14-25 with learning disability receiving annual health check

Data Source: NHS Digital

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Learning Disability Annual Health Checks

N&W ICB:

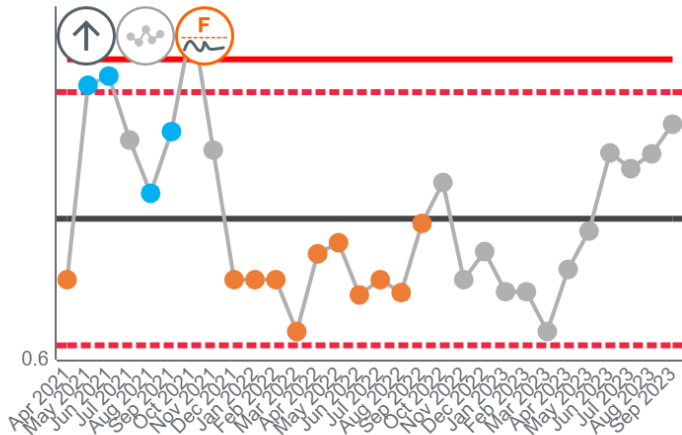
- We are working with Opening Doors to introduce a pathway for LD AHC patient feedback and will probably include a paper and electronic version.
- A survey of General Practice staff regarding their experience of delivering LD AHCs is taking place which will be is planned to be feedback in the November LD&A Board.
- Working closely with ICB primary care locality colleagues in GY&W to provide a detailed breakdown of performance data by Practice and targeted additional support that is available
- DCO attendance at SENCO Forum in North Suffolk to discuss and promote LD AHCs

7.0 Children and young people have access to emotional wellbeing and mental health services within expected time frames

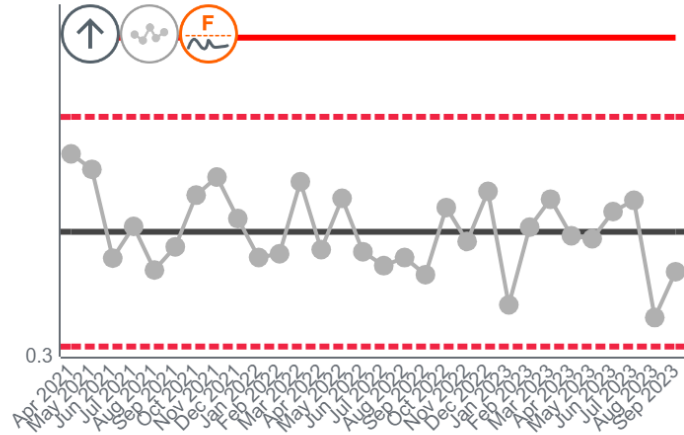
Data Source: NSFT

Indicator Name	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
Under 18 Emergency referrals assessed within 4 Hours	68.0%	72.9%	83.0%	81.0%	82.9%	86.7%
Under 18 Routine referrals assessed within 28 days	52.4%	51.7%	57.6%	60.0%	34.8%	44.6%
Under 18 Referrals treated within standard (18 weeks)	56.8%	47.7%	66.3%	75.4%	61.7%	64.8%
Referrals for service users aged 18 and over treated within standard: CFYP Service Line	90.0%	50.0%	76.3%	95.2%	84.0%	71.4%

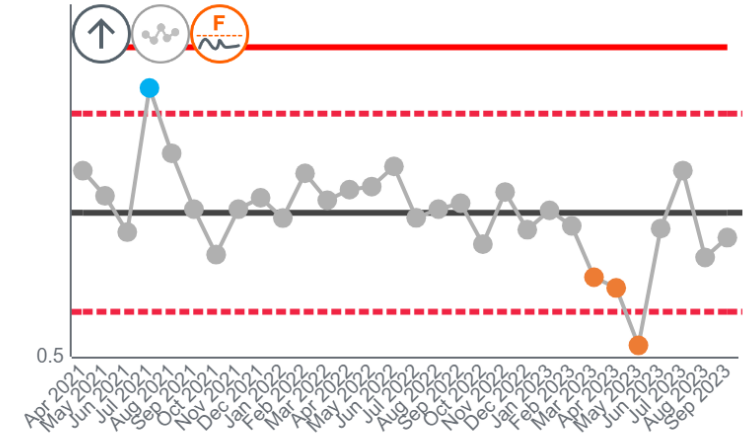
Emergency Referrals <4hrs (U18s)



Routine Referrals <28 days (U18s)



Referrals within standard (U18s)



7.0 Children and young people have access to emotional wellbeing and mental health services within expected time frames

Data Source: NSFT

Commentary Page 1 of 2

Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust (SNEE ICB):

- The Crisis offer is provided by the all age crisis service including FRS and not the Suffolk CFYP Service.
- Under 18 Performance in the number of under 18 emergency referrals being assessed within 4 hours continues to fluctuate due to the low number of service users within this metric. Referral information identified as not always being accurate in being able to determine the correct priority for the referral which.
- Under 18 routine referrals performance increased significantly in September 2023 compared with August 2023. The CAMHS Teams have been reviewing their processes and caseload to increase effectiveness. Vacancy rates in this team have impacted on the waiting lists, weekly recruitment review providing focused support from the specialist recruitment team.
- Under 18 routine referrals treated within standard- The CAMHS Team have implemented the use of proformas to support the working of the treatment pathways which continues to provide a more structured approach to the appropriate treatment pathways.
- Senior clinical leadership driving focused clinic and caseload initiatives with intensive recovery exercise planned.
- Review of current processes within ADHD, exploring future ways of working that maximise the clinical potential of the team to better meet the needs of the cohort.
- CYP referrals over 18 year treated within standard- Review of caseloads has seen a decrease in caseload totals due to service user reaching 25 years or no longer requiring a service. This has provided more resource to treatment and assessment of service users and an overall increase in performance. The YAMHS service has a 17% vacancy rate which has impacted on activity in recent months.
- Recovery plans and monthly reporting in place to the ICB to monitor the recovery of these services.

7.0 Children and young people have access to emotional wellbeing and mental health services within expected time frames

Commentary Page 2 of 2

Norfolk and Waveney ICB:

Under 18 Emergency referrals assessed within 4 Hours

Emergency referrals are assessed by CAIST (Children's Assessment and Intensive Support Team) in Waveney. Performance has steadily improved across N&W over the last 6 months from 65% to 81%. Over the last 18 months the CAIST team has had significant pressures with increased acuity and complexity of referrals and a significant increase in number of referrals during and post covid. As a result the ICB invested an additional £400K to increase senior leadership within the team to ensure clinicians felt supported and safe. To protect team members from burn out, the decision was made to reduce service delivery from 8am – 8pm 7 days a week to 9-5 Monday to Friday. CAIST has made great progress over the last 6 months, the team has filled many vacancies and will return to standard hours in January 2024.

Under 18 Routine referrals assessed with 28 days

Performance against this standard in Norfolk and Waveney is 43% (July 23). A significant number of referrals for people into NSFT across Norfolk and Waveney could have their needs met by other providers within the system. As a result, the N&W system is developing an integrated front door (IFD) to ensure all requests for support are allocated to the right pathway and service provider to meet need the first time. This will ensure that NSFT has more capacity to assess all routine referrals within 28 days. The IFD is due to go fully live in April 2024 and the N&W system is currently exploring how the interim arrangements for the IFD can support the triaging function within NSFT prior to April 24.

Under 18 referrals treated within standard (18 weeks)

Great Yarmouth and Waveney performance August 2023 - 90%. The ICB has funded YMCA to support CYP and families on waiting lists to access appropriate support sooner. The ICB has also commissioned a professional therapeutic pathway, which provides a range of alternative therapeutic treatments to support system waits.

Referrals for service users aged 18 and over treated within standard: CFYP service line

Great Yarmouth and Waveney performance August 2023 - 66%. NSFT and the ICB has funded a range of waiting list initiatives to provide access to therapeutic interventions, including Think CBT, UKCN and The Matthew Project. There has also been a focus on improving access to Talking Therapies for CYP aged 16-25 and 16-25 year olds accessing support within primary care through the roll out of enhanced recovery workers and Primary Care Workers, funded by Adult Community Transformation.

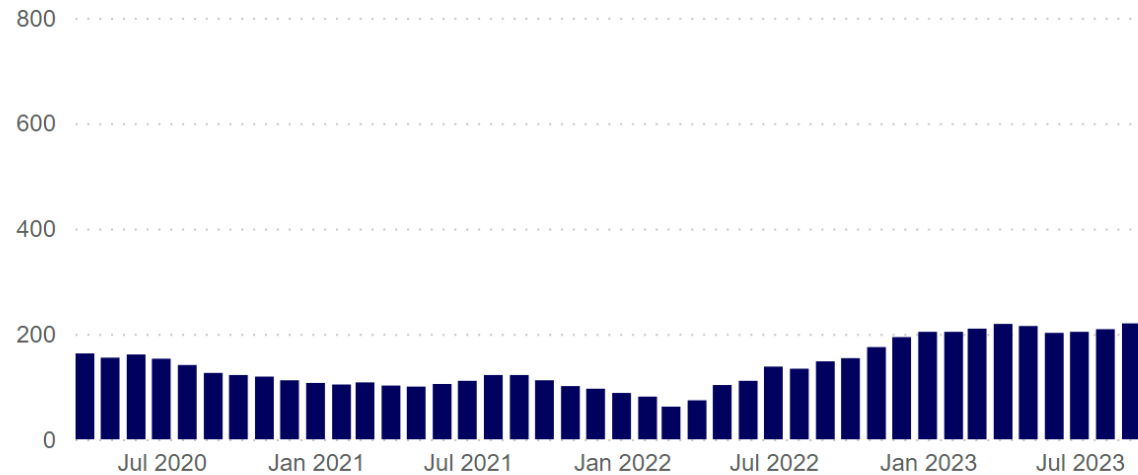
8.0 Children and young people have access to ADHD assessment within expected timeframes

Data Source: NSFT

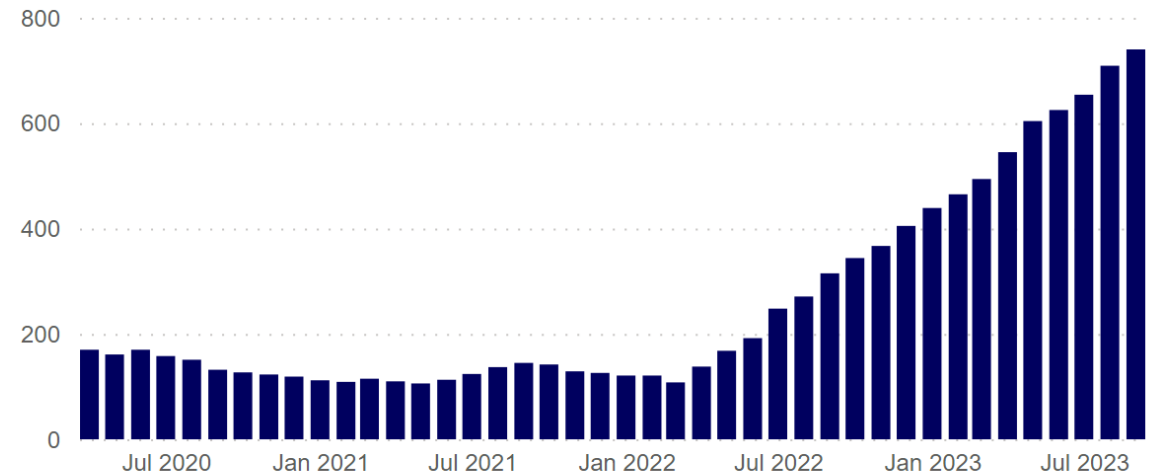
ADHD (RTA) - Under 25s

Age Band		Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
5-9	RTA - Incomplete	124	125	118	117	121	115
	Average Weeks Waited	20.9	21.5	22.3	22.1	25.0	28.2
10-15	RTA - Incomplete	86	81	78	80	82	95
	Average Weeks Waited	18.8	20.6	21.5	23.0	25.0	22.6
16-17	RTA - Incomplete	9	9	6	7	6	10
	Average Weeks Waited	24.4	28.8	36.4	35.5	42.1	22.9
18-24	RTA - Incomplete	326	389	423	450	500	520
	Average Weeks Waited	27.1	26.2	27.7	30.0	31.0	32.9
Total	RTA - Incomplete	545	604	625	654	709	740
	Average Weeks Waited	24.4	24.5	26.0	27.8	29.4	30.7

ADHD (RTA - Incomplete) - Under 18s



ADHD (RTA - Incomplete) - Under 25s



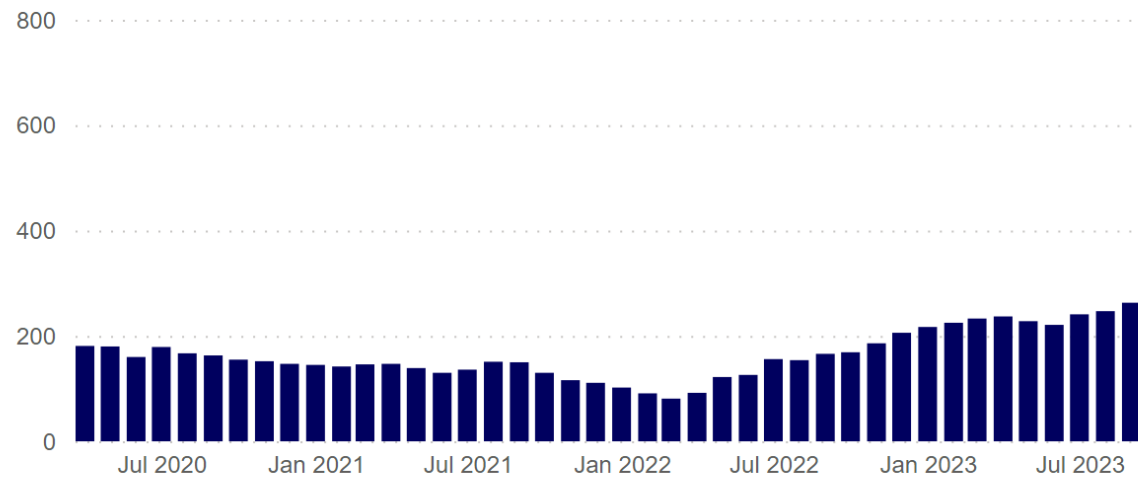
8.1 Children and young people have access to ADHD treatment within expected timeframes

Data Source: NSFT

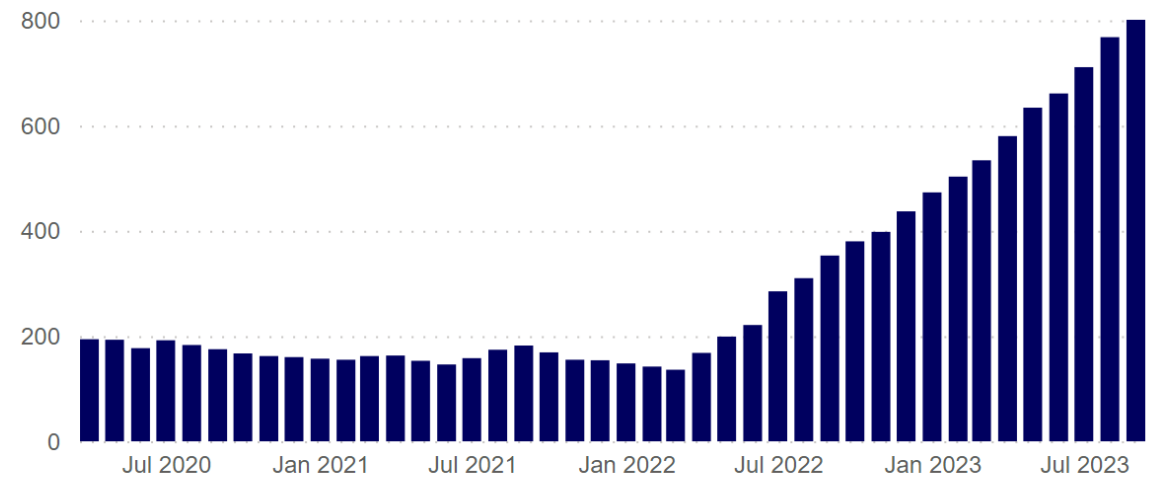
ADHD (RTT) - Under 25s

Age Band		Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
5-9	RTT - Incomplete	133	131	128	138	140	134
	Average Weeks Waited	21.6	22.0	23.8	25.6	28.2	31.7
10-15	RTT - Incomplete	93	87	85	94	98	117
	Average Weeks Waited	19.4	21.3	22.3	24.1	26.3	25.2
16-17	RTT - Incomplete	11	10	8	9	9	12
	Average Weeks Waited	22.6	27.5	31.0	31.9	35.6	23.7
18-24	RTT - Incomplete	343	406	440	470	521	538
	Average Weeks Waited	28.7	27.8	29.2	31.5	32.3	34.1
Total	RTT - Incomplete	580	634	661	711	768	801
	Average Weeks Waited	25.5	25.7	27.3	29.4	30.8	32.3

ADHD (RTT - Incomplete) - Under 18s



ADHD (RTT - Incomplete) - Under 25s



8.0 Children and young people have access to ADHD assessment within expected timeframes

8.1 Children and young people have access to ADHD treatment within expected timeframes

Commentary Page 1 of 2

Under 18's ADHD, Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust (SNEE):

- Online Conners screening now being mobilized in ADHD which will increase efficiency of collecting pre assessment data.
- ADHD team impacted by the system wide historical increase in referrals which are now in the pre-screening phase undertaken by the team.
- The ADHD team have a total 6.0 WTE clinical staff and a case load of 1026. The team provide a specialist service for ADHD assessment and diagnosis, who are also supporting a number of additional initiatives which are impacting on their capacity to complete new assessments.
- The ADHD team commenced triage of NDD cases as part of the Triage Panel NDD Recovery work. The team are accommodating this screening work alongside existing clinical assessments and outpatient appointments. The NDD pathway in Suffolk is under review which will be an integral part of completing this NDD recovery work, this work includes integrated work with the Paediatric service and ICB.
- The current national shortage of ADHD medication is impacting on the service with the provision of additional appointments required for medication reviews. The team is linking with the Chief Pharmacist at the ICB and NSFT Chief Pharmacist to support this work, mobilisation of daily huddles commenced and provided by the ADHD team to provide support to families and GPs with medication queries. In the ADHD caseload this impacts 461 patients which is 44% of the caseload. Current management strategies for treatment include daily huddles to prevent breaks in treatment and patient safety.
- Core care plan in use with treatment which includes a review of SEND needs and access to learning. If any concerns are highlighted the ADHD service contacts the education provider to ensure the young person's needs are met and reasonable adjustments are in place.

8.0 Children and young people have access to ADHD assessment within expected timeframes

8.1 Children and young people have access to ADHD treatment within expected timeframes

Commentary Page 2 of 2

Under 18's ADHD, Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust (contd.):

- Referral rates for ADHD have increased due to the recovery work being undertaken.
- Weekend clinics were provided over the summer to address the waits for assessment and consequently treatment.
- The provision of Non-Medical Prescriber roles within the team has increased the capacity for medication reviews.

Adult ADHD Service, Suffolk Care Group, Norfolk and Suffolk NHS Foundation Trust (SNEE):

- The Adult ADHD Service continues to receive a high number of referrals for ADHD assessments. The service is currently in the procurement stage with the ICB of outsourcing our long waits greater than 40 weeks. Once in place, this will allow teams to focus on the new referrals.
- The service is managing all waits via weekly reporting and meetings, providing assurance that we are aware of the current demand.
- Ongoing ASD/ADHD adult oversight group working alongside the ICB, VCSE and those with lived experience to discuss and review current pathways to improve waiting times and discharge rates.

