

Children, Young People and Family Support Scrutiny and Policy Development
Committee

Meeting held 3 February 2020

PRESENT: Councillors Mick Rooney (Chair), Mike Levery (Deputy Chair), Mike Chaplin, Julie Grocutt, Francyne Johnson, Alan Law, Joe Otten, Kevin Oxley, Colin Ross, Jim Steinke, Alison Teal, Sophie Wilson and Cliff Woodcraft

Non-Council Members in attendance:-

Alison Warner (School Governor Representative - Non-Council Non-Voting Member)

Sam Evans (Diocese Representative - Non-Council Voting Member)

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1. APOLOGIES FOR ABSENCE

1.1 Apologies for absence were received from Peter Naldrett (Parent Governor Representative – Non-Council Voting Member) and Alice Riddell (HealthWatch Sheffield, Observer).

2. EXCLUSION OF PUBLIC AND PRESS

2.1 No items were identified where resolutions may be moved to exclude the public and press.

3. DECLARATIONS OF INTEREST

3.1 In relation to Agenda Item 7 (Sheffield Inclusion Strategy 2020-25 and Special Educational Needs and Disabilities), the following declarations of interest were made:-

(a) Councillor Julie Grocutt declared a personal interest as members of her family (i) were in receipt of Special Educational Needs and Disabilities (SEND) services and (ii) worked for the Multi-Agency Support Team (MAST); and

(b) Councillor Cliff Woodcraft declared a personal interest as a member of the same church as Tim Armstrong (Head of Special Educational Needs).

4. MINUTES OF PREVIOUS MEETINGS

4.1 2nd December 2019

4.1.1 The minutes of the meeting of the Committee held on 2nd December 2019, were approved as a correct record and, arising therefrom:-

- (a) the Chair stated that, given the time that had elapsed, there was no longer a need to pursue the information which had been requested at the Committee's meeting held on 16th September 2019, and further at its meeting on 14th October 2019, relating to:-
 - (i) information following the receipt of the Ofsted report of the inspection of Sheffield's Social Care Services – July 2019, namely (A) details of the statutory timescale for conducting a missing child interview and the Council's performance against it and (B) statistics of the number of children in care who access and complete higher education courses; and
 - (ii) Elective Home Education, namely (A) what percentage of home educated children are receiving suitable or unsuitable education, (B) what length of time, on average, are children home educated and (C) what systems can be put in place to measure performance of home educated children; and
- (b) the Policy and Improvement Officer reported that she would (i) check whether the information requested on the new Domestic and Sexual Abuse Strategy for Sheffield, which she had received from colleagues, had been circulated to Members and (ii) chase up the information requested from the Chief Executive Officer, Sheffield Futures, regarding the data on those 'Hot Spot' areas in the City in which criminal activity had taken place.

4.2 17th December 2019 (Special)

- 4.2.1 The minutes of the special meeting of the Committee held on 17th December 2019, were approved as a correct record, subject to the amendment of Item 1 – Apologies for Absence, by the addition of Councillor Alison Teal and, arising therefrom, in relation to Item 5 – Make Your Mark 2019 Results, the Chair reported that (a) he had yet to write to schools to encourage them to participate in future Make Your Mark consultation, or write to the Cabinet Member about young people's priority of a curriculum for life, and would make arrangements to do this shortly, (b) he had contacted the relevant Cabinet Member in connection with the request for the Youth Cabinet to have at least one place on the Citizens' Assembly for Climate Change and (c) he had contacted the Leader of the Council in connection with the request that City Council Cabinet Members address a meeting of the Youth Cabinet.

5. PUBLIC QUESTIONS AND PETITIONS

- 5.1 Members of the public raised questions as follows:-

5.2 Tony Tigwell

- 5.2.1 We have recently attended our son's Education, Health and Care Plan review. It was an extremely negative experience. How does the Council quality assure these reviews?

