



Leicester
City Council

**MEETING OF THE CHILDREN, YOUNG PEOPLE AND EDUCATION
SCRUTINY COMMISSION**

DATE: THURSDAY, 2 SEPTEMBER 2021

TIME: 5:30 pm

**PLACE: Meeting Rooms G.01 and G.02, Ground Floor, City Hall,
115 Charles Street, Leicester, LE1 1FZ**

Members of the Commission

Councillor Gee (Chair)
Councillor Cole (Vice-Chair)

Councillors Batool, Pandya, Pickering, Riyait and Willmott

1 unallocated Non-Group vacancy

Co-opted Members (Voting)

| | |
|-----------------|---|
| Gerry Hirst | Roman Catholic Diocesan |
| Carolyn Lewis | Church of England Diocese |
| Mr Mohit Sharma | Parent Governor (Primary / Special Schools) |
| Vacancy | Parent Governor (Secondary Schools) |

Standing Invitees (Non-Voting)

| | |
|-------------------|-------------------------------|
| Janet McKenna | Unison |
| Joseph Wyglendacz | Teaching Unions |
| Vacancy | Faith Representative (Hindu) |
| Vacancy | Faith Representative (Muslim) |
| Vacancy | Faith Representative (Sikh) |

Members of the Commission are invited to attend the above meeting to consider the items of business listed overleaf.

A. Thomas .

For the Monitoring Officer

Officer contact:

Ayleena Thomas (Democratic Support Officer),
Tel: 0116 454 6369, e-mail: Ayleena.Thomas@leicester.gov.uk
Leicester City Council, City Hall, 3rd Floor Granby Wing, 115 Charles Street, Leicester, LE1 1FZ

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- ✓ where filming, to only focus on those people actively participating in the meeting;
- ✓ where filming, to (via the Chair of the meeting) ensure that those present are aware that they may be filmed and respect any requests to not be filmed.

Further information

If you have any queries about any of the above or the business to be discussed, please contact:

Ayleena Thomas, Democratic Support Officer on 0116 454 6369.

Alternatively, email Ayleena.Thomas@leicester.gov.uk, or call in at City Hall.

For Press Enquiries - please phone the **Communications Unit on 0116 454 4151.**



USEFUL ACRONYMS IN RELATION TO OFSTED AND EDUCATION AND CHILDREN'S SERVICES

(updated November 2015)

| Acronym | Meaning |
|------------------|--|
| APS | Average Point Score: the average attainment of a group of pupils; points are assigned to levels or grades attained on tests. |
| ASYE | Assessed and Supported Year in Employment |
| C&YP | Children and Young People |
| CAMHS | Child and Adolescent Mental Health Service |
| CFST | Children and Families Support Team |
| CICC | Children in Care Council |
| CIN | Children in Need |
| CLA | Children Looked After |
| CLASS | City of Leicester Association of Special Schools |
| COLGA | City of Leicester Governors Association |
| CPD | Continuing Professional Development |
| CQC | Care Quality Commission |
| CYPF | Children Young People and Families Division (Leicester City Council) |
| CYPP | Children and Young People's Plan |
| CYPS Scrutiny | Children, Young People and Schools Scrutiny Commission |
| DAS | Duty and Advice Service |
| DCS | Director of Children's Services |
| EAL | English as an Additional Language |
| EET | Education, Employment and Training |
| EHA | Early Help Assessment |
| EHCP | Education Health and Care Plan |
| EHP | Early Help Partnership |
| EHSS | Early Help Stay Safe |
| EIP | Education Improvement Partnership |