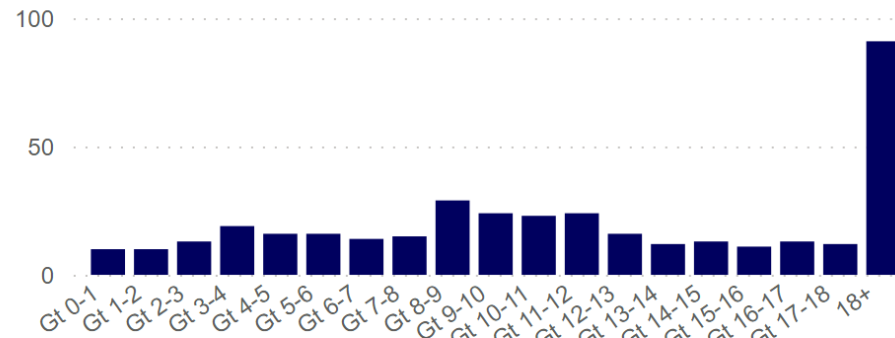
8.2 Children and young people have access to ASD assessment within expected timeframes

Data Source: Integrated Community Paediatric Services (ICPS)

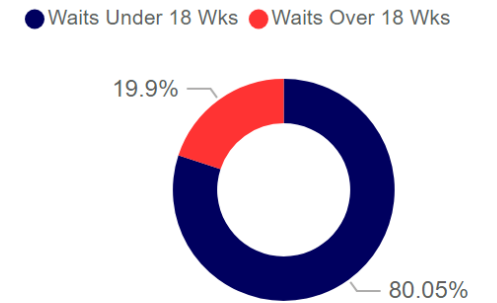
Patients identified as having Socio-Communication difficulties (Under 11s)

Month	Total Waiting	Max Waiting Time (wks)	Average Waiting Time (wks)	No. Waiting over 18 Weeks	% Wait over 18 Weeks
Dec-22	348	54.7	10.8	61	17.5%
Jan-23	322	59.1	11.5	59	18.3%
Feb-23	317	63.1	12.7	62	19.6%
Mar-23	342	67.6	13.6	104	30.4%
Apr-23	360	47.6	14.6	129	35.8%
May-23	343	49.3	14.4	119	34.7%
Jun-23	356	50.0	14.5	115	32.3%
Jul-23	370	50.0	13.3	87	23.5%
Aug-23	399	54.4	13.7	87	21.8%
Sep-23	381	58.7	13.8	76	19.9%

U11s Waits by Weeks (latest month)



% Waiting Over 18 Weeks (latest month)



Data Source: NSFT

Youth Autism (11-17s) - Weeks Waiting for Assessment

Month	Current ASD Waitlist	Average Wait of those on the Waitlist not yet Assessed (weeks)	Maximum Wait in Weeks not yet Assessed	Average Wait Time from Referral to Assessment (weeks)	Maximum Wait in Weeks from Referral to Assessment
Sep-23	223	42	98	55	85
Oct-23	233	45	106	55	90

8.2 Children and young people have access to ASD assessment within expected timeframes

Commentary

Under 11's ASD Assessment, Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust (SNEE):

- The graph reflects the number of children referred with socio-communication difficulties requiring formal assessment for possible ASD with Paediatrician or the multidisciplinary team
- The number of children waiting for formal assessment is reducing gradually as clinicians work through the waiting list as part of the NDD recovery work. This does not account for those children within the NDD coordination function that have not been triaged and this risk is acknowledged within the system.
- The community paediatricians and multidisciplinary team continue to focus on assessment backlog alongside other pathways and caseload management. The Paediatric medical team has completed a demand and capacity review and there is pressure across all clinical pathways due to growing demand, complexity and high caseload numbers.

ADYSS (11-17), Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust (SNEE):

- The numbers waiting remains high due to the impact of supporting the NDD pathway in Suffolk recovery work
- Assessments carried out by the multidisciplinary team. Referrals to the team from other NSFT services will have received an initial assessment by the referring team, which will be followed by the ASD assessment.
- Majority of referrals are now being received via the NDD Pathway and currently there are high rates of referral. The team joined Suffolk Childrens Families and Young People Care group in April 2023 from the Adult Care Group. This has enabled the team to refocus on children's services and be part of the wider NDD provision for the under 18 age group.
- There is currently review of processes, the team are exploring future ways of working that maximise the clinical potential of the team to better meet the needs of the NDD cohort but also the wider body of service users in SCFYP. The team are forward booking appointments for the initial contact to reduce the length of wait. The ADYSS team are reviewing their assessment process to see if this can be streamlined whilst maintaining the clinical rigour and quality.
- The team are also screening cases waiting with Barnardo's alongside the ADHD service.
- The service monitors and reviews the caseload weekly via Lorenzo and SUTL and weekly operation and business support meetings to ensure continuity of processes and address arising issues.

8.3 Children and young people have access to ASD assessment within expected timeframes

Data Source: Norfolk & Waveney ICB

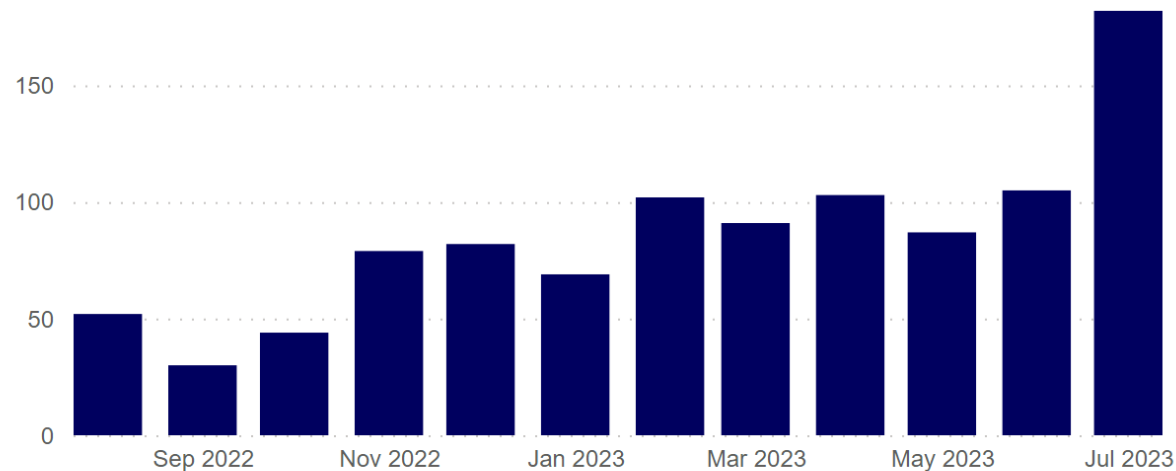
Gt Yarmouth & Waveney NDD/Community Paediatric Service

Performance Indicator	Breakdown	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
Total number of CYP waiting on the pathway		892	927	986	1043	1179	1121	1182	1249	1305	1344	1406	1408
	Waveney approximate 48%	428	445	473	501	566	538	567	600	626	645	675	676
Number of patients having their 1st action (where that action was during the month specified)	Total	79	36	58	103	113	82	119	101	122	110	119	209
	wait <18 weeks	27	6	14	24	31	13	17	10	19	23	14	27
	wait >=18 weeks	52	30	44	79	82	69	102	91	103	87	105	182
Number of patients being discharged (where discharge was during the month specified)	Total	28	44	24	24	39	34	40	26	18	35	38	59
	wait <18 weeks	0	1	1	0	1	1	5	3	1	1	1	3
	wait >=18 weeks	28	43	23	24	38	33	35	23	17	34	37	56

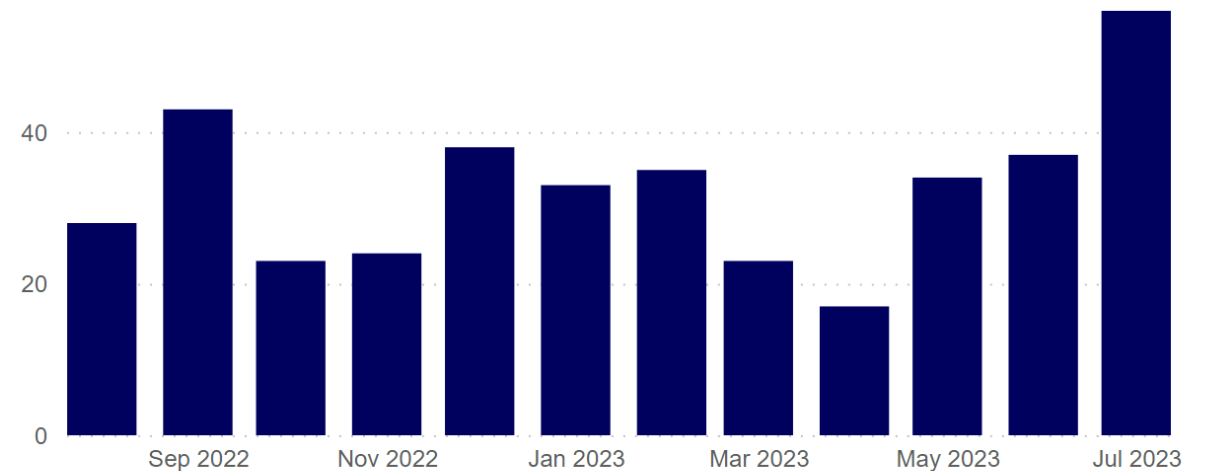
Number of patients having their 1st action - **wait is measured from referral date to date of first action on waiting list**

Number of patients being discharged - **wait is measured from referral date to close date of waiting list**

Number of patients having their 1st action - 18+ week waiters



Number of patients being discharged - 18+ week waiters



8.3 Children and young people have access to ASD assessment within expected timeframes

Commentary

Great Yarmouth & Waveney NDD Community Paediatric Service:

- Newberry clinic has observed a significant change to pathway performance since 2020/21.
- At that time, waits to discharge for ASD/ADHD diagnosis was 26 weeks. Following the retirement of the Community Paediatrician, a reduction in weekly clinics and a marked increase in monthly referrals, average waits to first appointment are 16 months with waits to discharge of up to 2.5 years.
- Newberry has recently commenced transfers to independent providers as part of a waiting list initiative and continues to work with the ICB on its transformation programme.

9.0 Children and young people have access to Therapies and Community Paediatric Services

Data Source: Suffolk Community Services Monthly Report Pack

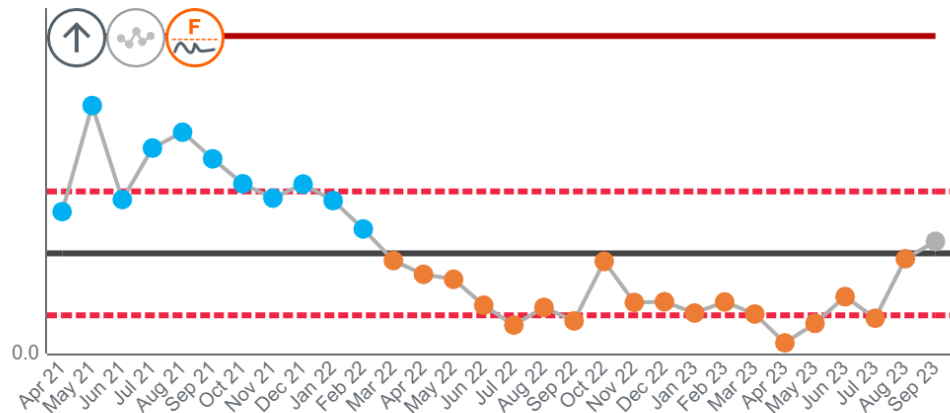
Consultant-Led Paediatric Services (Target 95%)

	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Total
Seen within 18 weeks	3	9	15	12	21	28	88
Total Seen	45	73	75	87	68	78	426
% Seen within 18 weeks	6.67%	12.33%	20.00%	13.79%	30.88%	35.90%	20.66%

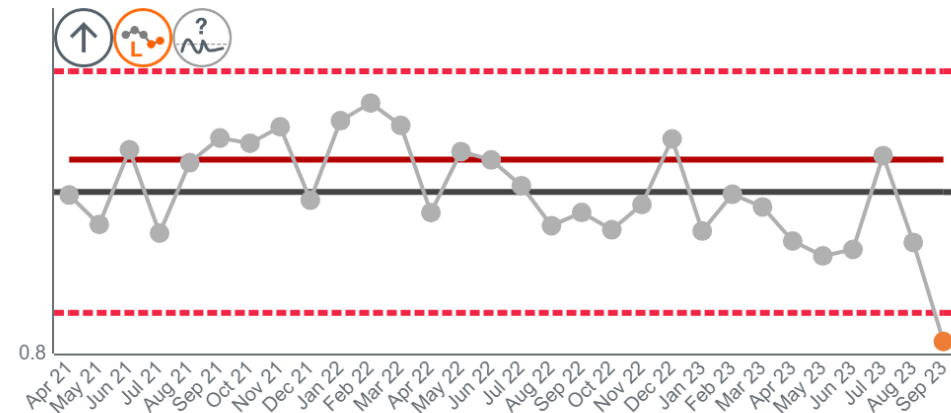
Non-Consultant-Led Paediatric Services (Target 95%)

	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Total
Seen within 18 weeks	191	273	222	245	136	155	1,222
Total Seen	216	313	253	257	154	193	1,386
% Seen within 18 weeks	88.43%	87.22%	87.75%	95.33%	88.31%	80.31%	88.17%

Consultant-Led Referrals (% within weeks)



Non-Consultant-Led Referrals (% within weeks)



Note: Please note the figures presented relate to all paediatric contacts regardless of whether the patient has SEND identified

9.0 Children and young people have access to Therapies and Community Paediatric Services

Data Source: Suffolk Community Services Monthly Report Pack

Commentary

Paediatric Medical Team (Consultant-led Paediatric Services), Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust (SNEE):

- Paediatric capacity continues to be impacted by sustained demand and high caseload numbers requiring medical management of complex needs. There is a locum in place covering a vacancy. Additional capacity has been secured with a full-time specialist nurse to support the team in the West locality. A formal review of capacity and demand started in June to consider options to respond to current levels of service pressure. The findings of this are hoped to be presented to the CYP Committee and SEND Board.
- There is a gradual improvement in compliance with commencing assessment/care within paediatric medical but due to high demand this is likely to remain static at this level.

Commentary for non-consultant led services follows from 9.2

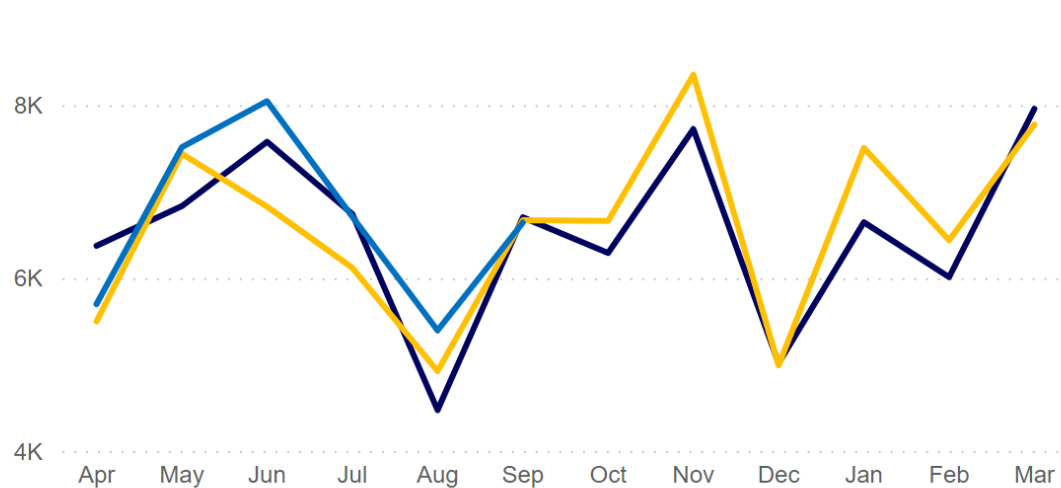
9.1 Contacts (number and method) of community paediatric services with children and young people

Data Source: Suffolk Community Services Monthly Report Pack

Service	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Total
Paediatric Speech & Language Therapy	2,067	3,111	3,699	2,702	1,720	2,692	15,991
Community Children's Nursing Team	1,747	1,951	1,911	1,792	1,867	1,570	10,838
Paediatric Physiotherapy	726	1,020	1,040	829	713	1,008	5,336
Paediatric Occupational Therapy	534	609	577	595	483	667	3,465
Audiology	349	409	481	382	389	304	2,314
Paediatric Psychology	233	349	283	353	197	351	1,766
Suffolk Communication Aids Resource Centre	45	66	56	59	27	51	304
Total	5,701	7,515	8,047	6,712	5,396	6,643	40,014

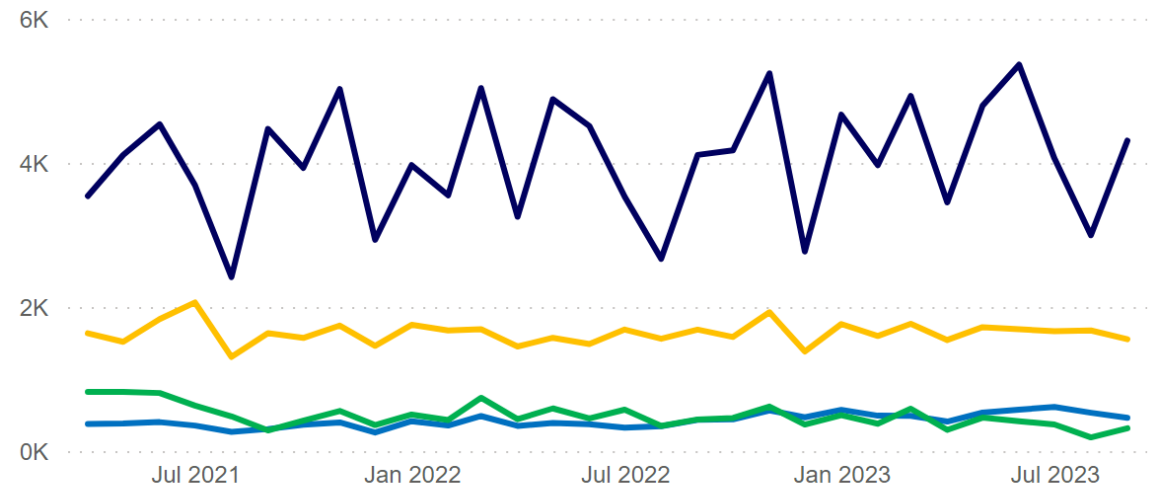
Contacts by Year

● 2021/22 ● 2022/23 ● 2023/24



Contacts by Method

● Email ● Face to Face ● Telephone ● Video



Note: Please note the figures presented relate to all paediatric contacts regardless of whether the patient has SEND identified

9.1 Contacts (number and method) of community paediatric services with children and young people

Data Source: Suffolk Community Services Monthly Report Pack

Commentary

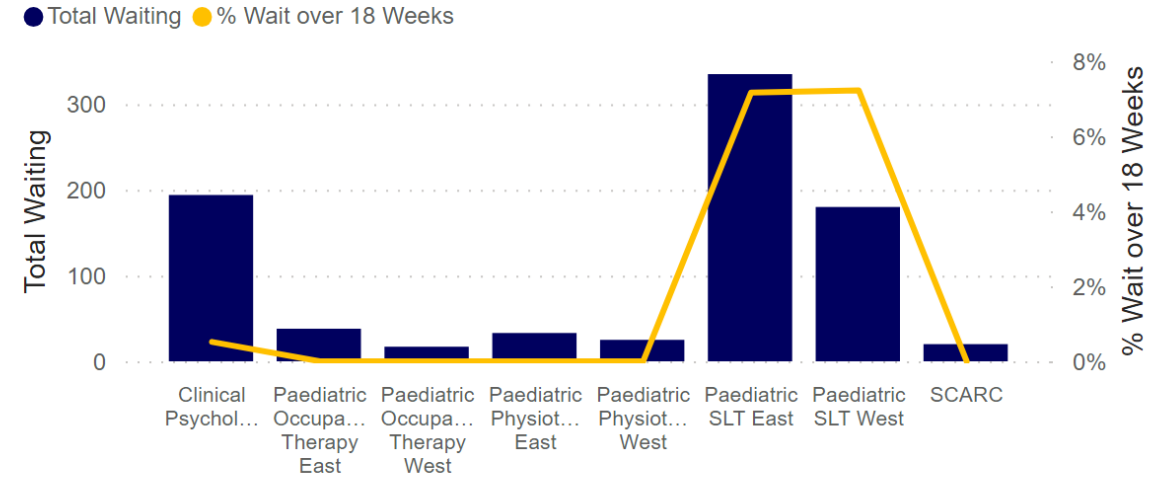
Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust (SNEE):

- This chart highlights all clinically relevant activity undertaken in the ICPS services, not only SEND
- Activity generally increasing across services

