



Kingston SEND Partnership Board



Wednesday 31 March 2021, 10-12pm



Virtual via Google Meets



Members

Ian Dodds, acting chair	ID	Director of Children's Services	Achieving for Children
Alison Danks	AD	Associate Director for Health Services	Achieving for Children
Alison Stewart	AS	Designated Clinical Officer for Special Educational Needs & Disabilities	South West London Clinical Commissioning Group (Kingston)
Alison Twynam	AT	Director Children's Social Care	Achieving for Children
Anna Chiva	AC	Associate Director for Special Educational Needs	Achieving for Children
Ashley Whittaker	AW	Programme Director	Achieving for Children
Beverley Pass	BP	Parent Representative	Parent Carer Forum
Brian Gale	BG	SEND Professional Adviser	Department for Education

Carmel Brady	СВ	Speech & Language Therapist Lead for Children's Services	Your Healthcare CIC		
Charis Penfold	СР	Director for Education Services	Achieving for Children		
Cllr Diane White	DW	Portfolio Holder Children's Services including Education	Royal Borough of Kingston upon Thames		
George Chaplin	GC	Participation Member			
Grace Over	GO	Participation Officer for Children & Young People with SEND	Achieving for Children		
Iona Lidington	IL	Director of Public Health	Royal Borough of Kingston upon Thames		
Jessica Thom	JT	Director of Commissioning and Partnerships	Achieving for Children		
Jonathan Brown	JB	Corporate Head of Service - Learning Disability & Transition, Locality Team Hubs	Royal Borough of Kingston upon Thames		
Jonathan Rourke	JR	SENDIASS Coordinator for Richmond and Kingston	SENDIASS		
Julie Percival – on behalf of Peter Mayhew-Smith	JP	Assistant Principal – Curriculum & High Needs	South Thames College Group		
Karen Long	KL	Service Lead, Frontline Services	Your Healthcare		
Leigh Edser	LE	Principal	Dysart School		
Nigel Evason	NE	Head of Children, Mental Health and Learning Disability	South West London Clinical Commissioning Group (Kingston)		
Sean Maher	SM	Headmaster	Richard Challoner School		
Sharon Houlden		Executive Director for Social Care and Health	Exec Dir for Social care and Health		
Sian Wicks	SW	Non-Executive Director			
Stuart Sweeney	SS	Lay Member (Social Investment Sector)			
Sue Lear – on behalf of Martin Ellis		Deputy Director of Transformation	South West London Clinical Commissioning Group (Kingston)		
Terry Tottman		Commissioning Manager	Achieving for Children		
Tonia Michaelides	TM	Executive Locality Director (Kingston)	South West London CCG		
Apologies					
Claire Deadman	CD	Nursery Manager	One Nine Seven Early Years Nursery		
Elizabeth Broadhurst	EB	Interim Children's Commissioner	Exec Dir for Social care and Health		
Georgina Andrews	GA	Head of Practice Learning	Achieving for Children		
Helen Green	HG	SEND Support Broker	Kingston Centre for Independent Living		
Ian Thomas, Chair	IT	Chief Executive	Royal Borough of Kingston upon Thames		
Jane Bearman	JB	Assistant Director, Adult Services	Royal Borough of Kingston upon Thames		
Jane Spencer	JS	Non-Executive Director	Achieving for Children		
Laura Smyth	LS	Chief Executive Officer	Yorda Adventures		
Louise Kearney	LK	Parent Representative	Parent Carer Forum		

Michael Smith	MS	Associate Director for Finance	Achieving for Children
Martin Ellis	ME	Interim Director of Commissioning & Transformation	South West London Clinical Commissioning Group
Peter Mayhew-Smith	PMS	Group Principal and CEO	South Thames Colleges Group
Rachel Nye	RN	Headteacher	Tolworth Infant and Junior School
Sarah Ireland	SI	Director of Corporate and Commercial	Royal Borough of Kingston upon Thames