5.2.2 Tim Armstrong (Head of Special Educational Needs) stated that there were approximately 3,400 young people in the City with Education, Health and Care Plans (EHCP) and that, under the Code of Practice, powers in terms of the responsibility to arrange and hold such reviews was delegated to schools and other education providers. The Council was aware that there was a need for improved training with regard to quality assurance linked to such reviews, and officers were working on this at the moment, particularly looking at the provision of training programmes in schools. The Authority was also mindful that certain schools and education providers were better at providing high quality reviews than others. It had been identified that training for Special Educational Needs Co-ordinators (SENCOs) was needed, together with much tighter monitoring by the Special Educational Needs and Disability Statutory Assessment and Review Service (SENDSARS) in order to try and ensure that annual reviews were of the highest quality. In addition, with effect from January 2020, ten reviews were being audited on an individual basis each month, with representatives from Education, Health and Care involved in such audits. It was acknowledged that not listening to a young person's voice during such reviews was not acceptable.

5.3 Jane Edwards

5.3.1 (a) In the statement of action, dated April 2019, Section 7.2.2, it was stated that an offer that outlines a variety of options for post-16 year olds giving outcome-led choices 5 days a week by June 2020. No one at our son's review was aware of this. Can you update us please.

(b) Much is promised in the Inclusion Strategy. We need rapid change as the Council is failing families now. What assurances can you give to those families on the 'burning bridge' (a term used by a Council consultant)?

5.3.2 Tim Armstrong (Head of Special Educational Needs) stated that the Authority was working to develop the offer in terms of options for post-16 year olds, although progress on this was not as good as was hoped. Regardless of this, there was still a range of services currently on offer. The Authority was aware that currently, there were not clear enough pathways. There were clear plans to address the issue regarding the pathways as part of the work to be undertaken on the Strategy. It was accepted that there could be a perception that the Authority was making an offer that was not possible to deliver, with similar concerns being expressed by a number of families, as well as concerns being raised at meetings of the Inclusion Improvement Board. Delivery was a major issue for the Authority, and there was a need for adjustments in its budget allocation in order to meet demand.

5.3.3 In response to queries raised by Members of the Committee, it was reported that it was the Council's responsibility to ensure that all EHCP reviews were undertaken and monitored, with the responsibility for the delivery of such reviews being delegated to schools and other education providers under the Code of Practice. Whilst schools and other education providers led on the reviews, the Council had an oversight. If parents were not happy with any element of the reviews, they had a right of appeal. The parents would also receive a questionnaire for them to complete in order to provide feedback on their reviews. The Annual Review

meeting was only one part of the process, and it was important to ensure that the young person's needs were being met and, as part of the ongoing work to address this, the need for training for schools had been identified.

5.4 Julie Grafron

5.4.1 Can we start improvements to the service with clear, honest communications. I have recently received a letter from the SENDSARS (which was actually addressed to our daughter, and not us), and which was written in a very challenging and combative manner. We therefore ask that managers change the quality and tone of the information contained in letters sent to parents.

5.4.2 Tim Armstrong stated that it was accepted that the contents of such letters needed addressing, but stressed that some of the wording in them was required by law. Work would continue at looking at how the content, and manner in how such letters were written, could be improved.

5.5 RESOLVED: That the Committee requests that the Head of Special Educational Needs meets with the parents who had raised the questions to discuss their respective concerns.

6. SHEFFIELD INCLUSION STRATEGY 2020-25 AND SPECIAL EDUCATIONAL NEEDS AND DISABILITIES

6.1 The Committee received a joint report of the Director of Commissioning, Inclusion and Learning, Sheffield City Council, and the Director of Commissioning and Performance and Deputy Accountable Officer, Sheffield Clinical Commissioning Group (CCG), providing an update on the development of the Sheffield Inclusion Strategy in response to the local area Special Educational Needs and Disabilities (SEND) inspection, including the development of joint commissioning intentions. Attached to the report was the consultation document on the commitments where, following initial consultation feedback which identified that some of the language used in the consultation document was not clear, the five commitments in the consultation had been rewritten, together with the main Sheffield Inclusion Strategy 2020-25 consultation document. In addition, an updated draft of the Sheffield Inclusion Strategy 2020-25 was circulated at the meeting.

6.2 In attendance for this item were Tim Armstrong (Head of Special Educational Needs), Sapphire Johnson (Head of Commissioning – Children, Young People and Maternity, Sheffield CCG), Joel Hardwick (Head of Commissioning – Inclusion and Schools) and Councillor Abtisam Mohamed (Cabinet Member for Education and Schools).