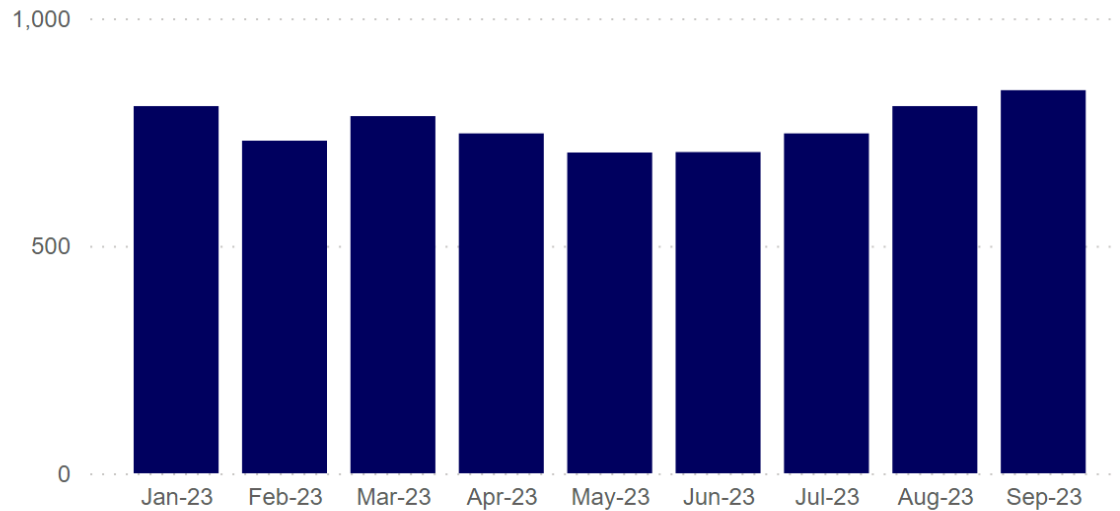
9.2 Children and young people have access to Therapies within expected timeframes

Data Source: Integrated Community Paediatric Services (ICPS)

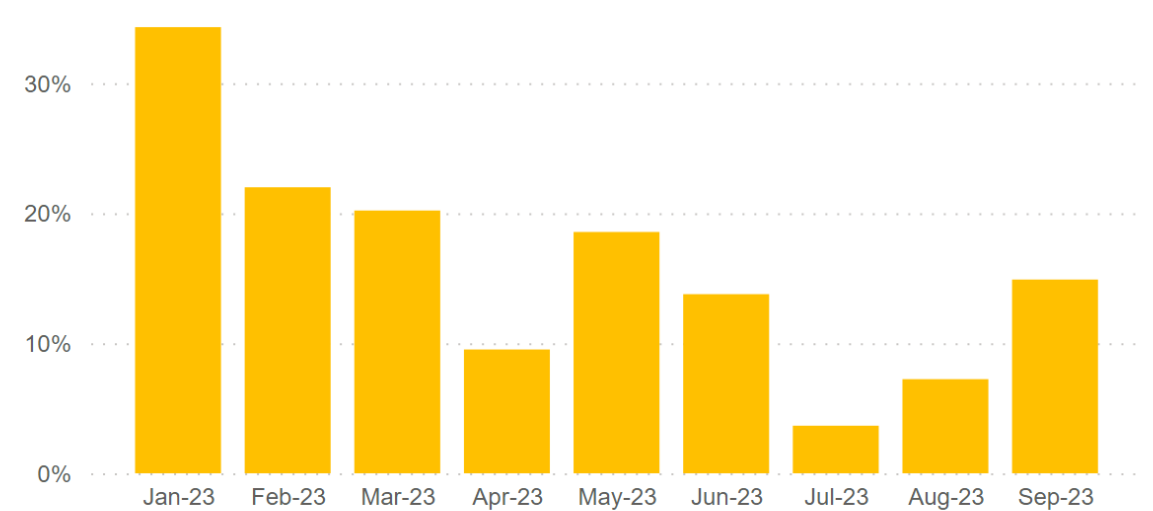
Therapy	Total Waiting	Max Waiting Time (wks)	Average Waiting Time (wks)	No. Waiting over 18 Weeks	% Wait over 18 Weeks
Clinical Psychology	194	17.29	7.31	1	0.52%
Paediatric Occupational Therapy East	38	14.14	6.66	0	0.00%
Paediatric Occupational Therapy West	17	15.29	5.68	0	0.00%
Paediatric Physiotherapy East	33	12.71	6.00	0	0.00%
Paediatric Physiotherapy West	25	15.29	7.35	0	0.00%
Paediatric SLT East	335	38.57	11.39	24	7.16%
Paediatric SLT West	180	26.14	9.28	13	7.22%
SCARC	20	17.57	8.90	0	0.00%



Total Waiting



% Waiting Over 18 Weeks



9.2 Children and young people have access to Therapies within expected timeframes

Data Source: Integrated Community Paediatric Services (ICPS)

Commentary

Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust (SNEE):

- Therapy services are seeing sustained levels of activity and complexity, but most are meeting 18 weeks compliance levels. Compliance levels within Speech and Language Therapy are lower due to sustained referral rates, high caseloads which is exacerbated by vacancies (turnover and maternity leave) in some pathways. The Trust is working with Suffolk County Council to prioritise identified investment to increase capacity within special schools/specialist units (not reflected in this data).
- Therapy services compliance is primarily due to lower than target compliance levels within paediatric Speech and language therapy whilst all other disciplines are compliant.
- Speech Therapy caseload numbers and demand remain higher than expected and above capacity of the service. Analysis of demand and capacity almost completed and findings of this are hoped to be presented to the CYP Committee and SEND Board

9.3 Children and young people have access to Therapies within expected timeframes

Data Source: Norfolk & Waveney ICB

Norfolk & Waveney Speech and Language Therapy Service

Performance Indicator		Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
% of CYP seen within 12 weeks of assessment for intervention	Numerator	3	9	4	2	1	1	6	7	5	8	5	5
	Denominator	3	9	4	2	2	2	7	9	5	10	5	8
	%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	85.7%	77.8%	100.0%	80.0%	100.0%	62.5%
% of CYP waiting <18 Weeks for a SaLT assessment	Numerator	9	68	52	57	47	50	59	50	43	74	87	75
	Denominator	124	157	149	146	151	144	163	150	126	169	181	180
	%	7.3%	43.3%	34.9%	39.0%	31.1%	34.7%	36.2%	33.3%	34.1%	43.8%	48.1%	41.7%
% of parents who report high level of satisfaction with elements of Specialist intervention delivered by the Service	Numerator	2	2	3	1	2	1	38	3	5	6	4	3
	Denominator	2	2	3	2	8	1	46	3	6	6	4	3
	%	100.0%	100.0%	100.0%	50.0%	25.0%	100.0%	82.6%	100.0%	83.3%	100.0%	100.0%	100.0%
Existing information for EHC needs assessment requests: within 2 weeks of request	Numerator	86	51	61	81	115	58	68	90	79	91	95	115
	Denominator	89	56	63	81	119	65	68	107	83	97	99	122
	%	96.6%	91.1%	96.8%	100.0%	96.6%	89.2%	100.0%	84.1%	95.2%	93.8%	96.0%	94.3%
New advice and information for the EHC needs assessment: within 6 weeks of request	Numerator	17	29	7	5	14	24	8	12	6	13	14	30
	Denominator	48	61	45	40	46	48	38	55	38	53	49	62
	%	35.4%	47.5%	15.6%	12.5%	30.4%	50.0%	21.1%	21.8%	15.8%	24.5%	28.6%	48.4%
Number of open referrals in service		384	391	363	380	372	349	387	406	369	418	413	384
Number of calls into the service		5	9	9	10	5	6	10	16	7	15	22	15

9.3 Children and young people have access to Therapies within expected timeframes

Data Source: Norfolk & Waveney ICB

Commentary

Norfolk and Waveney ICB, Speech and Language Therapy:

- Speech & Language Therapy Service waits to initial assessment and treatment are steadily increasing.
- In 2021, the average wait for a new referral was in excess of two years, reflective on multiple waiting lists and a legacy of conflicting contracts across the footprint. The shift to a single provider model has had a good impact on children and young people.
- Average waits in 2023 are now 15 months and although too long, show a positive change. From Q1 (August 23 onwards) CCS is doubling its target trajectory of waits under 18 weeks from 30% to 60% and will increase the treatment target from 50 to 70%. These temporary targets, which represent a natural conflict in managing new demand and meeting existing EHCP provision, will continue to increase over time.
- The recovery plan is working, although not as quickly as we would want.

9.4 Children and young people have access to Therapies within expected timeframes

Data Source: Norfolk & Waveney ICB

Gt Yarmouth & Waveney Occupational Therapy Service

Performance Indicator	Breakdown	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
Total number of CYP waiting on the pathway		7	6	10	14	19	16	16	21	2	6	6	10
Number of patients having their 1st action (where that action was during the month specified)	Total	34	15	16	12	23	28	16	18	51	29	43	38
	wait <18 weeks	25	13	11	6	12	17	6	12	27	8	29	28
	wait >=18 weeks	9	2	5	6	11	11	10	6	24	21	14	10
Number of patients being discharged (where discharge was during the month specified)	Total	40	26	19	20	20	29	15	27	45	35	21	23
	wait <18 weeks	0	2	2	3	0	4	0	2	11	0	3	3
	wait >=18 weeks	40	24	17	17	20	25	15	25	34	35	18	20

Number of patients having their 1st action - **wait is measured from referral date to date of first action on waiting list**

Number of patients being discharged - **wait is measured from referral date to close date of waiting list**

9.4 Children and young people have access to Therapies within expected timeframes

Data Source: Norfolk & Waveney ICB

Commentary

Norfolk and Waveney ICB, Occupational Therapy:

- Occupational Therapy Service - Newberry clinic has observed a significant change to pathway performance since 2020/21.
- Focus of work for 18 months has been creation of a digital universal library on JON. Professional platform went live in the Spring with Parent access to follow in the Autumn 23/24.
- Additional therapists are being recruited and staff trained in Sensory Integration Therapy. Families receive advice while waiting.

9.5 Children and young people have access to Therapies within expected timeframes

Data Source: Norfolk & Waveney ICB

Gt Yarmouth & Waveney Physiotherapy Therapy Service

Performance Indicator	Breakdown	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
Total number of CYP waiting on the pathway		15	26	29	39	27	26	23	21	25	28	12	22
Number of patients having their 1st action (where that action was during the month specified)	Total	50	41	44	45	57	37	64	41	39	41	28	34
	wait <18 weeks	29	25	24	28	35	24	31	12	17	13	18	14
	wait >=18 weeks	21	16	20	17	22	13	33	29	22	28	10	20
Number of patients being discharged (where discharge was during the month specified)	Total	18	26	29	14	50	18	90	51	24	39	33	38
	wait <18 weeks	5	6	6	4	8	5	10	6	2	2	0	5
	wait >=18 weeks	13	20	23	10	42	13	80	45	22	37	33	33

Number of patients having their 1st action - **wait is measured from referral date to date of first action on waiting list**

Number of patients being discharged - **wait is measured from referral date to close date of waiting list**

9.5 Children and young people have access to Therapies within expected timeframes

Data Source: Norfolk & Waveney ICB

Commentary

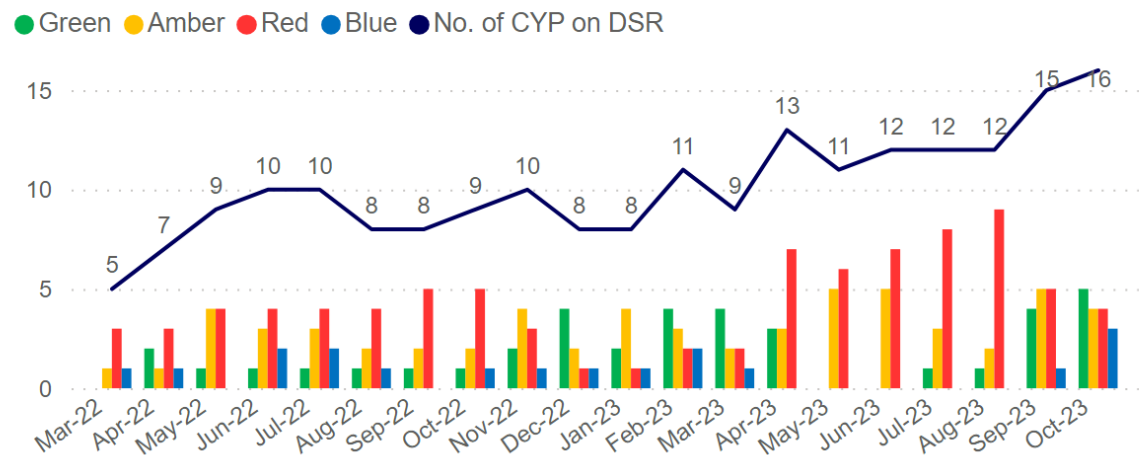
Norfolk and Waveney ICB, Physiotherapy:

- Great Yarmouth & Waveney Physiotherapy Service has not been a key area of development although further co-production with families is planned to develop and create resources for families referred.

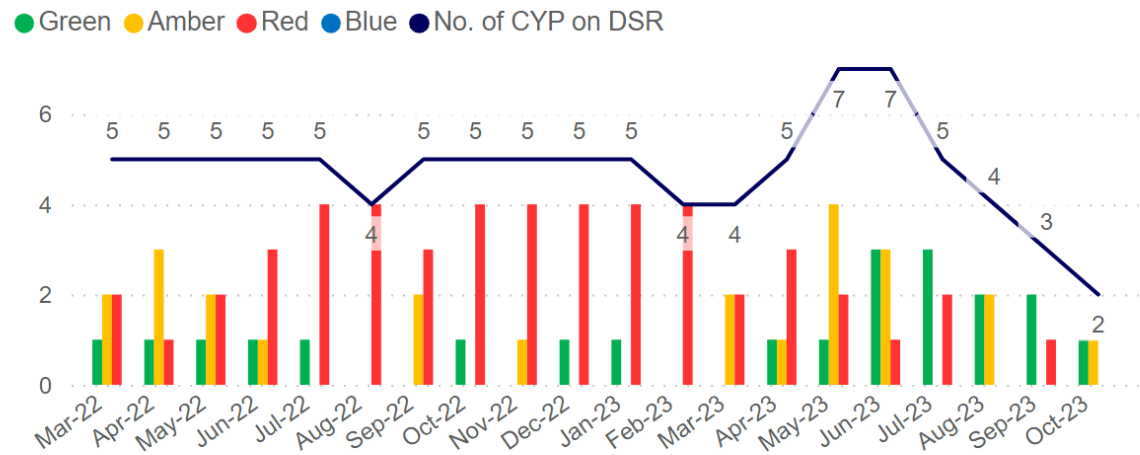
10.0 Children and young people (0-18) with SEND have a holistic and independently led review of their needs where accessing Tier 4 care

Data Source: SNEE ICB/Norfolk & Waveney ICB/NHS England

Dynamic Support Register (DSR) RAG Ratings (Suffolk - SNEE)



Dynamic Support Register (DSR) RAG Ratings (Waveney)



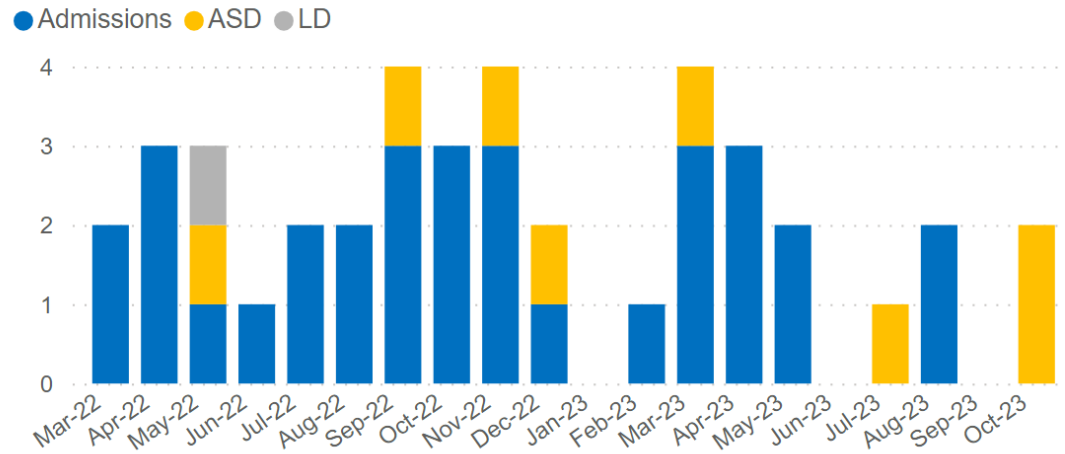
Immediate risk of person being admitted to a mental health hospital.	<ul style="list-style-type: none"> A C(E)TR must take place Referral to the keyworker service for children and young people.
Immediate risk that the person will be admitted to a mental health hospital without urgent intervention.	<ul style="list-style-type: none"> Multi-agency meeting and/or C(E)TR must take place Referral to the keyworker service for children and young people.
Some risks that could lead to the person being admitted or re-admitted to a mental health hospital; but currently these risks are being effectively managed.	<ul style="list-style-type: none"> Clear identification of partners who would need to be involved in a C(E)TR if required.
A separate rating must identify children, young people and adults currently in mental health hospitals.	<ul style="list-style-type: none"> Use to identify people needing commissioner oversight visits and inpatient C(E)TRs.

* Please note in April 2023 the Cheshire and Wirral's risk stratification tool; the Children and Young People Dynamic Support Database Clinical Support Tool (CYP DSD-CST), was introduced as part of the DSR review. This led to some CYP's RAG ratings changing and subsequently the number of those rated red increased.