1 2 3 Minutes		
1.	Welcomes, Introductions and Apologies	
	ID, acting chair, welcomed the Board and apologies were noted.	
2.	Children and young people update	
	GO presented an audio message from KJ, a young person working with AfC. The message was about the difference that using the right language can have, highlighting the difference between autism spectrum condition (ASC) and autism spectrum disorder (ASD) and the effect that describing it as a 'disorder' has on young people.	
	NB. @31.03.21 GO will liaise with KJ and ask if the audio message can be shared with the Board and their wider teams, so that this message is shared across the local area	
3.	Parent and carer update	
	AW, referring to the SEND Futures plan, where Workstream 1 - Co-production, engagement and participation relates to the work with the PCF and also with GO and her team of young people. A common theme that is coming through from a number of surveys is how challenging the last 12 has been for parents and young people with SEND. Schools have been open to children with EHCPs	

over the last 12 months. Noted that short breaks have been in limited supply. **AW** thanked the PCF for continuing to build the PCF and for being proactive during the last year, noted that they are doing this while caring for their children and doing their day job.

AW noted the work which has taken place since the last Board in November with the PCF and the Parent Consortium at their monthly meetings. A survey was completed, a deep dive into education healthcare needs assessments and also SEND support, the annual reviews were discussed and the processes around these, there was also a discussion around lockdown restrictions in January and working with schools. There has also been a lot of work focussing on early intervention and the identification of needs, which is part of the ongoing work in Workstream 4. AW noted the relaunch of Kingston's disability register, which is now called Special Educational Needs and Disability Register, every Kingston family who has an EHCP or had a child registered on the January school census on SEND support, approx. 4K families were sent a letter or emailed to highlight the relaunch and encouraged them to sign up. The joint letter was sent from AfC, PCF, CCG, the council and Cllr White. The benefits of this is to help increase the engagement of the wider community, particularly for those groups who are underrepresented, and to proactively improve communications between all groups, there will also be the opportunity for families to request a disability awareness card, which can be used in the local community. AW noted that parents had given valuable feedback on these areas and also on the vaccination experience.

Following on from the AW update, **BP** noted that schools have been open to children and young people with an EHCP and SEND support, but it has not been entirely consistent across the borough and this has been a challenge for some families. There are lessons to learn, especially for those without an EHCP and one of the reasons for the deep dive into SEND support is to give this group better visibility and understanding of their needs, if this area can be improved with earlier intervention there will be less need to follow the EHCP route, which may not always be required.

BP also noted that the PCF ran legal workshops X3 to help people understand the legal framework of SEND and what their rights are and how to exercise them. They also ran some relaxation sessions. The PCF website will be launched shortly. **BP** noted that the PCF were able to apply for

Occupational Therapy (OT) packages. 10 packages were available and 66 applications were received, which indicated to the PCF that there is a strong need in the borough for OT therapies and services. BP noted that the packages offered were basic assessments of need. SW asked if the PCF were aware of families in crisis and how would they have been able to access help during lockdown. BP noted the PCF have a limited reach as still in infancy, but some parents with children who have complex needs have struggled due to shielding and not being able to attend school or access education from home, some provisions were not able to provide support all the time. There is a mixed response from families and not all of them were able to access SEND support. AC asked, and it would be helpful, if the PCF would be happy to share the impact of the OT assessments with the wider partnership. If they were to continue with this type of project, would they consider working with AfC moving forward? These families will probably feed into our services and it would help start a positive journey for them. BP noted it is still in early stages, but agreed would be helpful as there is a strong need for OT.

Cllr White asked GO / GC about how young people are feeling regarding lockdown and what are their concerns. The uncertainty and changes have had an impact, however they are happy to be back in school, although very tired and are adjusting. Happy to have received their vaccines. GC noted that young people with SEND often struggle with change and some did not receive the support they needed during lockdown, but it is good that they are back in school and will be able to catch up.

4. | SEND Futures Plan update and Q3 Dashboard

AW noted the tremendous amount of work that our children and young people have contributed towards the SEND Futures Plan, he also noted the point that **BP** made about the PCF not having a wide reach. In the recent mailing a "flyer" was included about the PCF and this was to 4K families and this will continue to grow.