6.3 Tim Armstrong introduced the report, indicating that he welcomed the excellent co-production of the Strategy, which had involved the Parent Carer Forum, the Sheffield CCG and the Authority meeting on a weekly basis. He referred to the consultation on the draft Strategy which had been extended due to the General Election and, as part of which, 160 online responses had been received. Feedback had also been sought from focus groups, partner organisations, including those in

the voluntary sector, and various committees and boards across the City. There had been a wide spread of comments, with several referring to the nature of the text used in the document, which had resulted in the draft Strategy being written into plain English and further consulted on. Further comments received related to issues regarding provision and how the Authority and CCG would be able to resource the commitments in the Strategy. Mr Armstrong referred to the five commitments, and concluded by indicating that the Authority was very clear as to where it was in terms of the Strategy, whilst being aware that there was still a considerable amount of work to undertake on its implementation.

6.4 Joel Hardwick reported on the joint commissioning developments regarding SEND and Inclusion, and Sapphire Johnson reported on the Clinical Commissioning Group developments and responses in respect of the draft Strategy.

6.5 Councillor Abtisaam Mohamed reported that there was still a considerable amount of work to be undertaken in connection with the Strategy, and that the Action Plan contained therein remained fluid and flexible, as well as being inclusive of all parents and young people in receipt of a service. Councillor Mohamed stated that whilst some schools performed better than others, there was a clear commitment from schools to work under the Strategy. The Authority fully recognised the challenge ahead, and how it needed to address the needs of parents and young people, and that there was a need for the Authority to make changes to its budget allocation in order to reflect such need. An allocation of the additional Government funding would be used towards the implementation of the Strategy. She stressed that there was a need for the Authority to ensure that it listened to the views of all parents and young people across the City, particularly those who may find it difficult to approach the Council.

6.6 Members of the Committee raised questions, and the following responses were provided:-

- The Authority had built on existing arrangements in connection with the Primary Inclusion Panel over the last six months, and there was now both a primary and secondary lead to work across the respective sectors. Schools have viewed this as a very positive development. Many young people had needs covering different service areas, and every effort was made, where possible, to resolve any underlying problems whilst keeping them in mainstream schools.
- The increase in terms of referrals to the Child and Adolescent Mental Health Service (CAMHS) by 46% between 2018/19 and 2019/20 was viewed as a serious concern, albeit a trend that was seen nationally. The waiting times for assessments depended on which pathway the child or young person had been referred to the service on. The current waiting times for assessments at The Ryegate Children's Centre (neurodevelopment assessment, including autism spectrum conditions) were approximately six months for younger children and 18 months for older children. Whilst such waiting times were not necessarily increasing, there was still a need to address the backlog. On the basis that the children and young people would still have needs whilst waiting for their assessments, the services were looking at what support could be put

in place, both pre and post-assessment, which included working closely with schools and the social care team. There was a case of 'double-running', where efforts were being made to reduce the backlog of referrals, whilst looking at adopting a better system in future in order to stop such backlogs recurring. Keeping children in schools helped with their general wellbeing and for this reason, additional mental health resources were being targeted in schools, such as the Healthy Minds Project. Additional resources were also being invested in terms of trying to identify any signs of mental health issues as early as possible in order to reduce the risk of problems escalating later on.

- Every effort was being made, in terms of commissioning, to look at providing increased specialist provision closer to home in order to ease the pressure on families in terms of having to travel to access services. Part of this work involved looking at adopting a locality-based approach.
- Based on the evidence showing the link between children and young people with SEND and school exclusions, the Authority and CCG work together to commission a number of elements of support to children at risk of exclusion, including outreach from special schools and input from specialist health services. This was alongside the development of more integrated resource places, looking to develop more specialist secondary school places and working with Learn Sheffield in connection with a review of alternative provision in the City. It had also been identified that it was important to have a wider curriculum that met the wider needs of children with SEND. It was important that there was clarity in terms of which children needed to be in mainstream or specialist provision, and a key approach in the Strategy was to try to ensure that whichever provision the children required, that it was as close to their home as possible. There had been an increase in resources through locality funding for pupils with additional needs into mainstream schools, and work continued with the headteachers in each locality, as well as their being support from lead SENCOs for the City and in each locality.
- There were already key workers in attendance and inclusion teams and Multi-Agency Support Teams (MAST), who worked closely with families in terms of helping them to co-ordinate the different elements of the services they received. It was important to ensure that the right person worked with families, at the various different stages of their school life. Some families needed more help than others in this regard. Not all children and young people with SEND had a key worker, as they were only used when they were needed.
- The contract in terms of NHS autism services was currently in the process of being transferred to the CCG from NHS England, and the CCG was working with the provider to put an action plan in place, which would include a number of specifications/targets, such as reducing waiting times. A number of Key Performance Indicators (KPIs) would also be handed over as part of the contract. The CCG anticipated this would be provided by the end of March 2020.
- There were KPIs and targets in the CAMHS contract, as well as an