10.1 Children and young people with SEND have a holistic and independently led review of their needs where accessing Tier 4 care

Data Source: SNEE ICB/NHS England

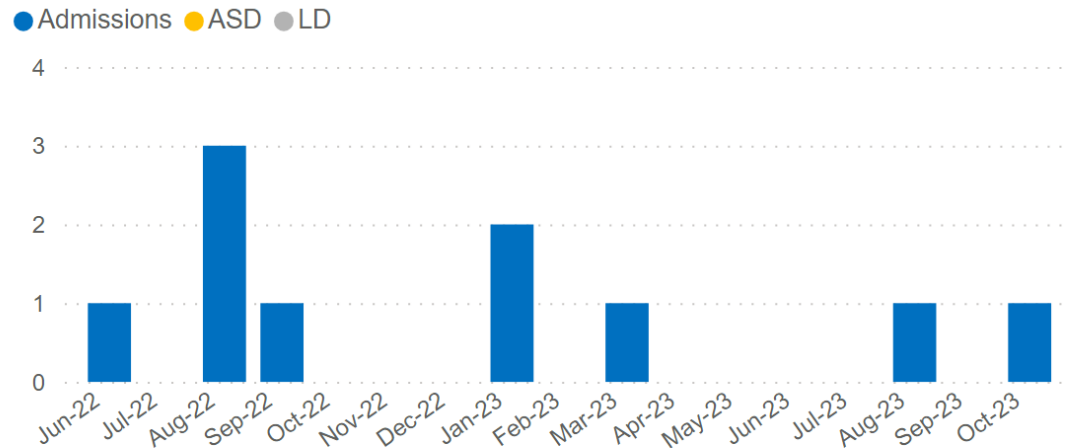
Tier 4 & TCP Admissions (Suffolk - SNEE)



Of the 9 TCP CYP:

- 8 were admitted to a Tier 4 mental health provision
- 1 to a learning disability inpatient provision
- 6 had a pre-admission community CETR
- 3 followed the Blue Light protocol due to level of risk and/or need for urgent action as the YP was in an inappropriate setting, admission took place prior to a community CETR. Subsequent inpatient CETR as per policy guidance

Tier 4 & TCP Admissions (Suffolk - Waveney)



11.0 Number of young people (U18s) accessing a health funded personal health budget

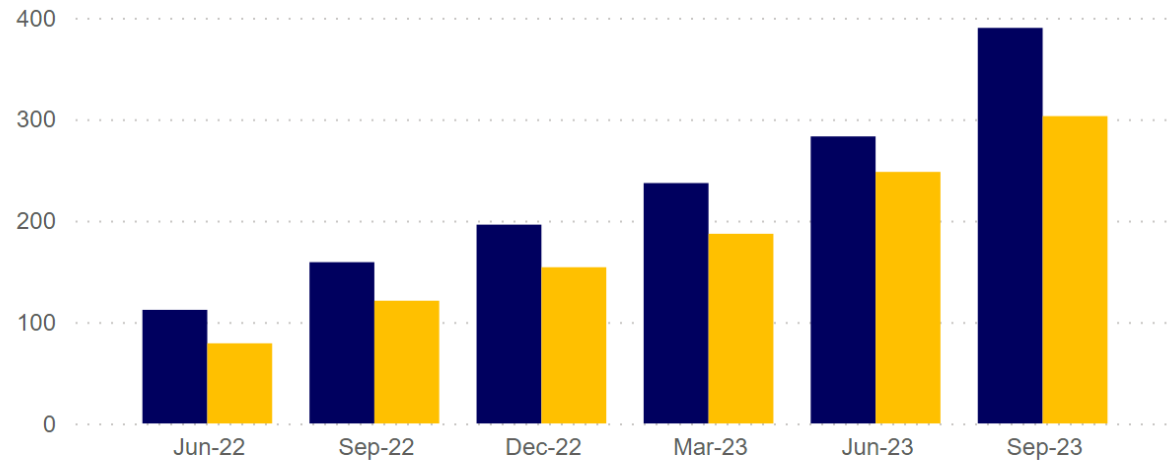
Data Source: NHS Digital/Local Data

PHB Metric

	Total number	Direct payment	Third party budget	Notional budget
Total number of children and young people with a personal health budget YTD	390	45	49	296
How many children receiving continuing care had a personal health budget YTD	92	45	0	47
How many children and young people with education, health and care plans had a personal health budget YTD	47	33	0	14
How many children with a learning disability and/or autism had a personal health budget in the YTD	48	32	0	16
.....of those, how many children were eligible for section 117 aftercare under the Mental Health Act?	1	0	0	1
How many children who have a primary mental healthcare need had a personal health budget YTD	81	34	0	47
.....of those how many children were eligible for section 117	7	0	0	7
How many children have a personal wheelchair budget YTD	254	0	5	249
How many other children had a personal health budget YTD	44	0	44	0

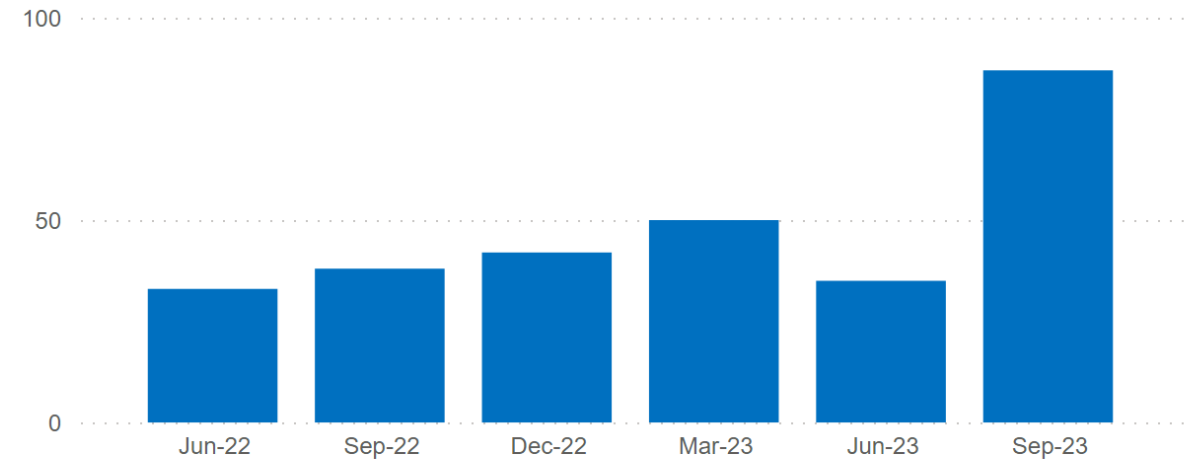
No. of children/young people with a personal health budget (YTD)

● Suffolk (incl. Waveney) ● Suffolk (SNEE)



No. of children/young people with a personal health budget (YTD)

● Waveney



Latest data is as at 31st October 2023 unless stated

EHCPS

[Data >](#)

5.3% **4.2%**

Month Acad.YtD

7,822
Total number of EHC Plans in Suffolk

% of EHCPS issued within target period of 20 weeks (excluding exceptions)

% of EHCPS issued within target period of 20 weeks (excluding exceptions) by financial quarter

Financial Quarter	% of EHCPS issued within target period of 20 weeks (excluding exceptions)
Q3 2022-23	9%
Q4 2022-23	3%
Q1 2023-24	0%
Q2 2023-24	3%

This is under review as data is based on those received not the full cohort. This is under review by AD Inclusion, Head of SEND Services and Intelligence hub.

Education

[Data >](#)

2023* EYFS Pupils with Good Level of Development

	LA	National
% Pupils with No SEN	70	74
% Pupils with SEN	21	20
% Pupils with EHCP	5	4
Pupils with SEN Support	25	24

2023* KS2 Pupils working at, or above, the expected standard across Reading, Writing and Maths (RWM)

	LA	National
% Pupils with No SEN	65	70
% Pupils with SEN	18	20
% Pupils with EHCP	7	8
% Pupils with SEN Support	21	24

2023* KS4 Pupils Achievement at GCSE - 9-4 in English and Maths

	LA	National
Pupils with No SEN	69	72
Pupils with SEN	25	30
Pupils with EHCP	6	13
Pupils with SEN Support	32	37

2023* KS4 Progress 8 Score - Progress between age 11 and 16 across 8 areas

	LA	National
Pupils with No SEN	0.00	0.10
Pupils with SEN	-0.66	-0.62
Pupils with EHCP	-1.17	-1.12
Pupils with SEN Support	-0.48	-0.45

* Provisional data

Suspensions and Exclusions

[Data >](#)

Academic year 2023-24

All Pupils	Suspensions	Exclusions
Primary School	139	0
Secondary School	567	1
Special School	5	0
PRU	0	0
Total	711	1

Pupils with EHCP	Suspensions	Exclusions
Primary School	18	0
Secondary School	51	0
Special School	5	0
PRU	0	0
Total	74	0

Pupils with SEN Support	Suspensions	Exclusions
Primary School	97	0
Secondary School	228	1
Special School	0	0
PRU	0	0
Total	325	1

Post 16 Participation

[Data >](#)

Not in Employment, Education or Training (NEET)

SEND	9.87%
Suffolk	2.91%

Local Offer

[Data >](#)

Service users are aware of and use the local offer website

Monthly Total	New User	Returning
1433 ↓	972 ↓	461 ↑

Education (KPIs 2 and 3)

[Dashboard >](#)

*Covid-19 lockdown started in March 2020 - numbers may subsequently have been affected

Early Years Foundation Stage (EYFS)									
	LA	National	LA National gap	LA	National	LA National gap	LA	National	LA National gap
Good Level of Development	2019	2019		2022	2022		2023 Provisional	2023 Provisional	
Pupils with No SEN	76	77	-1	67	71	-4	72	74	-2
Pupils with SEN	22	24	-2	22	23	-1	21	20	1
Pupils with EHCP	9	5	4	1	4	-3	5	4	1
Pupils with SEN Support	24	29	-5	22	23	-1	25	24	1
Pupils with SEN Gap	54	53	1	45	48	-3	51	54	-3
Pupils with EHCP Gap	67	72	-5	66	67	-1	67	70	-3
Pupils with SEN Support Gap	52	48	4	45	48	-3	47	50	-3
Early Learning Goals (ELG)									
Pupils with No SEN	-	-		14.8	14.9	-0.1	15.2	15.1	0.1
Pupils with SEN	-	-		7.4	7	0.4	7.7	7.1	0.6
Pupils with EHCP	-	-		2.1	2.4	-0.3	2.6	2.3	0.3
Pupils with SEN Support	-	-		8.9	8.3	0.6	9	8.4	0.6
Pupils with SEN Gap	-	-		7.4	7.9	-0.5	7.5	8	-0.5
Pupils with EHCP Gap	-	-		12.7	12.5	0.2	12.6	12.8	-0.2
Pupils with SEN Support Gap	-	-		5.9	6.6	-0.7	6.2	6.7	-0.5
Key Stage 2									
	LA	National	LA National gap	LA	National	LA National gap	LA	National	LA National gap
Percentage of pupils Meeting the Expected Standard in Reading, Writing and Maths	2019	2019		2022	2022		2023 Provisional	2023 Provisional	
Pupils with No SEN	70	75	-5	64	69	-5	65	70	-5
Pupils with SEN	18	18	0	14	18	-4	18	20	-2
Pupils with EHCP	7	9	-2	7	7	0	7	8	-1
Pupils with SEN Support	21	25	-4	16	21	-5	21	24	-3
Pupils with SEN Gap	52	57	-5	50	51	-1	47	50	-3
Pupils with EHCP Gap	63	66	-3	57	62	-5	58	62	-4
Pupils with SEN Support Gap	49	50	-1	48	48	0	44	46	-2
Key Stage 4									
	LA	National	LA National gap	LA	National	LA National gap	LA	National	LA National gap
9-4 in English and Maths - Achievement at GCSE	2019	2019		2022	2022		2023 Provisional	2023 Provisional	
Pupils with No SEN	67	71	-4	75	76	-1	69	72	-3
Pupils with SEN	21	27	-6	32	32	0	25	30	-5
Pupils with EHCP	12	11	1	10	14	-4	6	13	-7
Pupils with SEN Support	25	32	-7	41	39	2	32	37	-5
Pupils with SEN Gap	46	44	2	43	44	-1	44	42	2
Pupils with EHCP Gap	55	60	-5	65	62	3	63	59	4
Pupils with SEN Support Gap	42	39	3	34	37	-3	37	35	2
Progress 8 Score - Progress between age 11 and 16 across 8 areas									
Pupils with No SEN	0.05	0.08	-0.03	0.02	0.1	-0.08	0	0.1	-0.1
Pupils with SEN	-0.47	-0.61	0.14	-0.64	-0.69	0.05	-0.66	-0.62	-0.04
Pupils with EHCP	-0.87	-1.16	0.29	-1.34	-1.33	-0.01	-1.17	-1.12	-0.05
Pupils with SEN Support	-0.3	-0.43	0.13	-0.36	-0.47	0.11	-0.48	-0.45	-0.03
Pupils with SEN Gap	0.52	0.69	-0.17	0.66	0.79	-0.13	0.66	0.72	-0.06
Pupils with EHCP Gap	0.92	1.24	-0.32	1.36	1.43	-0.07	1.17	1.22	-0.05
Pupils with SEN Support Gap	0.35	0.51	-0.16	0.38	0.57	-0.19	0.48	0.55	-0.07

Commentary

All the gaps to national at KS2 for children with EHCPs are smaller than in 2019, with significant improvement in the progress measures in all three subjects which is now almost in line with national figures.

Overall, the gap for combined reading, writing and maths attainment is largely in line with national for children with EHCPs at 1% below.

Most gaps to national for children with SEN support have also narrowed. Again, most markedly in progress measures with figures now almost in line with national figures.

For context, most primary schools in Suffolk are academies, with a greater % of academies than nationally.

There have been significant improvements in children with SEN support achieving grade 4 and 5s in English and in Maths. All improvements are greater in Suffolk than national or in line with national improvements.

There have been significant improvements in children with SEN support achieving grade 4 and 5s in English and in Maths. All improvements are greater in Suffolk than national or in line with national improvements.

Children with an EHCP have not closed gaps to national.

For context, the vast majority of secondary schools in Suffolk are academies, with a far greater % of academies than nationally.

SEND and Inclusion (KPIs 4 and 7)

[Dashboard >](#)

*Covid-19 lockdown started in March 2020 - numbers may subsequently have been affected

	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	
EHCPlans issued	56	34	50	70	54	48	77	109	125	115	113	137	
EHCPlans issued within target period of 20 weeks (excluding exceptions)	6	1	3	2	0	0	0	0	4	5	3	6	
% of EHCPlans issued within target period of 20 weeks (excluding exceptions)	10.7%	2.9%	6.0%	2.9%	0.0%	0.0%	0.0%	0.0%	3.3%	4.3%	3.0%	5.3%	
EHC Plans Issued by Time Taken (where outside of target period of 20 weeks)													
20-22 weeks	14.3%	14.7%	4.0%	5.7%	3.7%	6.3%	0.0%	2.8%	0.8%	8.7%	6.9%	3.5%	
23-25 weeks	14.3%	20.6%	10.0%	11.4%	13.0%	14.6%	7.8%	2.8%	4.9%	2.6%	12.9%	5.3%	
26-29 weeks	12.5%	38.2%	18.0%	10.0%	14.8%	14.6%	26.0%	14.7%	9.8%	7.8%	12.9%	14.9%	
30-34 weeks	26.8%	5.9%	32.0%	30.0%	22.2%	18.8%	24.7%	22.0%	27.0%	11.3%	18.8%	20.2%	
35 weeks +	21.4%	17.6%	30.0%	40.0%	46.3%	45.8%	41.6%	57.8%	54.1%	65.2%	45.5%	50.9%	
Average Time	29 Weeks 4 days	31 Weeks 5 days	33 Weeks 1 day	34 Weeks 4 days	35 Weeks 4 days	38 Weeks 6 days	35 Weeks 4 days	39 Weeks 0 days	39 Weeks 5 days	40 Weeks 1 days	36 Weeks 6 days	38 Weeks 1 days	
Total number of EHC Plans in Suffolk	6979	6946	6999	7065	7116	7195	7268	7371	7487	7594	7691	7822	
EHC Plans by NCY School Phase													
Preschool (NCY -2 to -1)	44	48	57	71	78	6	7	8	11	13	19	28	
Primary (NCY 0 to 6)	2002	2029	2070	2104	2137	1783	1830	1894	1960	2037	2094	2158	
Secondary (NCY 7 to 11)	2423	2431	2438	2453	2466	2507	2530	2562	2599	2631	2668	2724	
Post 16 (NCY 12+)	2505	2438	2434	2437	2434	2899	2901	2907	2917	2913	2910	2912	

Annual Reviews

% of LA responses to annual review reports within 2 weeks of receipt

Draft amended plans issued within 6 weeks from notification to parents

This data is under review as it is not collecting against the full Annual Reviews. This is being resolved by AD Inclusion, HoS SEND and Intelligence Hub

Commentary

Over £1 million investment to secure private EP capacity and additional EHC plan writing capacity to ensure we can bring the 20 week data back in line with National by the end of 2024 (within month progress will be seen before then).

Embedding the 20 Week Strategy meeting, with weekly Management meeting across SEND Services and EP service to ensure those EHCPs that can be completed in 20 weeks are, ensuring the most efficient use of resource. Revised dashboards (fed by Liquid Logic) have enhanced tracking and management oversight of the issuing of draft EHCPs and Final EHCPs which are beyond the 20 Week timescales, this has contributed to the significant upward trajectory of those issued in recent months

Exclusions (KPI 8)

[Dashboard >](#)

	Previous Years		Current Trends*													Trend
	Aug-22	Aug-23	Sep-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Sep-23	Oct-23		
Number of Permanent Exclusions																
Permanent exclusions (started)	173	205	12	20	18	22	22	25	14	23	26	9	16	21		
Permanent exclusions (upheld)	167	166	11	19	17	17	16	21	12	15	15	0	1	0		
Permanent exclusions (upheld, YTD)	-	-	11	44	61	78	94	115	127	142	157	157	1	1		
Children with an EHCP Permanent exclusion (started)	19	18	5	2	2	2	2	3	0	0	1	0	2	4		
Children with an EHCP (upheld)	18	16	5	2	2	2	1	2	0	0	1	0	0	0		
Children with an EHCP Permanent exclusion (with meeting date, not yet upheld)	-	0	0	0	0	0	0	0	0	0	0	0	1	1		
Children with an SEN Support Permanent exclusion (started)	61	74	4	7	6	9	9	8	7	5	10	3	8	6		
Children with SEN Support (upheld)	59	60	3	7	5	7	7	7	7	5	4	2	1	0		
Children with an SEN Support Permanent exclusion (with meeting date, not yet upheld)	-	0	1	0	0	2	2	0	0	0	5	0	3	3		
Number of Suspensions																
Suspensions	6471	7413	562	918	490	762	737	945	375	692	757	455	335	376		
Suspensions rate (YTD)	-	-	0.6%	2.3%	2.8%	3.6%	4.3%	5.3%	5.7%	6.4%	7.2%	7.7%	0.4%	0.7%		
Suspensions Children with an EHCP	581	489	62	92	53	45	43	48	13	22	34	21	28	46		
Suspensions Children with SEN Support	2438	2798	234	331	167	287	281	382	145	263	306	166	163	162		
Permanent Exclusions (academic YTD rate)																
Children with an EHCP as a % of all children with an EHCP	-	-	0.1%	0.2%	0.3%	0.3%	0.3%	0.4%	0.4%	0.4%	0.4%	0.4%	0.8%	0.8%		
Children with SEN Support as a % all children with SEN Support	-	-	0.0%	0.1%	0.2%	0.2%	0.3%	0.3%	0.4%	0.4%	0.4%	0.4%	0.0%	0.0%		
Suspensions (academic YTD)																
Suspensions Children with an EHCP as a % of all children with an EHCP	-	-	1.6%	5.5%	6.8%	8.0%	9.1%	10.3%	10.6%	11.2%	12.0%	12.6%	0.7%	1.9%		
Suspensions Children with SEN Support as a % of all children with SEN Support	-	-	1.8%	6.6%	7.9%	10.2%	12.4%	15.4%	16.4%	18.4%	20.8%	22.0%	1.3%	2.6%		
Permanent Exclusions By SEN and School Type																
Primary No Sen	11	12	0	2	3	1	0	1	1	0	1	0	0	0		
Primary EHCP	10	8	2	1	1	1	0	1	0	0	1	0	0	0		
Primary SEN Support	19	18	1	1	1	4	1	2	2	2	2	1	0	0		
Secondary No Sen	79	78	3	8	7	7	8	11	4	10	13	3	0	0		
Secondary EHCP	3	5	1	1	0	1	1	1	0	0	0	0	0	0		
Secondary SEN Support	40	41	2	6	4	3	6	5	4	3	2	1	1	0		
Special No Sen	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Special EHCP	4	2	1	0	0	0	0	0	0	0	0	0	0	0		
Special SEN Support	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PRU No Sen	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PRU EHCP	1	1	0	0	1	0	0	0	0	0	0	0	0	0		
PRU SEN Support	0	1	0	0	0	0	0	0	1	0	0	0	0	0		
Suspensions By SEN and School Type																
Suspensions Primary No Sen	511	359	28	53	22	26	24	44	17	47	39	21	12	12		
Suspensions Primary EHCP	203	157	20	22	14	14	8	12	4	13	16	14	8	10		
Suspensions Primary SEN Support	700	777	71	74	45	78	64	105	36	79	89	53	50	47		
Suspensions Secondary No Sen	2936	3671	235	436	245	404	390	471	203	367	381	247	132	156		
Suspensions Secondary EHCP	327	302	33	56	34	30	35	36	9	13	19	10	17	34		
Suspensions Secondary SEN Support	1714	2049	158	247	117	209	217	277	110	189	227	122	113	115		
Suspensions Special No Sen	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Suspensions Special EHCP	20	14	1	5	1	1	0	0	0	1	2	0	3	2		
Suspensions Special SEN Support	1	0	0	0	0	0	0	0	0	0	0	0	0	0		
Suspensions PRU No Sen	4	15	3	6	3	0	0	0	0	0	0	0	0	0		
Suspensions PRU EHCP	31	34	8	9	4	0	0	0	0	0	0	0	0	0		
Suspensions PRU SEN Support	24	35	7	10	5	0	0	0	0	0	0	0	0	0		

Commentary

Increases in permanent exclusion numbers for academic year 2021-22 is the result of data cleansing and improved recording for 2022-23. Suspensions in October saw a mild increase to 0.7% from 0.4%, however, broadly remaining far removed from earlier months May, June, July figures of 6 and 7%. Similarly, there is a slight increase in suspensions for children in secondary with EHCPs, 18 up from Sept 23. Primary only an increase in 2, same category. EDAC collect data of the Education Access Support Meetings and figures mirror this trend with an increase in contact directly for children with EHCPs. There has also been a similar increase with children on SEN support receiving suspensions however when viewed in an annual comparison to 2022 figures there is a large difference in favour of progress this academic year. Data shows September 22 recorded 234 and September 2023, recorded 163. Suspensions of CYP with SEN/EHCPs has seen a small increase of both 1.3% and 1.2%. Suspensions as per the guidance released/updated September 23, is used as a strategy to effectively respond to what's happening around a pupil. This also allows other support to be put in place as well as avoiding the need to permanent exclusion so the data could be viewed in this light. The Education Access Team has seen an increase in communication from schools, primary and secondary for CYP vulnerable to Pex. A review of the first half term, Autumn One (six and a half weeks), the EDAC team held 102 meetings to support children where suspensions were increasing and a possible Pex was looming. The recent Permanent Exclusion data does reflect an increase. In contrast to this figure, since September start, the Team have rescinded 9 Pex with interventions and joint working with schools.