AW explained that Kingston council has reached an agreement with the Department for Education about money. Headlines are, in 2020/21 the council will receive an additional grant of £9M, and in addition to this the council will not have to repay the £3M advance that was paid to them in the

financial year 2018/19, which is essentially an improvement of £12M at the end of this financial year. In the future, there is the potential to receive up to another £18M, which in theory could eliminate the deficit by 2025/26. This is good news for schools and also for children and young people with SEND. The work we need to complete to receive these additional payments is in line with work we are already undertaking. There are terms and conditions with the additional grant that we need to deliver e.g. we have to deliver the SEND Futures Plan and the metrics within the plan to receive the grant. In order for us to deliver the plan there are 8 conditions of the additional grant are 1. Support schools to manage demand more effectively and reduce escalation in need, 2. Expand local specialist provision to avoid placements in the independent sector, 3. Manage demand for EHCPs by scrutinising provision at each annual review, 4. Reform the authority's post-16 offer, including the development of new provision, 5. External scrutiny on demand management and £ sustainability, 6. Improve efficiency of commissioning services to drive down cost, 7. Increase contributions from health and social care, 8. Contribute £ from alternative council funding sources.

SW asked about the difficulties in obtaining performance data and the synergy between systems and the barriers around collecting accurate health referral data, how much of a risk is this to deliver and evidencing that we are on plan for the imminent revisit. **AW** explained that there were issues with collecting data during Covid, but systems have improved. The SEND Futures Plan will be returning to the council committee in June and we are currently working on a new dataset, which will also come to the this board, and will be implemented from Q1 2021 and will be aligned to the update in the SEND Futures Plan and any outstanding work.

PAPERS FOR THE BOARD - 31.03.21\Item 4 - RBK SEND Futures Plan Update, SEND PB, Mar 2021.pdf

PAPERS FOR THE BOARD - 31.03.21\Item 4a - RBK SEND Partnership Board Performance Dashboard, Q3 2020_21.pdf

5. Update on improvements to therapy and mental health

PAPERS FOR THE BOARD - 31.03.21\Item 5 - Kingston Progress Report on the Implementation of the Therapies Review - March 2021.pdf

Due to the limited time for this item, AD noted the detailed report distributed prior to the Board and is happy for members to email questions after the Board. AD gave a an update on progress and what the impact of the additional investment for year one has been, @01.04.21 moving into year two, and what the next steps and priorities are for year two and what this will look like. Key highlights for the year one additional investment, in January a specialist pre and post dialogistic team were recruited, which was identified as a gap in the therapies review. They sit within the community specialist nursing team and are also very much a part of the social communication team. There are two in Kingston and two in Richmond. They have been busy accepting referrals, establishing the team, working together with the paediatricians, health visitors and GPs, and have already started working with approx. 50 families. AD noted that since January additional social communication assessment clinics have been running and the team were able to see an additional 30 children. The team had to be creative around Covid restrictions regarding face to face assessments, feedback from families has been positive and the virtual way of working was helpful. This initiative will continue for the next 6 months. There was also successful recruitment into the Occupational Therapy Service. Currently recruiting additional x3 posts with the year two investment. This means that the threshold and referral criteria can be reviewed and working with schools and Early Years providers to identify what the next steps and priorities are, and should be able to expand the offer, steadily, moving forward. AD noted some of the issues discussed around OT today, there are a lot of providers in Kingston in various settings, but hoping to make this area more uniform in the future so that there are guidelines and a common understanding about what needs to be achieved and everyone is working towards the same goal. The priorities for year two have been identified through the Therapies Oversight Group, which is another example of working in partnership, who jointly agreed priorities for year two across the therapy services. A key gap to note is around manual handling and assessments for schools, work is ongoing and funding has

been identified, the training had to be delayed due to Covid, but is planned for June 2021. Going forward this should not be a gap and schools will be able to access the service when needed through the AfC therapy provision and this is a positive achievement.