improvement plan that the providers are working to. Whilst it could not be confirmed, it was believed that the target waiting time to second appointment (which was usually the point at which intervention started) of 82% of children and young people to be seen within 18 weeks, as at the end of December 2019, had not been met.

- There had been a number of reviews of services, with 12 being completed in 2019. It was also envisaged that a review of the Speech and Language Service would be completed by the end of March 2020, and a review of the Occupational Therapy and Physiotherapy Service would be complete by September 2020. There were KPIs in both these contracts, which allowed commissioners to monitor waiting times. In addition to such monitoring, a considerable amount of work had been undertaken with families in terms of seeking their views on the service they had received.
- Whilst progress had been made, there was still a considerable amount of work required in terms of post-16 provision. Such work would include the voluntary sector as the Council recognised its strengths and, in some cases, where the voluntary sector could be more flexible than the maintained sector.
- The reason for the increase in the number of referrals to CAMHS was due to a number of factors, including population growth, increased understanding and awareness of mental health issues, vulnerabilities exacerbated by austerity and socio-economic factors and societal factors, such as increased use of social media and screen time and issues with healthy attachment and attunement in early years. There was also a spike in referrals around exam time, where a number of children and young people suffered from stress and anxiety. The various service providers were constantly looking to identify any issues at an early age in order to stop the problems escalating.
- Schools would be receiving increased funding with effect from April 2020 and, through using the Sheffield Support Grid data to more accurately and consistently identify need, that funding would be targeted on the areas of the City where need was greatest. In addition to this, there were also plans to increase locality working and, as part of this, work would be undertaken to assess demand and need in particular areas, and resources would be targeted to those areas of higher demand and need. It was acknowledged that there was never going to be sufficient funding to provide a perfect service for all, so services needed to look at what could be done with the funding available. It was also acknowledged that there was a need to be realistic in terms of what could and could not be done, and as part of this, families would continue to be asked what was most important to them. If more funding became available, there was a need for a clear understanding as to what was required City-wide, and using the data collated, the various different services would be redesigned in order to identify precisely what expertise was required, and where. As well as an increase in funding for schools, direct support for families had also been provided through the use of key workers.
- All prospective SENCOs were required to achieve a Masters qualification within a period of three years of commencing in the post. There was no

standard job description for a SENCO as their roles varied across different schools.

- The consultation on the Strategy was not held in isolation, but formed part of a much broader conversation in terms of the Strategy. The consultation had been aimed at all families with children and young people with SEND, and not just those with Education, Health and Care Plans (EHCP). A total of 160 comments had been received to the online consultation, with each being assessed and evaluated. A number of schools would invite parents to visit the school and provide feedback, and the Council was encouraging other schools to adopt this approach. In addition, the Locality Headteachers were constantly monitoring performance in their respective areas.
- There was a need to review the EHC and other panels, and as part of this, officers had reviewed 30/40 cases with the aim of finding ways of improving the experience for parents throughout the process. A key aim was to stop the process where parents felt forced to fight for what they considered was best for their children, which appeared to be the case for a number of families at present. It was acknowledged that such Panels were not always the best forum for holding the reviews.
- There were ongoing problems in terms of recruiting specialist staff, particularly mental health practitioners and educational psychologists. In the meantime, efforts were being made in terms of looking what provision could be put in place in order to support existing specialist staff, which could include colleagues in the voluntary sector.
- A number of KPIs were mandated as part of the NHS standard contract and national performance monitoring framework. The CCG talked to families in terms of what they feel should be included in some of the service specifications that were part of the contract, and used family feedback as part of the performance monitoring process. This was something the CCG was working to do more frequently and consistently in future.
- There were a number of contractual mechanisms in order to address non-compliance in terms of KPIs, and the services would look at those areas where providers were struggling to meet the KPIs. There were a number of routes to follow as part of the contract monitoring process, some of which were more informal, but others more formal, such as escalating issues to the Contract Management Board (a director-level meeting) and issuing contract performance notices and financial penalties. The CCG and Authority always aimed to work in partnership with the providers in terms of providing assistance so that they could deliver what was required under the contract. Details of any failures in terms of KPIs were reported to the Inclusion Strategy Board and performance of providers was constantly reviewed.
- The consultation undertaken as part of the co-production of the Strategy had involved seeking the views of parents, carers, teachers, headteachers and health and social care staff. In addition, a number of focus groups had been arranged with staff delivering the services.