Post 16 Participation (KPI 9)

[Dashboard >](#)

Not in Employment, Education or Training (NEET)*	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Trend
SEND (latest 12 months)	12.67%	12.68%	14.32%	13.60%	14.29%	14.85%	14.44%	14.32%	14.24%	15.05%	8.30%	9.87%	
SEND (Previous 12 months)	11.53%	11.47%	11.48%	11.04%	11.23%	11.07%	12.21%	12.09%	12.47%	12.83%	9.54%	10.64%	
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Trend
Suffolk 23/24	3.98%	3.92%	3.92%	4.03%	4.29%	2.31%	2.91%						
England 23/24	3.07%	3.13%	3.13%	3.25%	-	-	-						
Suffolk 22/23	3.87%	3.84%	3.87%	3.97%	4.39%	2.35%	2.61%	3.34%	3.61%	3.73%	3.89%	4.10%	
England 22/23	2.70%	2.80%	2.80%	2.90%	3.00%	1.75%	2.20%	2.57%	2.73%	2.83%	2.88%	3.00%	

Commentary

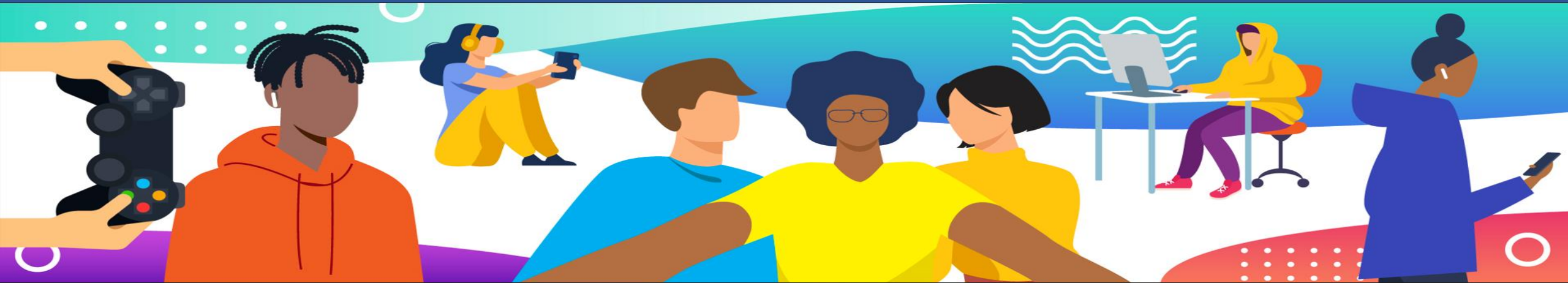
Significant work has been undertaken by Skills & Early help to support CYP including those with an EHCP to access education, employment and training. Additional work is underway to cleanse the data held in capita to ensure we hold an accurate record and support CYP with an EHCP as they transition.

Service users are aware of and use the local offer website	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Trend
Monthly total	1727	1097	1271	1214	970	1160	1280	1229	1258	873	1567	1433	
New user	739	519	598	580	472	335	851	828	860	641	1122	972	
Returning user	988	578	673	634	498	133	420	375	398	232	445	461	

Commentary
 We are aware that webpages and social media stats are generally down. We attribute this to two things: 1) that we have not been doing as much promotion as we have previously been able to, and 2) the website continues to have issues with search, leading to poor feedback from families. We are hindered both by the limitations of the current platform and lack of capacity within the Web & Comms Team and are currently RAG rating several workstreams as Red. The new Local Offer website launched in November -23, and social media will be reviewed as part of the teams forward plan.

SEND Strategy 2024-28

Consultation stage



What we have done to date

- July-23 – September-23 - Co-produced survey with stakeholders from
- September – Created animation to provide consist messaging
- 6 October 23 – Launched SEND Consultation survey

To date we have received;

- **98** Parent / Carer
 - **2** Child / Young Person
 - **44** Members of school or education staff
 - **33** Suffolk County Council Staff
 - **1** ICB Staff
 - **11** Health Care providers
 - **0** Councillors
 - **11** Other
-
- 12 October 23 – SEND Ofsted & Consultation conference with 180 school leaders and staff providing collective responses to the survey.
 - November 23 – agreed to extend Consultation to 9 December due to further requests to attend and join

Promotion and Events

- Drop in events at West Suffolk House & Endeavour House
- Attended Post 16 Team meeting
- Attended Community SENCO Forums
- Attended SEND Day at Family Hub
- Joined drop in session at The Mix in Stowmarket
- Met with ICPS groups
- Met with Homestart
- Met with Autism & ADHD.org
- Met with transforming care
- Met with School Nursing Team
- Met with Transport Team
- Local Offer website
- Suffolk County Council website
- Suffolk Learning
- The Source
- Met with Speech & Language Therapists
- Learning Disability Nurses
- WS Training
- Education Kills & Learning
- Elective Home Education Team
- Occupational Therapy
- Early Years Team
- SCYFP Team meeting
- CFPS Meeting
- ES & LLT
- SPCF Workshops
- Suffolk Headlines, Inside SCC and SENCO Bulletins
- Social Media

SEND Children Outcomes Framework Priority Area

Visited schools

Suffolk Rural
Beccles Primary school
WS College
SET Ixworth
Brookland Primary School

22
6
9
15
8

Still to visit

Little Stars
Exning Primary School
Sir Peter Hall School

I feel supported

I am Happy

I am Safe

I am in Control of my Life

I am healthy

I am able to learn

My Voice is Heard

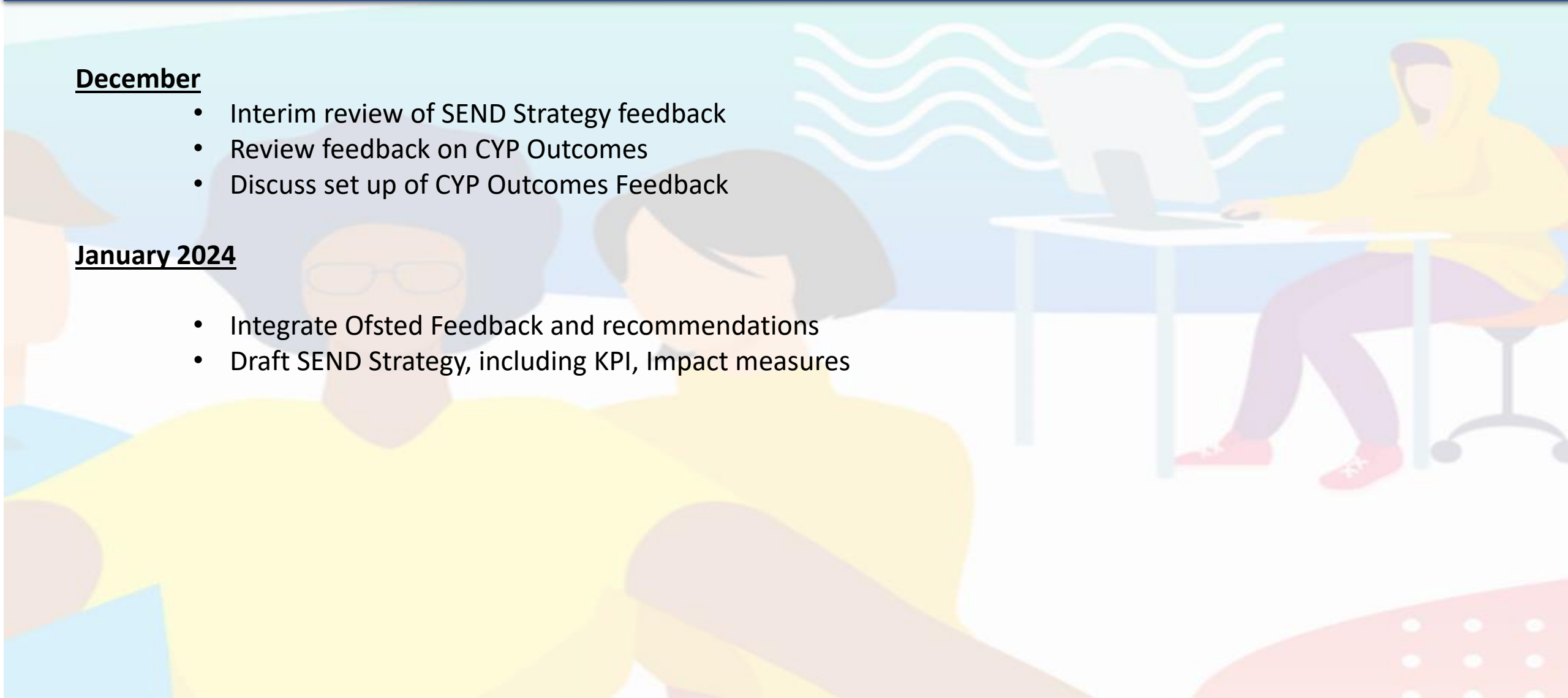
Next Steps

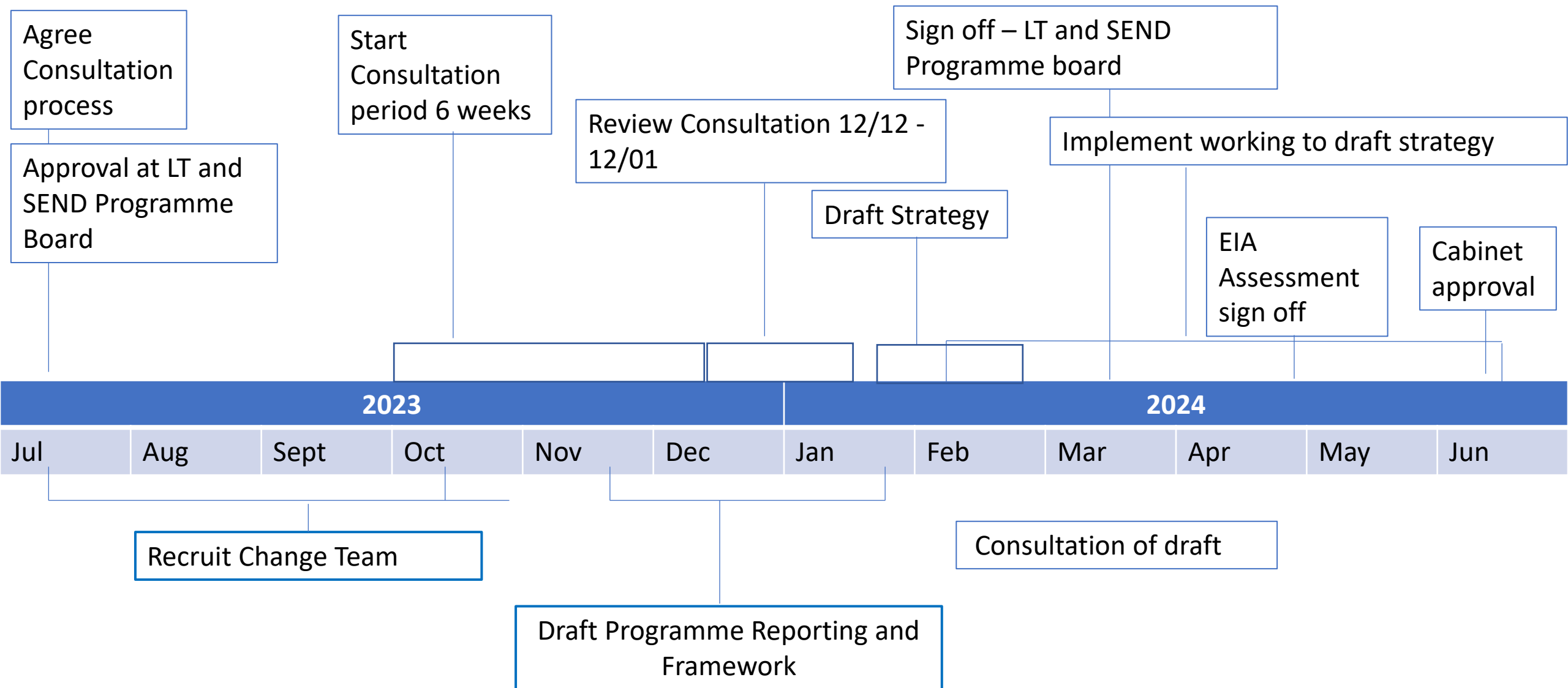
December

- Interim review of SEND Strategy feedback
- Review feedback on CYP Outcomes
- Discuss set up of CYP Outcomes Feedback

January 2024

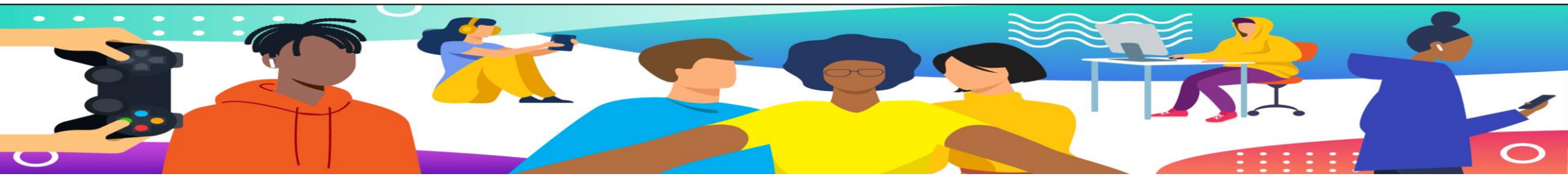
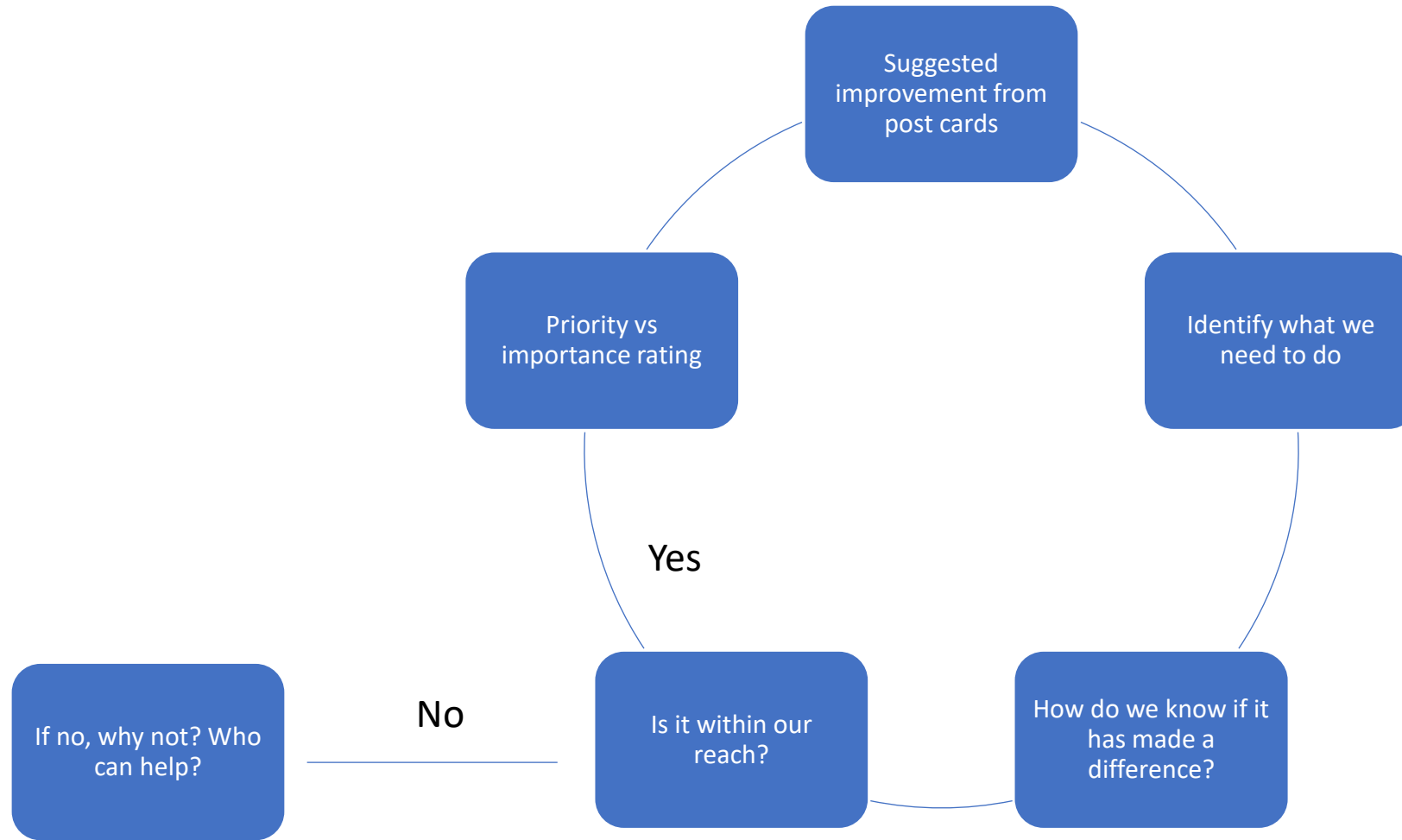
- Integrate Ofsted Feedback and recommendations
- Draft SEND Strategy, including KPI, Impact measures



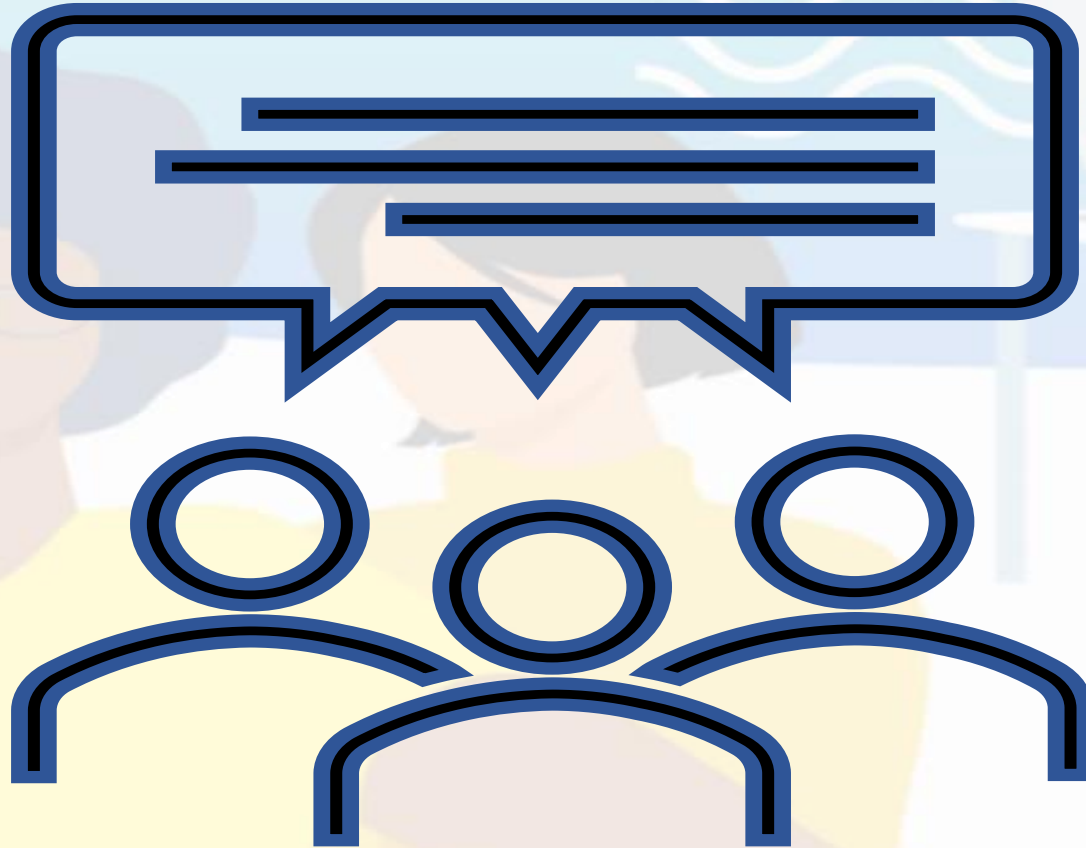


DRAFT High-level Timescale

Consultation Analysis



Any questions or recommendations from the board



MINUTES

Meeting:	SEND Programme Board	
Purpose or Mandate:	To provide strategic oversight and direction for the implementation of the SEND reforms	
Date:	28 September 2023	
Place:	Teams Meeting	
Times:	10:00-13:00	
Members:	<p>Lisa Nobes (LN) (Joint Chair) Ros Somerville (RS) (Joint SRO) Lianne Joyce (LJ) (Joint SRO) Wendy Allen (WA) Lawrence Chapman (LC) Codrutza Oros-Marsh Nicki Howlett (NH) Paul Hill (PH)/Sarah Gibbs (SG) Nicki Cooper (NC) Adrian Orr (AO) - Julia Grainger rep Rebecca Hulme (RH) Nic Smith-Howell (NSH) Garry Joyce (GJ) Sarah Nasmyth-Miller (SNM) Rowena Mackie (RM) Sue Willgoss (SW)</p>	<p>Chief Nursing Officer, East and West ICBs AD, Inclusion (CHW, SCC) Associate Director of Nursing- CYP and MH SEND Programme Manager CEO SENDAT AD Children’s Social Care SENDIASS CFYP Suffolk NSFT Public Health AD, Education, Skills & Learning (CHW, SCC) Great Yarmouth & Waveney ICB AD of Integrated Community Paediatric Svcs AD Children’s Transformation (SCC/ICBs) AD, ACS <i>Head Teacher Northgate School</i> SPCF Chair</p>
Invited to Attend	<p>Izzy Connell (IC), Headteacher SES – Priority Lead Mark Gower (MG), GY&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</p>	
Invited Guests:	<p>Sophie Cooke Project Officer, Harriet Wakling, Head of Intelligence Hub, Lauren Sheldrake (Lead Family Services, (Case Study))</p>	