KL gave an update on the Speech and Language Provision. Key highlights include recruiting a specific Early Years post, started in January, to help reduce waiting times for this group. A second post, started in February, to focus on the mainstream school population and also reducing waiting times. The third post, this is a flexible post and will move to wherever there is pressure in a particular service. The forth post is for the more complex Early Years group, this is a recent addition to the team, which started at the beginning of March. Priorities for year two have been agreed with planned additional recruitment.

AC noted the need to focus on and progress with the Post 16 provision. AfC are working together with Yourhealthcare and local colleges. This area is also part of the adult Speech and Language service and is part of their agenda.

ID thanked everyone for their contributions towards the progress made, there is still further work to be completed, but we are making good progress with the Therapies Review.

6. Written Statement of Action – Areas 1&2

ID noted that the revisit for Kingston could be after Easter.

AS and **AC** presented an update on progress for areas 1 and 2 of the Kingston WSOA, including a quiz. Please see below.

PRESENTATIONS\Priorities 1 and 2 Pres - March 2021.pdf

Kirsty also gave a short presentation about

NB. @31.03.21 **GO** will liaise with **Kirsty** and ask if the presentation can be shared with the Board and their wider teams.

GC asked why some parents feel the need to seek a private assessment during the needs assessment process, is this because the quality of advice is not good enough or is it timeliness, or both. AS explained that health sees a lot of independent advice when a family is struggling to access local services. At times there is a slight difference of opinion between our independent colleagues and those, for example, who are employed by the NHS. We work across the system to enable families to access therapies in a timely and coherent way to meet holistic outcomes. GC noted his concerns about the possibility of the private advice being of a higher quality and the social mobility issues around this, and noted that the more privileged parents will be able to achieve better outcomes for their children. AS noted that there is a focus on how providers give advice as part of the EHCP assessment and templates are used to ensure we have a clear golden thread from aspirations, need, outcomes and provision. AS pointed out that this may look very different to a very detailed private assessment, but the drive is to make sure the advice links to the golden thread. GC noted his concerns about OT and are young people not receiving it because they are not being allocated it in their needs assessment process. AC noted that in terms of the EHCP, if a young person has been identified as needing OT, it will be discussed at a multi-agency meeting to ensure that there is evidence for OT, if there is a need then there will be a discussion around how this will be commissioned. It was noted that OT is part of the therapies review.

ID asked what the board needs to do to help take this forward. AC noted that we need to be clear about commissioning intentions for services in relation to annual reviews for AfC services and health partners. Agree prioritising timeliness of activities in terms of EHCP needs assessments and linking this in with commissioning and ensuring this is in our SLAs. To have an agreed approach around quality assurance and governance, with a shared consistent QA approach. Co-delivering holistic outcomes training with SENDIASS, young people and parents. It would be helpful if board members could complete the Council for Disabled Children's holistic outcome training.

ID noted that as a Board we should reflect on what is our strategic role to make these changes across the SEND system and that this could be a focus for discussion at a future meeting.

Click on the link below to go to CDC's e-learning catalogue: https://learning.councilfordisabledchildren.org.uk/ Please click on the 'browser checker tool' to confirm your system requirements are compatible with the e-learning. You will see a course titled Social Care and SEND. Click 'start' on that course. The course has two models which will take about 45 minutes each. A log in screen will then appear with the option to create a new account. Click on the 'Create new account' button. Complete the registration form with all required details and click 'create new account'. A verification email will be sent to the email address you provided (please check your junk mail), follow the instructions on the email to verify and sign into your account. Once you have completed Social Care and Send please move onto the Outcomes in EHCPs. If you need any technical support while completing this course, please contact CDClearning@ncb.org.uk 7. Minutes from 12 November 2020 meeting and actions not otherwise covered The minutes were agreed. 8. Any other business – no items noted. Forward Plan - no items noted

KINGSTON SEND Partnership Board will next meet on:

NB. Electronic invites have been sent.

27 May 2021 at 10-12pm

14 July 2021 at 10-12pm

30 September 2021 at 10-12pm

25 November 2021 at 10-12pm

26 January 2022 at 10-12pm