- The waiting times in terms of referrals to services were statutory, details of which were all reported to the Inclusion Improvement Board.
- The Authority and CCG worked closely with the Parent Carer Forum, as well as seeking the views of families and young people and schools, in connection with how the various services were prioritised.
- It was acknowledged that the waiting time of 18 months for some services at Ryegate was not acceptable. This raised serious concerns for all services and the families, and a considerable amount of work was being undertaken in terms of efforts to address this, including the recruitment of additional staff. Given the long waiting time, and the lack of progress in reducing such time, it had been considered that a different approach was required. Such delays were having an adverse impact on how some children and young people were engaging with education, and consequently, could result in an increase in pupil exclusions. Work was being undertaken to look at current health provision in schools, and how this could be provided differently in future. At the present time, considerable staffing was used in connection with assessing children and young people for autism, and it had been suggested that assessments be undertaken differently, with the result of young people being seen and assessed quicker, a solution that several parents agreed with. There needed to be more emphasis placed on meeting young people's needs, rather than diagnosis.
- It was acknowledged that the national Masters qualification for SENCOs was not always totally relevant to their roles and in the light of this, robust local training was deemed very important.
- There was a wide range of staff involved in locality working, and there was a need to link such staff across education, health, care and other services. Efforts were being made to develop training between the different services, so that there would be a collective plan and enable all staff to have an idea of what their colleagues were doing.

6.7 RESOLVED: That the Committee:-

- (a) notes the joint report and additional documents now submitted, including the updated draft of the Sheffield Inclusion Strategy 2020-25 now circulated, together with the information now reported and the responses to the questions raised;
- (b) thanks Councillor Abtisam Mohamed, Tim Armstrong, Sapphire Johnson and Joel Hardwick for attending the meeting and responding to the questions raised;
- (c) whilst appreciating the honesty expressed in the draft Strategy, raises concerns with regard to the obvious difficulties being faced in terms of solving problems, as highlighted by the parents in attendance, who had raised public questions; and

- (d) requests:-
- (i) the Cabinet Member, Tim Armstrong, Sapphire Johnson and Joel Hardwick to attend a meeting of the Committee to be held in or around October 2020, to provide a further update on the Sheffield Inclusion Strategy, following the Ofsted re-inspection scheduled in October 2020;
 - (ii) that all the comments and concerns raised at this meeting be included as part of the ongoing review of the Strategy;
 - (iii) Sapphire Johnson to submit a briefing paper to Members on the position regarding waiting times at Ryegate, and the work being taken to address this, at the earliest possible opportunity; and
 - (iv) that, wherever possible, services adopt a permissive attitude/approach to panels in the EHCP process.

7. WORK PROGRAMME 2019-20

- 7.1 The Committee received a report of the Policy and Improvement Officer (Alice Nicholson) containing the Work Programme for 2019/20.
- 7.2 Ms Nicholson reported that, in terms of the agenda for the meeting to be held on 2nd March 2020, it had been suggested that Members receive a briefing paper on the Schools Funding Formula, and that the item on MAST and Early Years would be submitted to a meeting of the Committee in July 2020, leaving the main items as Pupil Outcomes/School Performance 2018/19, Children and Young People's Mental Health Transformation Programme and reporting of the Voice and Influence of Children and Young People Task Group.
- 7.3 RESOLVED: That the Committee approves the contents of the Work Programme for 2019/20, taking into consideration the comments now made.

8. DATE OF NEXT MEETING

- 8.1 It was noted that the next meeting of the Committee would be held on Monday, 2nd March 2020, at 10.00 am, in the Town Hall.