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

No	Item Description
1.	<p>Welcome & Introductions.</p> <p>Apologies Lisa Nobes, Rebecca Hulme, Izzy Connell, Mark Gower, Kathryn Searle, Fran Alexander, Gemma Ogilvie Burnaby, Hannah Holder, Julia Grainger, Nicola Rice, Michael Hattrell.</p>
2.	<p>Case Study – Due to the absence of the presenter there was no case study available to be reviewed.</p> <p>The case study review report was looked at by the SEND Programme Board to review previous case studies, discuss impact and changes and ways forward with a new case study rota to ensure all services provide case studies with identified learning and improvements.</p> <p>SPCF requested that a case study was tracked through new services to see if the journey would be different.</p> <p>Confirmed this had been looked at, however due to the complexity of changes and ages of CYP, this is not something officers can do at present. It would take significant capacity that is not available across the SEND Partnership.</p> <p>ACTION 252 - NSH requested to provide case study for January 2024, WA will email.</p>
3.	<p>SPCF- Update</p> <p>SPCF are delighted to announce another expert by experience and community engagement officer starting - Robert Ward.</p> <p>Claire Smith has also taken the position of vice chair as of September 2023.</p> <p>SPCF have had it brought to their attention that Education Health and Care Plans have been ceased and the process not followed correctly. SPCF have had conversations with families who have advised that this has happened, and one family is reported to have had to restart the whole process from an EHCNA. They have also been advised that a parent had needed to attend their child's school the whole time as no support had been put in place. They have also received feedback from a parent who has recently had their 3rd amended plan following an EHCNA, with each amendment removing sections that had not been agreed, this should not be happening. Sue Willgoss has raised these issues with Fran.</p> <p>SC – SPCF have shared the points raised and SC raised these at the last meeting. Managers are looking into it with the service and the internal system trainer will be focusing on portal to ensure that is used consistently, it also needs to be identified if it is technical issue or is due to the user not updating verified portal details.</p> <p>SPCF also aware that an EHCNA went through to AU portal.</p> <p>ACTION 253 – SW to share any further details with Sophie Cooke on the portal incident.</p>

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	<p>SPCF continue to have concerns regarding Annual Reviews not being completed. SPCF have continuously raised that this was learning that the council needed to take following the death of Sue Willgoss's son. SPCF request that the local authority take action.</p> <p>SPCF believe that the LA have not sufficiently challenged schools, especially academies who fail to put in place provision as set out in children's EHCP's. SPCF have discussed this with Clare Besley Early Help Manager, who is also clear that change needs to happen. SPCF have been requested to ask other parent carer networks how their Local Authority works with Academies and discuss where this is a strength to enable Suffolk to reflect on other areas of success.</p> <p>SPCF recently met with Jonathan Duff. SPCF were advised to take concerns to Suffolk County Council regarding any academies and for Suffolk to share these with Jonathan.</p> <p>Many parents /carers have to go to Tribunals and LGSCO and this affects the wellbeing of families; many parents are exhausted by fighting. Families are reporting that they are having to give up work as their child does not have a school place, this affects them financially. Also, the recent suicide awareness day and the report evidences the connection between bullying in SEND CYP and suicide. Suicide prevention is everyone's business; education, health & social care must support, and early support is needed.</p> <p>SPCF are aware of a young person who has been turned away from the Alternative Tuition Service as they do not have medical guidance. SCC guidance is not in line with the national guidance, families are having to wait to get medical evidence.</p> <p>ACTION 254 – Ros will follow up regarding the medical illness evidence</p> <p>SPCF are also aware of continued delays in travel training which opens up opportunities for families and especially young people post 16.</p> <p>The Kirkley SEND event had a good turnout.</p> <p>SPCF have provided feedback re NDD referral form, and shared feedback regarding the new case management messaging on the liquid logic portal, where families have not heard back through the portal.</p> <p>SPCF advise that parents are disappointed that Suffolk did not hold/or did not give the figures. SPCF have emailed RS re figures on Part-time timetables and fixed term exclusions.</p> <p>There is an open forum event in Ipswich tomorrow - SPCF have received many apologies and hope that many people will attend as they said they would.</p>

No	Item Description
	<p>SPCF have also commented to Benjamin Britten school who are now advertising for an Inclusion Support TA to work with the Silent Working Manager. This has previously been shared with SCC.</p> <p>SPCF would like to raise: Norfolk – right care and right approach. There was reassurance from Norfolk police on this, and were unaware that education, health & care are on the development of that system – can SPCF be assured on the approach that is being taken in Suffolk? Rebecca Hulme said Police will still attend for mental health support for YP.</p> <p>COM– SCC are involved in the Right Care, Right person and want to offer some reassurance and can update SPCF on this. Suffolk are thinking about YP with difficulties, and there is consultation from Suffolk police who seeking views from agencies. SPCF have been asked to look at qualities and impact statement from Norfolk, not heard anything from Suffolk.</p> <p>ACTION 255 - LJ to update and look into where Suffolk are and for involvement for SPCF</p> <p>SPCF are aware of the NDD Pathway in Cambridge and Peterborough; their approach uses an AI app on early identification of communication difficulties with those that may be autistic. It has been really successful and families are in receipt of autism communication therapy, which has been rolled out across western Australia. These CYP are able to go to mainstream school, and able to communicate, the meeting was recorded so could be shared with colleagues.</p> <p>ACTION 256 – SW to share presentation with GJ and Jamie Mills</p> <p>CYP Mental Health – Tim Clarke is working on ‘worries approach’ where visits have been made to Norfolk schools using CBT approach to support children with worries, and has been successful with an adapted version for NDD. This would be useful to raise awareness in Suffolk as well.</p> <p>ACTION 257 – Request this information is shared with GJ</p> <p>Good News – SPCF met with a family where the EHCP was really good. Since met the family again when the EHCP was finalised - the CYP should have started in September, and was offered an earlier start. Have heard from family that the CYP has gone from not wanting to go into school to thriving – with a good EHCP, the family said it has transformed their lives – SPCF will be sharing this with the LA officer concerned.</p>
4.	<p>SEND Integrated Strategy Evaluation including KPI's & Health Dashboard Health - Update to local offer website re NDD and updated tools. A project manager is in place for help, and multiagency working to bring people together.</p>

No	Item Description
	<p>The impact will be quicker input for families, but families will not see significant changes for 6 months. The contract with voluntary service has been extended and will help reduce waiting times as much as possible and the resource pack will be launched as soon as possible (this update is specific for East & West Suffolk).</p> <p>SPCF raised at the NDD stakeholder meeting that over 18's are being refused and rejected by the ADHD team, as they will not accept whilst they are under secondary care mental health. Spoke to senior people and this was being looked into. SPCF have heard from Waveney & Great Yarmouth teams' commissioning arrangements that they are only a primary care service and cannot assess 18+ who are under mental health services. SPCF believe this is discriminatory; once completed mental health involvement they can come back to ADHD. This is about commissioning arrangements – need to know anyone is entitled to have assessment.</p> <p>ACTION 258 – SG to talk to service that sits within ACS for NDD for 18+</p> <p>ACTION 259 – GJ to update RH for Waveney</p> <p>RS updated that the 20 week data is big stand out issue, a lot of work is being completed although progress is not as far forward as SCC would like. An external company have been commissioned to recruit and Suffolk continue to recruit EP's. There have been 7 new EP's start in September and - SCC have a new cohort of trainees and assistant EP's.</p> <p>The service are looking at trajectory work and there are some assumptions although the service is trying to be realistic of when Suffolk will be at the national level of 55% done. The EP assessment is key pinch point.</p> <p>Over the summer Suffolk have changed the way referrals are made for alternative provision, services in Inclusion have met and discussed this with AP's.</p> <p>Attendance is a concern for mainstream schools and looking at new ways that schools can work differently for those CYP to have improved attendance.</p> <p>The new Local Offer website has been shared with SPCF – who will be providing feedback. The website looks a lot better and is improved in look and functionality. There is further work on content needed.</p> <p>SPCF commented that they have looked at it and searched the word 'suspension' and it was not found, and that it does look better.</p> <p>SPCF – Asked regarding the exclusion's final figures 22/23: are they all of the exclusions or after the ones that have been rescinded.</p> <p>RS – Advised does not include those that had been turned around and overturned.</p>

No	Item Description
5.	<p>Consultation – Approach and timeline Update from WA In July there was discussion about the next phase of the consultation for the new strategy.</p> <p>It was agreed that we would;</p> <ul style="list-style-type: none"> • start as soon as possible re: consultation. • undertake an evaluation of the current SEND Strategy 21-23 • the new strategy should be 5 year • a clear and consistent message is needed for the consultation <p>Actions since July Programme Board have included</p> <ul style="list-style-type: none"> • set up consultation points • undertaken an evaluation framework and feedback from each priority meeting has been completed • an animation has been created to support the consistent message • survey is in draft and will be launched soon <p>The feedback in the priority meetings has highlighted some areas for ongoing focus.</p> <p>Face to face meetings will happen as part of the consultation and the animation will be used to support online engagement and ensure a consistent message is shared.</p> <p>LC offered input to support networks to engage with CEON and the Suffolk Education Partnership.</p> <p>Next steps</p> <p>‘I statements’ have helped form the Childrens Outcomes Framework. Young people will be asked to feedback on the Lego bricks to create a feedback survey for the partnership to focus on the improvements in the 7 keys areas that are linked to the every child matters programme.</p> <p>As part of the evaluation and consultation the SEND programme Board and Terms of Reference will be revisited.</p> <p>Involvement of schools is key and the partnership want sign up from all schools so this is being explored.</p> <p>SEND Programme Board explored the draft survey and provided feedback</p> <p>NSH - indicated that the survey groupings do not necessarily help the participants better understand the meaning of the labels.</p> <p>ACTION 260 - NSH to send some information today to WA re his view of this</p>

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	<p>RS asked if there was a possibility of extending the deadline to support feedback from this group, as feedback is very helpful and the point of it coming to the board.</p> <p>Consultation events diary</p> <p>SPFC event will not have a rep unfortunately, and the survey is not ready, the CYP has been cancelled, the team will look at a future CYP committees to attend.</p> <p>The board were invited to let WA know any other events that the consultation survey can be shared at.</p> <p>LJ suggested that Health might need more representation and WA said that health teams were looking for other options for engagement.</p>
6.	<p>Ofsted & CQC Inspection prep update</p> <p>GB update on Ofsted & CQC.</p> <p>Suffolk do know 15 authorities have had reports published; 5 general good 6 inconsistent 4 widespread systemic failing. Key priority actions – access to health service, risk assessment and support whilst waiting, EHCP, gaps in provision, governance and early identification. Recognise a number of our strengths but share the challenges for improvement is as seen elsewhere.</p> <p>The material that shows our position has been collated, and the inspection should not be distracting from day to day. Suffolk are ready for when the inspection is announced, with a draft presentation to show a balanced view of where Suffolk have made progress and still acknowledge there is a way to go. There has been a lot of positive feedback and the people changing the culture, which needs to be clear in the inspection.</p> <p>GB thanked everyone for their time - if there is more good evidence or challenges that need to be highlighted GB requested that this is shared.</p> <p>ACTION 261 – SPCF have access to the SEF and asked to look at draft presentation and consider if they would like a slide included.</p> <p>An open letter from RS & LJ has been added to give balance to the SEF.</p>
7.	<p>LL EHCP Implementation</p> <p>The LL programme is focusing effort on new portal for Annual Reviews (professional portal), and working with education setting to use it.</p>

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	<p>Disappointingly, following internal testing there were issues with the portal functionality that have come from subsequent upgrades (allocating tasks for and attaching documents). The programme are not willing to go live until these issues are resolved; this should be resolved in the full upgrade and this will need to be fully tested as it will impact other service users. Due to this, the portal will not be ready until February 2024, and due to the added pressure of timescales of phased transfer, the delay has been agreed to April 2024. The additional time will be used to look at more early adopters and how IT wraparound support can be provided. Programme members have recently met with Oxfordshire who are further along and using functionality it is interesting to hear how the Designated Clinical Officers are working in that area.</p> <p>Suffolk are in the process of getting DCO's and their teams access to LL, progressing conversation to access and in the interim looking to allocate SCC laptops, whilst progressing to have Information Governance in place, and have dates to train DCO's and their assistants.</p> <p>The Intelligence Hub are looking to build a Power BI dashboard– to show aggregated data and understand what cases they need to review/what sections of EHC plans are ready to be signed off by health.</p> <p>There was a push in summer months helping to improve Family Services quality of improving data; the focus was on primary need and placement of information. The service worked really hard and continue to ensure this is maintained.</p> <p>SC is moving into the new Inclusion change team, which has created the opportunity to look at the project operationally to see if it is best placed with the change team or somewhere else.</p> <p>No new risks have been identified for the board to be aware of.</p>
8.	<p>School Nursing</p> <p>Alex Watts attended and shared presentation.</p> <p>Please see presentation in papers for further information.</p> <p>Alex Watts (community health space at SCC) - main role was managing key worker function and is now responsible for SEND school nursing and behaviour and disability school nursing team. Alex is new to SEND school nursing and has only been in post a few weeks.</p> <p>Suffolk brought specialist SEND nurses into the space and added to the existing school nurse offer.</p> <p>Healthy child practitioner work is still happening and looks at how there is parity in the offer and not leaving anyone behind. Lowestoft can be left out, and so want to ensure they are covered so no huge or significant vacancies elsewhere.</p> <p>Work has begun into general school nursing offer. Current wait time is 12 weeks wait time, the average is 10 weeks. There has been an influx of referrals whilst CYP are waiting to be seen. Initial patient letter is personal to them, and looks at their circumstances and gives guidance to that, including</p>

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	<p>sign posting to SCC webpage. The Suffolk Local Offer is the SEND offer from Suffolk to give additional information for families. Videos have been produced for the service that have been coproduced with YP.</p> <p>Every referral is rag rated red, amber or green. The service does not have a way of specifically monitoring to differentiate between those that are SEND or universal referrals, and this is being looked at for the future. Rag rating is done at entry point, with weekly discussions with school nursing managers to have a consensus to agree on triage and how they proceed.</p> <p>Criteria for universal school offer; if there is a new or emerging health needs and no other professional involved. Looking at for SEND offer, and taking referrals if there is a reoccurrence of a previous condition.</p> <p>CYP being able to talk about health needs and talk about health support is being highlighted as it should be an offer for everyone. By virtue of having SEND, it should be more targeted.</p> <p>ACTION 262 - Alex to share slides and attend Suffolk Education Partnership and Special school heads meeting</p>
9.	<p>Agree minutes and action log</p> <p>ACTION 263 – Health Sufficiency join up to be followed up by LJ</p>
10.	Forward Plan
11.	Any Other Business
	Next Meeting is scheduled for Monday 27 November 2023, 12pm – 3pm

KEY	
White	Action required
Amber	Outstanding/overdue action
Blue	Completed and closed

SEND PROGRAMME BOARD ACTION LOG						
Action No.	Meeting Date	Action	Owner	Deadline	Progress	Action Status
251	20-Jul-23	Publish a case study rota by November's Programme Board to ensure a wide breadth of case studies.	WA	Sep-23	Case study rota drafted, to be shared.	In progress
252	28-Sep-23	NSH to provide details of future case study	NSH	Nov-23	WA emailed NSH 23/11/2023	In progress
253	28-Sep-23	SW to share details with Sophie Cooke re LL portal EHCNA going through to AU	SW	Nov-23		
254	28-Sep-23	RS to followup regarding evidence for medical illness	RS	Nov-23	Also discussed at SENDAB, RS emailed SPCF to request meeting due to the complexity, meeting held with SPCF, Health and RS on 9/11/23	Completed
255	28-Sep-23	Lianne Joyce to follow up re Suffolk approach on Right Care, Right person and to connect for SPCF involvement	LJ	Nov-23		
256	28-Sep-23	SW to share Cambridge and Peterborough presentation with GJ & Jamie Mills	SW	Nov-23		
257	28-Sep-23	SW to share with GJ the 'worries approach' where Norfolk are visiting schools to use CBT to support children with worries.	SW	Nov-23		
258	28-Sep-23	Sarah Gibbs to talk to ADHD team re YP over 18 being refused and rejected by ADHD team.	SG	Nov-23		
259	28-Sep-23	GJ to speak to Waveney re action 258 as well	GJ	Nov-23		
260	28-Sep-23	NSH to update changes to consultation survey	NSH	Sep-23	Completed and incorporated	Completed
261	28-Sep-23	SPCF to review SEF and look at draft presentation slide	SPCF	Sep-23	Completed	Completed
262	28-Sep-23	Alex to share slides with Suffolk Education Partnership and Special Schools Heads.	AW	Sep-23	Completed	Completed
263	29-Sep-23	LJ to follow up with health colleagues on Health Sufficiency	LJ	Nov-23		

Action No.	Meeting Date	Action	Owner	Deadline	Progress	Action Closed
5	12-Oct-17	Gain understanding of the contracting position of organisations across the partnership to ensure that SEND and Local Offer are effectively embedded across	JM / LN	30/11/2018	Paper to be brought back to Nov 18 P/Board	Completed
23	11-Dec-17	It was agreed to analyse the results alongside the SPCN survey and identify key themes and differences and then what we are going to do in response	HH	23/02/2018	Draft presented to Inspection Visits - will progress and send out - action closed.	completed
25	11-Dec-17	Hannah agreed to share results and publish on the local offer, SPCN site and The Source and via SPCN conference 9th June	HH	23/02/2018	Easy read draft presented to Inspection Visit in April - to finalise and then distribute - action closed.	completed
35	18-Jan-18	Transition Guides being developed. Joint work to be done so a minimum number of guides are created for P4 work	BC / AW	30/05/2018	Draft guide presented to Board in May 2018. Well received. Amendments to be made ready for publication end July 2018. To close	completed
43	23-Feb-18	Feedback on EHC QA process.	BC/TW	30/01/2019	Reschedule to May Board due to YP Networking Workshop. June 2019: Independent Review of Quality and Compliance of EHC Needs Assessment Advice and EHC Plans commissioned. Report available by end of July 2019.	Complete
44	23-Feb-18	Tribunal Process: Plan awareness raising and process development across education health and care for new trial	TW/JCM/BC/MC	31/03/2018	New system now in operation	Completed
45	23-Feb-18	Funding re Assessment Centre Discussion re resource of clinical psychology.	CGC/LN	30/04/2018	agreements now in places with NSFT and community health service	Completed
46	23-Feb-18	Coproduction workshops attendance	AOC/JM/SPCN	17/03/2018	Workshops scheduled and attendees invited	Completed
47	23-Feb-18	Education Sub Group - Inform Ofsted Regional Office	Jwelsh	31/03/2018		Completed
49	23-Feb-18	Messages for Stakeholders	JM / AOC	28/02/2018	Stakeholder communications prepared post Feb Board and distributed.	completed
50	15-Mar-18	Request to not embed documents in the agenda	BB	11/04/2018	Noted for going forward	Completed
51	15-Mar-18	To recruit mainstream school representatives to contribute to the SLCN Work	JM	30/06/2018	2 representatives identified	completed
52	15-Mar-18	AOC to contact NHSE regarding Omission of Norfolk & Wav CCG from ministers letter	AoC	30/04/2018	Email sent to NHSE and DfE - action closed	completed
53	15-Mar-18	MG to arrange for Norfolk & Wav to nominate clinical Lead to work on assessment centre development	MG	15/04/2018	Ongoing - to combine with action 45 - therefore close	completed
54	15-Mar-18	Review position of Comms going forward	JM	30/04/2018	SROs met with JT, plan developed. Programme Manager to assist.	completed
55	15-Mar-18	SROs to do a review of risks at Priority Leads mtg	JM/AoC	30/03/2018	Completed and at this board	Completed
56	15-Mar-18	Move SEND Programme Board to bi-monthly from May	BB	01/05/2018	On agenda - action closed	completed
57	15-Mar-18	GCG to contact NSFT to arrange for a rep to be involved in the Assessment Centre	GCG	30/04/2018	Ongoing - to combine with action 45 - therefore close	completed
58	17-Apr-18	JJ to provide a verbal update on Emotional Wellbeing Hub	JJ	31/05/2018	On agenda under Priority 3 update- action closed	completed

59	17-Apr-18	Communications to be a standing agenda item for May Board	BB	31/05/2018	On agenda - action closed	completed
60	17-Apr-18	Comms Plan include how the Programme Board will engage Children & Young People in SEND developments	JT	30/09/2018	Denise now in place item reschedule for Jan 2019	completed
61	17-Apr-18	Educational lead to be identified for priority 1.	JM	31/05/2018	Education Lead identified. To close	completed
62	17-Apr-18	Risk six to be updated and amended	AoC	31/05/2018	Completed - on agenda - action closed	completed
63	17-Apr-18	Stakeholder messages to be distributed - including updates on Priority one and two	JM/LN	31/05/2018	Completed - updates on websites	completed
64	17-Apr-18	NSH requested Therapy Paper be tabled at next meeting	NSH	31/05/2018	SRO discussed and discussed at Board, needs to be aligned with Sufficiency work. LN to take forward with SB, therefore to close.	completed
65	17-Apr-18	Meetings to be extended by one hour once bi-monthly	BB	31/05/2018	Closed - September and November 2018 meetings extended	completed
66	17-May-18	BB to invite Sara Blake to all Priority Leads and Programme Board meetings	BB	31/05/2018	SB Invited to all meetings - To close	completed
67	17-May-18	AOC to follow up with PB, BC and MG regarding contracting position and updates	AOC	31/05/2018	Ongoing - Emails sent to Leads, waiting for a date for meeting. Same as number 5 - to close and transfer into one action	completed
68	17-May-18	LN to ensure that NSFT and GYWCCG are included in the discussions and identify a CCG Commissioning Lead to attend meetings.	LN	30/06/2018	See response to Number 45 - to close and transfer into one.	completed
69	17-May-18	JM to update new Lead re Assessment Centres, Hannah	JM	30/06/2018	Completed. Action Closed	completed
70	17-May-18	AOC to include updated Comms Plan in June Programme Board agenda	AOC	30/06/2018	On agenda - to close	completed
72	17-May-18	DfE/NHSE letter from Inspection on 17 April 2018 to be circulated to all Board members	BB	31/05/2018	Letter circulated to all Board members - to close	completed
73	17-May-18	Emotional Wellbeing Hub update in June 2018	JJ/SB	30/06/2018	On agenda - to close	completed
74	17-May-18	JJ to request that Emotional Wellbeing Hub records where people learnt about service to assist with communications plan	Steve Bush	nov	270618 - Kathryn Ramsey, Hub Manager to look at how this can be asked and recorded on the Hub system. Update to be provided at July Board. Update in January 2019. The performance framework is under development for the Hub and this will be included. Update- Source of referral not currently recorded for each service users on IAPTUS. Questionnaire for the service to be developed which will include where people learnt about the service as a specific question.	Complete
75	17-May-18	SEND Sufficiency Plan - JM to ensure Steering Group has right representation and timings of meetings suitable to all	JM	30/06/2018	Attendee's of Steering Group sent to all Programme Board attendee's. To close	completed
76	17-May-18	HH to invite Young Ambassadors to Programme Board in November 2018	HH	30/11/2018	Young people invited, on forward plan and HH prepping for event. To close	completed
77	17-May-18	Risk Register amendments: Update Risk 5, 8 and close risk 15	AOC	30/06/2018	All updated - to close	completed

78	17-May-18	NSH to provide updates to Risk Register	NSH	30/06/2018	Email received 14 June 2018 - to close.	completed
79	17-May-18	BC to submit business cases for LD Health Checks	BC	30/06/2018	Business case submitted and circulated to Board - to close	completed
80	17-May-18	BB to circulate the business cases for approval virtually.	BB	30/06/2018	Business case submitted and circulated to Board - to close	completed
81	17-May-18	BC & MG to submit amendments for health for Transition Guide asap.	BC/MG	30/06/2018	Amendments submitted - to close	completed
82	17-May-18	JT to review final draft of Transition Guide	JT	30/06/2018	Completed - Document reviewed by JT	completed
83	17-May-18	Pre-BB to circulate pre-payment presentation to be circulated to all Board members	BB	31/05/2018	Circulated to all P/B members - to close	completed
84	17-May-18	TW to review e-learning and update SPCN	TW	30/06/2018	Email to chase sent on 170618 & 240718. Loretta G needs to disseminate SEND Programme.	completed
85	17-May-18	Revised Comms Plan to go to June 2018 Programme Board	JT	30/06/2018	On agenda - to close	completed
86	17-May-18	GCG/JT to ensure involvement of families/carers in Sufficiency Work	GCG/JT	30/06/2018	Familiy events held - to close.	completed
87	14-Jun-18	To send further communications to schools as a reminder of the recent team structure changes.	JM	31/09/18	Further communications to be sent in Sept 18. - COMPLETE	completed
88	14-Jun-18	To activiely promote the work of SEND for LD week	JT/JM/AH	31/07/2018	Action Closed as unable to progress due to other significnat Comms being released - Transport consultation.	completed
89	14-Jun-18	To distribute L/O flyers in book bags and with SCC key staff	CB	31/07/2018	Completed, to close	completed
90	14-Jun-18	To work with SPCN on Self-assessment day 12 July 2018	AOC	12/07/2018	Discussion ith SPCN post Programme Board. Agenda timings updated. SPCN included in emails from Theme Leads however recognised AL commitments. Names identiifed for 12th July 2018. Communications gone out via Activities Unlimited for other parents/carers to support.	completed
91	14-Jun-18	SENDIASS and SPCN will go out to members to ask what communications families want.	AH/SF	31/07/2018	Ongoing, closing date 31 July 2018, NJ to ask SPCN – COMPLETE	completed
92	14-Jun-18	Identify a lead within SCC CYP Comms to assist with monthly letter	AC	31/07/2018	Completed HS identiifed as lead and attending Board - to close	completed
93	14-Jun-18	Priority Leads to identify monthly comms for staff and families/CYP	Priority Leads	31/07/2018	On agenda for Priority Leads 2 July 2018.	completed
94	14-Jun-18	Complete coproduction feedback and send out questionnaire to all attendee's	AOC	31/07/2018	Completed, questions sent out - total five responses. All comments included in paper	completed
95	14-Jun-18	Discuss and agree way forward for Comms	JM, LN, AOC	31/07/2018	Additional resource sourced - to close	completed
96	17-Jul-18	SPCN to seek feedback from parents re Local Offer info.	AH/JH	10/09/2018	Jo Hammond to follow up	completed
97	17-Jul-18	Neurodevelopmental Pathway - SB to follow up with JJ & LM re ongoing work and task & finish group.	SB	31/07/2018	Programme established to pick up	completed
98	17-Jul-18	Crisis Support - SB & SBH to meet to take forward Crises Plan.	SB/SBH	15/08/2018	Programme established to pick up	completed

99	17-Jul-18	HH to review age ranges of CYP forums to ensure that there are no gaps.	HH	31/07/2018	The YP's network has reduced the lower age, so there is now no gap. This is being taken forward using the funding agreed by the board.	completed
100	17-Jul-18	AOC to update performance data and recirculate.	AOC	31/07/2018	Completed	completed
101	17-Jul-18	NJ to add CiC and EHCPs to future performance reporting.	NJ	31/08/2018	to meet – COMPLETE	completed
102	17-Jul-18	NJ to add SEND KPI's to September agenda.	NJ	31/09/18	COMPLETE	completed
103	17-Jul-18	PB to lead a small working group to harmonise clauses in all contracts. To include DCO's, ACS & Public Health.	PB	31/10/2018	To report back to January 2019, SEND Programme Board	completed
104	17-Jul-18	HS, AOC & NJ to work on Comms and distribution of messages.	HS/NJ	03/08/2018	To report back to January 2019, SEND Programme Board	completed
105	20-Sep-18	Can priority 1 please engage with YP, to understand further. Hannah Holder to action with young people, how do we make info and social media accessible for young people, best to engage	LN	31/11/18	LN to pick up and explore this issue to address	completed
106	20-Sep-18	Can Priority 1 please engage with YP, to understand further. Hannah Holder to action with young people, how we do make information and social media accessible for young people, best to engage.	HH	31/11/18	HH has raised this request with the coordinator of the YP Network so they can follow up with the network. Suzy Tulk to take forward - Claire Besley to chase	completed
107	20-Sep-18	NSH will clarify how health is represented through the new admissions process and how MH is represented	Fiona Whitfield	26/11/2019	conversation needed between helen stanley with NSFT on new process for admission and how, role for NSFT on panel for requests for children to go into specialist provision 14/11/19- meeting held with Helen and Tracy on the 30/10/19, NSFT representation agreed for all SEND meetings. Diary dates being secured with NSFT staff	Completed
108	20-Sep-18	We ensure we support clinicians effectively through tribunal element, could there be training	TG	30/10/2018	Agreed TG should proceed with health training	completed
109	15-Nov-18	NSH will set out the model for SLC going forward	NSH	26/03/2019		completed
110	15-Nov-18	Working on publicity for SENDIASS service and working with young people directly to improve webstie	Debbie	26/03/2019	Allan C to check on progress with Loretta in Stacey's absence	complete
111	15-Nov-18	Arrange EHCP & Support training for Health Professional. JCM to determine training needed for social workers and come back to SEND PB with a bid	Tabitha G Janet C M	26/03/2019	Tabitha has arranged dates for health training tribunals.	completed
112	15-Nov-18	Start to gather evidence in preparation for Ofsted Revisit	JM/LN	18/01/2019	Revisit taken place 21-23 Jan 2019	completed
113	15-Nov-18	Consider how SCC and Health work closer regarding workforce development	Debbie	26/03/2019	Allan C to check progress with Loretta in Stacey's absence	complete
114	31-Jan-19	SB to convene a meeting to resolve health issues re assessment centres in west and east Suffolk areas	Sara B	26/03/2019		completed
115	31-Jan-19	After Ofsted Revisit findings it was agreed to schedule formal items on the forward plan on 4 significant areas. NJ to coordinate with Leads	Jaime H	26/03/2019	Jaime is to rotate key themes from the action plan for forward plan for Priority Lead	completed

116	31-Jan-19	Full refresh on Risk Register which responds to Ofsted revisit	Jaime H	16/07/2019	JH has drafted the risk register refresh and sent to Judith M for comment	completed
117	31-Jan-19	Proposal for remaining funding within SEND Reform Grant for March Board	Nathan J	26/03/2019	Proposal collated. Board Paper presented on 26/3/19	completed
118	31-Jan-19	Hannah S to action recruitment need for the Assessment Centre	Hannah S	26/03/2019		completed
119	31-Jan-19	Amanda Dunn to resubmit Reform Grant for Developing the 18-25 Offer with updates	Amanda D	26/03/2019		completed
121	26-Mar-19	Sara B to lead on developing Health section on Ofsted CQC Revisit response plan	Sara B	16/07/2019	Defer until new appointment	complete
122	26-Mar-19	Judith M will develop action plan and powerPoint presentation for DfE/NHSE in line with Board feedback & circulate final version	Judith M	16/07/2019		completed
123	26-Mar-19	Clare B to co-ordinate a response from early help and communicate to NSFT and SB to coordinate look at how this can be encapsulated within steering group meetings	Clare B	16/07/2019		Complete
124	26-Mar-19	Barbara B to book date and venue in September for SEND Self Evaluation Review Day	Barbara B	14/05/2019	Booked Kesgrave Conference Centre for Friday 4th October	Completed
125	14-May-19	Maria Hough to provide an early report on Multi agency assesement at September Board	Maria H	26/09/2019	Need to add this to November plan	complete
126	14-May-19	Leigh Ramsay to do a demo on the wheel at the next board	Leigh R	16/07/2019	On the agenda for 16th July	completed
127	14-May-19	Leigh Ramsay to send infor on wheel to NSH for him to share	Leigh R	16/07/2019		completed
128	14-May-19	Tracy W to procude key worker report and embed in the priority report for July Board	Tracy W	16/07/2019	Focus has been on EHC Needs Assessments. Online module and evaluation to be undertaken during summer break and best practice guide availabel for Family Services staff from Sept 2019.	complete
129	14-May-19	Nic S-H to circulate the evidence report on OT and sensory integration provision to Board	NSH	16/07/2019	Circulated with board papers	Completed
130	14-May-19	Lisa N to share some of the QA report with AC	Lisa N	16/07/2019		complete
131	14-May-19	Judith M to agree who is taking forward the transitions guide work and update the board	Judith M	26/11/2019	Challenge - not met JM to meet with all PL in this area to push it forward and meet to have this conversation.	Completed
132	14-May-19	All future board to be updated with performance progress against target both quantitiative and qualitiative included in KPI work	Tracy W	Nov		Complete
133	14-May-19	Jaime H to add in the spot feedback captured via frontline practitioners to support performance data	Jaime H	16/07/2019	Added into KPI requirements	completed
134	14-May-19	Jaime H to discuss with Jo Hammond re how we monitor people handed between services and what to expect	Jaime H	16/07/2019	Jaime is working with Jo on this	Complete
135	14-May-19	JH/BB to invite Fiona Whitfield to future boards	Barbara B	29/05/2019		completed

136	14-May-19	Lisa N to pick up with Pat L re NSFT Workforce development sessions and how it is applied to wider workforce	Lisa N	16/07/2019	NSFT to provide a matrix and more information about - SEND training strategy part of mandatory training. Intranet page developed	Complete
137	14-May-19	Lisa N to ensure NSFT external provider look at pathways and access to ensure joined up for ND work and MCP process	Lisa N	16/07/2019		complete
138	14-May-19	Jaime H to work on shortened busines case template for SEND Reform Grant bids	Jaime H	16/07/2019	In progress	Complete
139	14-May-19	Jaime to share overarching plan and send key messages re comms to prompt board to agree	Jaime H	16/07/2019	In progress - part of strategic brief	complete
140	16-Jul-19	OT Provision for MAAP - investment has been agreed and need to move forward to delivery	Lisa N/NSH	26/11/2019	S &L needs have been incorporated - OT provision and mental health role still needs to be agreed. The OT provision will be part of the MAAP and that a review of this should be presented at each board. LL to work with SPCN to map out pathway).	COMPLETED
141	16-Jul-19	Risk Register to be updated before the next board to incorporate action plan changes and any programme changes	Jaime H	26/11/2019	Completed	Completed
142	16-Jul-19	KPI Dashboard update - add in: -Post 16 destination; - backlog fiugres for EHC data; basline data for 16/17; narrative for illegal exlusions; local offer contextual info to show where they have had communication	Jaime H	26/09/2019	Update -	Complete
143	16-Jul-19	Flag with managers regarding better sharing of NEET	Judith M	26/09/2019		Complete
145	16-Jul-19	Training on tribunal package - Tracy W to attend and include SENCO	Anne H	29/09/2019		Complete
146	16-Jul-19	SEND Wheel - Live in August move to full push on Comms plan and a campaigning launch in September with 95% target for provider info by September	Leigh R / Jaime H	26/11/2019	Completed	Completed
147	26-Sep-19	WFD - Loretta to send the WFD strategy/plan to Fiona Whitfield to enable her to understand links and join up	Loretta	26/11/2019	Shared pagetiger link for WFD offer and offered support where needed to take anything forward with NSFT	Completed
148	26-Sep-19	WFD - Jaime and Judith to meet with Loretta to fully understand the WFD offer and and review progress	Judith/Jaime	24/03/2020	Meeting scheduled fr Nov - all information shared with Jaime and need to review offer to plan for next 12 months. Stacey Bell to work with JM, KS ,JH and WFD to agree how quality work feeds into WFD plans moving forward. Meeting needed.	COMPLETED
149	26-Sep-19	Meeting set up to progress and agree the OT provision in the MAAP	Judith	Mid October	Completed	Completed
150	26-Sep-19	Meeting set up to agree the MH provision for the MAAP	Lianne	26/11/2019	Completed	Completed
151	26-Sep-19	Definition and agreement of the role of health at system meeting for SEND and who should be attending	Lisa N	26/11/2019	Completed	Completed

152	26-Sep-19	AC to speak to Public Health about agreed funding that was provided to by CYP for community work - this is relation to the lack of resource being offered for SEND	Allan	26/11/2019	Completed	Completed
153	26-Sep-19	Review of the revisit action plan to ensure all areas are updated and accurate	Judith/Jaime	26/11/2019	Yes and included in the board papers	Completed
154	26-Sep-19	FT and Perm exclusion information and guidance provided to improve knowledge and understanding - share with jaime	Debbie	26/11/2019		Completed
155	26-Sep-19	Transforming care - definition of key worker to be shared with board and how this role fits with YP, SW etc	Lianne	26/11/2019	Circulated with board papers	Completed
156	26-Sep-19	Review SEND reform funding to ensure forecast spend is correct and check that funding is being used	Judith/Jaime	24/03/2020	Held meeting - report to sent to board once completed by JH	COMPLETED
158	26-Nov-19	WM to meet with Anne to review any safeguarding issues that were raised by families in response to the survey.	WM/AH	ASAP	TBC - assuming this has happened due to urgency needed.	Completed
159	26-Nov-19	JM/LN/AH/JH to have meeting before XMAS to understand any initial 'quick wins' that we can move on and also to plan the SEND strategy approach.	Judith M/ Lisa N / Anne H/ Jaime H	24/03/2020	Quick wins to still be a focus but strategy planning approach agreed and process underway - item in agenda to share next steps. meeting required JM to organise	COMPLETED
160	26-Nov-19	JH to draft a joint statement for leaders to go out with the release of the SPCN survey results.	JH	Nov	Completed	completed
161	26-Nov-19	JH to communicate outcomes to those who attended the event. To link the feedback into the strategy planning work and to ensure that a 6 month review 'you said, we have done' communication is planned.	JH	Nov	Completed and sent	completed
162	20-Jan-20	Meeting to be organised to look at survey results in more depth to understand any quick wins and to also ensure the feedback is fed into the development of the new SEND strategy. To include LN, RH, Judith, SPCN and SENDIASS	JM/BB	24/03/2020	Meeting held with AH/C K-L/JM/LN to review and agree next steps on 12/6/20 Follow up actions agreed and work now ongoing	COMPLETED
163	20-Jan-20	Rebecca to share information about the Waveney service offer with AH and the board of how families can access outreach.	RH	24/03/2020		COMPLETED
164	20-Jan-20	NSH to supply all children data for the KPI report going forward. Lianne to support. LN wants to review data to make sure it reflects what is important not just access times.LN to continue working with GJ, RH and SPCN to develop better data sets.	NSH/LN	29/09/2020	LNU working with NSFT to ensure data is provided, ongoing review of KPI data across health	Joined with 157 as all relates to similare issues
165	20-Jan-20	SEND Young People Network. What can we all do to support activity in schools. AC to contact East Suffolk Council to see what support they can offer.	AC	24/03/2020		completed
167	20-Jan-20	JH to look at other groups the YP could present to in SCC and wider – work with Susie Tulk on this.	Jaime H	24/03/2020	on hold due to COVID	Superceded

168	20-Jan-20	SEND Strategy Framework. It was agreed that all messaging would be owned by the board : JM to agree wording and send out next week	JH/JM	24/03/2020		completed
169	02-Jun-20	Review the links with Social Care re joint QA work for EHC needs assessments	SB/WM	21/07/2020	WM – meeting arranged to discuss SC QA issues/data etc. TW,KS to be included.	COMPLETED
170	02-Jun-20	Board identified the need for a more detailed review of Permanent Exclusions	JM	21/07/2020	Scoping of deep-dive underway with HMI secondee supporting	COMPLETED
171	02-Jun-20	Comms needed re pausing the SEND Strategy 2020-2023	JH	21/07/2020	JH to provide a comms piece to reflect early 2021 to relaunch and that transformation and positive change continues without the strategy	COMPLETED
172	21-Jul-20	Lianne N to escalate data provision within NSFT	LNun	29/09/2020		This is covered by 164
173	21-Jul-20	JH and JM to meet with Martin to look at EET data and the reporting system.	JH/JM	29/09/2020		Complete
174	29-Sep-20	TW to bring overview of audit process to Oversight board in October and to next programme board in November.	Tracy W	24/11/2020		Complete
175	29-Sep-20	JH to update risk register and report at future meeting.	JM	26/01/2021		Complete
176	29-Sep-20	The board supported the need to investigate the current gap in mental health support in schools. LN and JM to set up a meeting to discuss how this can be taken forward.	LN/JM	24/11/2020	Meeting held and Gap understood. 2nd lockdown has impacted progress. Needs exacerbated by pressure on EWB Hub.	Superseded by MH Transformation
177	29-Sep-20	JH to ensure a full outline of the virtual self-assessment process and virtual co-production of the strategy will be circulated via email to the board to ensure we can meet the deadlines.	JH	24/11/2020	This action is underway	Complete
178	29-Sep-20	AC asked for private diagnosis of ASD/ADHD to be picked up outside of the meeting to be moved forward/discussed further.	LNun, GJ, SG, NSH, SPCN	24/11/2020	Meeting in the diary to discuss the CCG view on private diagnosis, SPCN are part of this meeting. This outcome will then be progressed for sign off through the relevant governance processes. The action is closed but will be added to the forward plan for the new year	Complete
179	29-Sep-20	Understand existing systems and IT that can support more joined up reporting etc to support data sharing. Work already underway to look at health systems - visibility of this work to be shared with the board and how we can link any new/changes to systems together.	SG/LNun	31/03/2021	Proposed data set to be produced. To come to next Programme Board Meeting.	To Close. This action to be absorbed in ongoing work to refresh the Outcomes Framework
180	24-Nov-20	NH to link in with AO and SPCN to discuss feedback from families linked to specific schools/provision. To triangulate all evidence we have across Schools/Parents/SENDIASS	Nicki Howlett	26/01/2021	NH has linked with AO and is sharing monthly & annual reports. Plans to explore an online feedback form for families about services across education, health and care	Completed

181	24-Nov-20	AO, JH and MB to look at some alternative measures that could be included in reporting KPIs moving forward.	Adrian O/ Jaime H/ Mark B	31/03/2021	Meeting in Jan to discuss	To Close. This action to be absorbed in on-going work to refresh the Outcomes Framework
182	24-Nov-20	JH to consider how a measure/data to demonstrate timings of an annual review final plan could be included in the development of the KPIs	TW	26/01/2021	Tracy W would need to confirm how this could happen with EMS with Martin Hole. This work has been absorbed in the Outcomes Framework refresh	Superseded
183	24-Nov-20	AC to write to all Heads/CEX to reiterate the need for inclusivity and the worrying rise of PEXs. JM to draft comms for AC	Allan C/ Judith M	26/01/2021	To do once all children are back in school 8/03 and PEX Deep Dive report has been to Programme Board - Jul-21 AC & RS to review	PEX report presented to 25/03 Programme Board
184	24-Nov-20	ACTION JH to share the Strategy Plan timetable with all.	Jaime H	26/01/2021		Complete
185	26-Jan-21	AH asked if the programme report could have a summary update on specific actions for each priority areas that could be shared with parents and carers to demonstrate progress. JM agreed that as part of the governance review this could be included.	JM / Graham B	31/03/2021	JM has convened a meeting on governance and another on communications to pick up these issues	Completed - included in governance proposals
186	26-Jan-21	TM asked how he could understand more about the options for him as a school head when faced with potential PEX. TM has some ideas as new to Suffolk	JM		meeting between JM/TM to discuss moving forward	Completed
187	26-Jan-21	PH to share link to website re MH support for families with SPCN and JH	PH		PH in touch with SPCN	completed
188	26-Jan-21	JM/GM/AH to meet to agree comms for parents/carers on how funding works (Context: Practitioners are aware of cost but not driven by cost in providing what is right for a child, but are seeking best value from providers. Cllr Evans pressing for more equitable funding via F40 group.)	JM/GM/AH	25/03/2021	JM has booked comms meeting with SPCN	completed
189	26-Jan-21	JM to set up 1 meeting only task and finish group to review the governance of the SEND Strategy	JM	25/03/2021	Meeting set up for 4 March 2021	Completed
191	26-Jan-21	Services to be reminded to have conversations with families when there is, for example, a delay to assessment because of C-19 (and how to access self help) and that SENDIASS can help	NH TW	25/03/2021	SENDIASS as an appropriate source to signpost families towards highlighted at Programme Board. Letter has been drafted to referrers about possible delays in being contacted by the EWB Hub. ADHD Team have agreed to communicate with families as to expected delays in response times	Completed

192	26-Jan-21	All to push comms to encourage contributions on 4 week Strategy consultation. "professionals" to be replaced by "practitioners" Requested that there was a specific mention of communicating with education in priority 1: In the move from primary to secondary for those without an EHCP with SEN – no information should be lost and this should be standardised as a process.	JH / GrahamB	26/03/2021	Strategy Consultation concluded. Draft changes being made to Strategy	completed
194	28-May-21	WA to make amendments to case study to reflect Board comments, pass on the Board Thanks to Young People	WA	30/06/2021	Completed and closed	completed
195	28-May-21	WA & HH to look at a transitions case study	WA & HH	27/07/2021	Included in July agenda	completed
196	28-May-21	TW to provide Nic SH an update on SEP	TW	03/06/2021	Completed	completed
197	28-May-21	SEP - Draft comms to provide transparency of where the process went wrong.	TW	30/06/2021	Jul-21 update to be included in the launch and following SEP Review & SEND Independent Review	completed
200	28-May-21	SPCN responses draft response to be shared with AO	GB		Completed July 2021	completed
205	27-Jul-21	Time to listen events	WA	Oct-21	To be discussed in September PB, dates agreed and communicated 11/11/21, feedback to be gathered via SPCF after events	Completed
206	28-Sep-21	SEND Risk Register to be reviewed with Health	GJ, LN, RH, MG and KS	Nov-21	Meeting arranged for 12/11/21 - In progress 25/11	Completed
208	28-Sep-21	I statement responses to YPN	WA	Nov-21	Added to Priority Meetings	Completed
210	28-Sep-21	Programme Board update for AC weekly message	WA	Sep-21	Sent 30/09/2021	Completed
193	25-Mar-21	C&I school in Ipswich not progressing as quickly as anticipated. Brian G to make some enquires after Judith has an up-to-date response from Joy Stodart and advice on what challenges are ongoing.	Brian G/Judith M	28/05/2021	Remains behind schedule, due to hand over 22/12/2022. Meeting due between Paradigm and Inclusion to discuss contingency - Opening would not be delayed until Sept 2023, but if build delays any further this may happen. Update still going through planning process, Murrayside has been identified as a contingency to provide placements	Completed
198	28-May-21	SEP - New process to be drafted to include key dates to allow for placement panels to take place. Cut off dates to be communicated.	TW	01/09/2021	Planned for August 2021, SEP has moved to area based, terms of reference and Scheme of delegation will be ready for January 2022	Completed
199	28-May-21	Nic SH to contact AC regarding Estates and strategic leads operating in isolation	NSH		Jul-21 - AC & NSH to discuss at DMT, meeting arranged for Oct-21. NSH to follow up	Completed
201	27-Jul-21	Case Study - NSH to check health support is available for 'Susie'	NSH		NSH to liaise with SNS linked to 202, Jan-22 support updated as being provided.	Completed
202	27-Jul-21	Case Study - NSH to lead in depth review with SNM re case study	NSH/SNM		As above, due to capacity move to complete	Completed
211	25/11/2021	Add Suicide Prevention to future agenda	WA	Mar-21	Added to Forward plan for March 2021	Completed
214	25/11/2021	YPN Presentation to be shared	WA	Dec-21		Completed

213	25-Nov-21	NSH to link in Suicide Prevention report to NDD pathway	NSH	Mar-22	Barnardoes were aware, 2 initial triage panel discussion, part been regarding risk assessment. Barnardoes mindful of routes for support, there are some interesting things to capture around CYP with communication problems, Further inteagency pathways to be reviewed	Completed
216	25-Nov-21	NSH/LN & GJ to discuss with Amy Long regarding working with Impower on the Case Study review	NSH, GJ & LN	Dec-21	Multiagency attendance at Case studies, Health colleagues attended Jan-22 date	Completed
220	24-Jan-22	WA to complete Communication plan actions	WA	Mar-22	Completed, YP section added, AC weekly message updated and open letter shared.	Completed
212	25-Nov-21	L Nunn and R Hulme to discuss linking together regarding commissioning for bereavement support	LJoyce & R Hulme	Mar-22	Amendment R Hulme & L Joyce re Suffolk Wide approach, connect PH - Chris Pyburn. LJ to follow up May-22 Linked with Public health, work is progressing through CYP Suicide prevention plan. Cindy Dunklin leads on Child Death Review	Completed
219	24-Jan-22	WA to widen communication of the Integrated Plan	WA	Feb-22	Easy read version has been delayed due to capacity, work will restart Aril 2022. Communication has been strengthened across partnership meetings, with attendance at team meetings across CYP. Update re work with IMPOWER and Kate Dodd, request to close action as now part of on going comms plan.	Completed
222	31-Mar-22	LJ to meet with SPCF & YPN rep to see if the Family Friendly Test can be used for YP.	LJ/TW/JI	Jul-22	Progressed with Ben Richardson governance lead for CHRIS team	Completed
223	31-Mar-22	regarding email address on Local Offer to request EHC N	WA	May-22	PCF agreed interim change whilst process for er	Completed
224	31-Mar-22	WA to email for feedback on KPI's	WA	Apr-22	Email sent 201/04, reminder sent 29/04, KPI working group meeting arranged 5 May 2022	Completed
225	31-Mar-22	WA to request updates to LO Website are shared with SPCF to communicate widely	WA	Apr-22	Request sent to Leigh Ramsey 29/04/2022	Completed
226	31-Mar-22	Request for green paper to be sent to Programme Board	WA	Apr-22	Sent 31/03/2022	Completed
221	31-Mar-22	NH to email Paul Hill re case mentioned on not receiving help after self-harming (once permission has been sought).	NH/PH	May-22	Update due at PB May, WA to chase/ 24/06 Emailed NH & PH	Completed
227	31-Mar-22	SPCF to follow up with Rebecca Hulme re Waveney equivalent for the NDD Pathway	WA	May-22		Completed
229	27-May-22	WA to assist in promoting SPCF Open event	WA	Jul-22	Attendance included RS, Fal, KS, JH, LJ, GJ AND AU	Completed
230	27-May-22	Harriet to discuss with Julia Grainger, Nic Smith Howell, Lianne Joyce and Hannah Holder on representation for LL group	HW	Jul-22	Working groups now involve volunteered members	Completed
231	27-May-22	GJ to feedback to Tricordant that the priorities need to be coprodced with SEND stakeholders, and should not create anything out of the SEND Programme Board	GJ	Jun-22	RS, LJ and WA completed template transferring SEND Programme and adding development of work including I Statements	Completed

166	20-Jan-20	All board members to visit schools across Suffolk to see the YP in their own environment. Please ask Susie Tulk to help co-ordinate.	All	24/03/2020	on hold due to COVID, Jul-21 - consider from September 2021. Now reported in SPB report	Completed
203	27-Jul-21	KPI1 - AC & NH to discuss PC survey and possible include Healthwatch survey	AC/NH	Sep-22	28/09 NH to arrange meeting. NH to discuss with SPCF to develop, KPI review to start April-22	Completed
207	28-Sep-21	Paul Hill to Contact KS regarding Health Outcomes	PH & KS	Sep-22	Follow up in January 22. KPI Review to start April-22. Draft to be shared at SPB November-22. Completed in th eimprovements to SEND PB	Completed
209	28-Sep-21	SEND Report & Integrated plan will be produced in Easy Read	WA & JI	Dec-21	WA to contact Nicola Warwick, Initial discussions with IMPOWER Work to commence Feb-22. Work is underway with SCC Comms team. Slight delay due to capacity and vacancy for SCC Communication officer in LO team. Work will recommence Apr-22. Consider if this is still necessary, due to vacancy and capacity in comm sthis has not been progressed. May -22 AC to discuss with Comms 'Easy Read' support available. Passed on to CF to explore easy read guidance and training. Easy read trainign and licenses have been agreed and work wil start once training has been completed. CF has already made contact with SPCF to look at some options 22/09/22. Family friendly version published October-22	Completed
215	25-Nov-21	Board members to follow up pledges to YPN (See minutes for detail)	All	Dec-22	Update needed, on agenda for May-22. Update provided next update December 22. YPN report is being finalised which include details of this, slight delay due to IT issues that are being resolved 22/09/2022. Now in bi-monthly board report	Completed
217	24-Jan-22	Session for colleagues across, Health, Educaton & Social Care to map case study Amy to new model pathways and review differences	WA, LN, KS, HH, SB	May-22	28/04/ - WA Emailed colleagues to arrange a session. 25/05 Chased coleagues. KS & WA drafted 30/12, Follow up meeting 18/01- Presented to Board 26/01/23	Completed
218	24-Jan-22	AC & LN to discuss how Health join up with SEND Accountability Board	AC & L Nobes	Mar-22	Update due at PB May. AC to discuss with Lisa Nobes how health are represented at SENDAB. Discussed 21/07 to discuss and link in re ICB Governance. Jessica Fleming is rep on SENDAB.	Completed
228	27-May-22	WA to contact Sue Willgoss regarding case study permission	WA	44743	Requested 24/06/22. Case continues so is not appropriate for SEND PB as yet.	Completed
232	27-May-22	RS to discuss with FA re mediation contract as some parents are being told there is no availability	RS	Jul-22	Discussed with FAI, further discussion are underway. Continue to onitor as we understand issues were resolved	Completed

233	21-Jul-22	NSH & IC to review case study to new pathways to see what difference could have been	IC & NSH	Sep-22	Initially meeting has taken place, changes to processes have already identified how new panel process would have assisted YP journey. Follow up to discuss other areas will be updated to PB in November 2022. Update to be shared at Jan-23 SEND Programme Board	Completed
234	29-Sep-22	Clare Besley to share details re Inclusion Week for AC weekly meeting	CB & AC	Sep-22	AC included in weekly message	Completed
235	29-Sep-22	AC to discuss with Suffolk Learning & Development how SEND level 1 training can be mandatory for all staff working with CYP in SCC.	AC	Nov-22	AC has discussed with Loretta Greenacre to progress	Completed
236	29-Sep-22	AC – to consider how/ SPB should be informed of serious incidents such as the recent double homicide.	AC	Nov-22	AC will inform SPB as required	Completed
237	29-Nov-22	Requested that the case study review is completed and brought back to SEND Programme Board in January-23	KS	Jan-23	KS & WA drafted review, joined up with Health providers and social care	Completed
239	29-Nov-22	SPCF to seek permission and share details of concerns raised of YP admission in the Waveney area	SW	Jan-23	SW has shared with RH, RH is looking into this.	Completed
238	29-Nov-22	Case studies working group will occur prior to programme Board to include joined up learning for the system	WA	Mar-23	WA arrange multiagency meetings for March & May Programme Board. Delay for March this will happen from May-23	Completed
204	27-Jul-21	KPI's to be reviewed alongside work with KS,SB & following outcome from the SEND Independent Review	SB/KS/GB	Sep-22	Outcomes meeting scheduled for 16/02/22. KPI review to start April-22, draft to be shared at SPB November -22. Health Dashboard has been completed. KPI's will be refreshed as part of the refreshed strategy	Completed
242	26-Jan-23	AC to share in CYP Message to ask people to complete SPCF survey	AC	Mar-23	Sent out	Completed
240	26-Jan-23	Paul Hill to contact Izzy Connell to see how SES & Mental Health workers in schools can link up. Update to be provided to SPB on how this model of linking up will happen.	PH & IC	Jan-24	IC contacted MHST and NSFT and there is constructive planning for the locality model to support joint working with all schools.	Completed
241	26-Jan-23	KS & RS to further discuss what was it that 'Amy' wanted to happen that was agreed in her plan that did not? And why not	KS & RS	Mar-23	KS & RS met,	Completed
243	26-Jan-23	Paul Hill & Ros Somerville to start conversation and bring group together with Matthew Cooke regarding Section 19, Social Care to be included.	RS	Mar-23	Stuart Barrett is leading on this and initially meetings are being arranged. S19 has been revamped and worked in partnership with health & social care. This is still being developed Add to forward plan for January-24	Completed
244	30-Mar-23	Jack Walker to meet with Sue Willgoss and SPCF to discuss health specific questions from the survey results.	JW	Jul-23	2 Meetings have occurred with health and 2 Priority Leads meeting have been held to review the full survey. Action plan and response is being drafted and will be shared at Jul-23 board	Completed

245	30-Mar-23	RS and MG to investigate whether Liquidlogic would be beneficial to develop a risk register around emphasising the strength of the Graduated Response.	RS	May-23	RS & Health colleagues have met to discuss LL, work is ongoing	Completed
246	25-May-23	Subgroup will meet to discuss next steps to ensure a system-wide approach can be adopted to learn from this case study. Link up with safeguarding partnership. RS, FA, HH, JW, COM, NSH, KS	RS	May-23	Subgroup met and discussed the actions relating to CYPS, and progress is being made. Tracey leading on keeping the actions in check and following up with individuals. Identified action for Health to map out transitions points in health, to review. Ensure monitoring within P4.	Completed
247	25-May-23	A working group to be set up to discuss parental involvement and concerns within the AR process on Liquidlogic with SPCF representation.	SC	May-23	Meetings arranged for HW and SC to meet with SPCF and SENDIASS to discuss the AR process and form.	Completed
248	25-May-23	The YP in attendance produced a list of questions which they would like answers to. SB to distribute and gather responses.	SB	Sep-23	Stuart Barret has drafted answers to the YP questions and shared these with managers for feedback.	Completed
249	20-Jul-23	FW to investigate whether these workshops are still offered and delivered. An update to be shared with SPCF.	FW	Sep-23	Fiona shared detailed prior to the end of meeting to share workshop that I still offered	Completed
250	20-Jul-23	The Board to review the Liquidlogic risk log and provide feedback and suggestions of changes.	SC/HW	Sep-23	Risk log to be revisited at SEND Board in November	Completed

SEND Programme Board Forward Plan (Nov 2023)

Meeting Title	Meeting Date/time	Meeting Room	Deadline for Papers	Proposed Agenda Items	Responsible Officers
SEND Programme Board	28 November 2023 10-1pm			Action Log Minutes Case Study Integrated SEND Strategy KPI & Health Dashboard SPCF Update LL EHCP implementation Update SEND Independent Review Communications Focus – DfE Revisit Ace Presentation – peer educators All age Autism Strategy	Joseph Dunton
	25 January 2024 10am-1pm			Action Log Minutes Case Study Integrated SEND Strategy KPI & Health Dashboard SPCF Update LL EHCP implementation Update Focus – SEND Strategy review	
	28 March 2024 1pm – 4pm			Action Log Minutes Case Study Integrated SEND Strategy KPI & Health Dashboard SPCF Update	

SEND Programme Board Forward Plan (Nov 2023)

Meeting Title	Meeting Date/time	Meeting Room	Deadline for Papers	Proposed Agenda Items	Responsible Officers
				LL EHCP implementation Update Focus – Attendance/Section 19 NDD Update	
	23 May 2024 10am – 1pm			Action Log Minutes Case Study Integrated SEND Strategy KPI & Health Dashboard SPCF Update LL EHCP implementation Update Focus – Locality Update from SES, PTS & Health	