| | |
|-------|---|
| ELG | Early Learning Goals: aspects measured at the end of the Early Years Foundation Stage Profile |
| EY | Early Years |
| EYFS | Early Years Foundation Stage: (0-5); assessed at age 5. |
| EYFSP | Early Years Foundation Stage Profile |
| FS | Foundation Stage: nursery and school Reception, ages 3-5; at start of Reception a child is assessed against the new national standard of 'expected' stage of development, then teacher assessment of Foundation Stage Profile areas of learning |
| FSM | Free School Meals |
| GCSE | General Certificate of Education |
| GLD | Good Level of Development |
| HMCI | Her Majesty's Chief Inspector |
| HR | Human Resources |
| ICT | Information, Communication and Technology |
| IRO | Independent Reviewing Officer |
| JSNA | Joint Strategic Needs Assessment |
| KPI | Key Performance Indicator |
| KS1 | Key Stage 1: National Curriculum Years (NCYs) 1 and 2, ages 5-7; assessed at age 7. |
| KS2 | Key Stage 2: NCYs 3, 4, 5, and 6, ages 7-11; assessed at age 11. |
| KS3 | Key Stage 3: NCYs 7, 8 and 9, ages 11-14; no statutory assessment. |
| KS4 | Key Stage 4: NCYs 10 and 11, ages 14-16; assessed at age 16. |
| KTC | Knowledge Transfer Centre |
| LA | Local Authority |
| LADO | Local Authority Designated Officer |
| LARP | Leicester Access to Resources Panel |
| LCCIB | Leicester City Council Improvement Board |
| LCT | Leicester Children's Trust |
| LDD | Learning Difficulty or Disability |
| LESP | Leicester Education Strategic Partnership |
| LLEs | Local Leaders of Education |
| LP | Leicester Partnership |

| | |
|--------|---|
| LPP | Leicester Primary Partnership |
| LPS | Leicester Partnership School |
| LSCB | Leicester Safeguarding Children Board |
| LSOAs | Lower Super Output Areas |
| MACFA | Multi Agency Case File Audit |
| NCY | National Curriculum Year |
| NEET | Not in Education, Employment or Training |
| NLEs | National Leaders of Education |
| NLGs | National Leaders of Governance |
| OFSTED | Office for Standards in Education, Children's Services and Skills |
| PEPs | Personal Education Plans |
| PI | Performance Indicator |
| PVI | Private, Voluntary and Independent |
| QA | Quality Assurance |
| RI | Requires Improvement |
| SA | Single Assessment |
| SALT | Speech and Language Therapy |
| SCR | Serious Case Review |
| SEN | Special Educational Needs |
| SEND | Special Educational Needs and Disabilities |
| SIMS | Schools Information Management Systems |
| SLCN | Speech, Language and Communication Needs |
| SLEs | Specialist Leaders of Education |
| SMT | Senior Management Team |
| SRE | Sex and Relationship Education |
| TBC | To be Confirmed |
| TFL | Tertiary Federation Leicester |
| TP | Teenage Pregnancy |
| UHL | University Hospitals Leicester |
| WIT | Whatever it Takes |
| YOS | Youth Offending Service |
| YPC | Young People's Council |

PUBLIC SESSION

AGENDA

FIRE / EMERGENCY EVACUATION

If the emergency alarm sounds, you must evacuate the building immediately by the nearest available fire exit and proceed to the area outside the Ramada Encore Hotel on Charles Street as directed by Democratic Services staff. Further instructions will then be given.

1. APOLOGIES FOR ABSENCE

2. MINUTES OF THE PREVIOUS MEETING

**Appendix A
(Pages 1 - 10)**

The Minutes of the previous meeting of the Commission held on 22 June are attached and Members are asked to confirm them as a correct record.

3. CHAIR'S ANNOUNCEMENTS

4. PETITIONS

The Monitoring Officer to report on the receipt of any Petitions in accordance with Council procedures.

5. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer to report on the receipt of any Questions, Representations and Statements of Case in accordance with Council procedures.

6. OFSTED UPDATES

(A) INDEPENDENT REVIEWING OFFICER (IRO)

**Appendix B
(Pages 11 - 40)**

The Director of Social Care and Early Help submits a report, which considers the Annual Independent Reviewing Officers Report for 2019-20.

(B) YOUTH JUSTICE PLAN

**Appendix C
(Pages 41 - 48)**

The Director of Social Care and Early Help submits a report, which considers the annual youth justice plan setting out how youth justice services are to be provided and funded, how the Children and Young Peoples Justice Service will be composed and funded, how it will operate, and what functions it will carry out.

7. NATIONAL REVIEW OF CHILDREN'S SOCIAL CARE

**Appendix D
(Pages 49 - 56)**

The Director of Social Care and Early Help submits the Independent Review of Children's Social Care Terms of reference and letter to the Chair of the review from the President of The Association of Directors of Children's Services (ADCS).

8. UPDATE ON IMPROVEMENT PROGRESS

**Appendix E
(Pages 57 - 60)**

The Strategic Director of Social Care and Education submits a letter from Ofsted, following the formal 'annual engagement meeting'.

9. JOINT SPECIAL EDUCATION NEEDS AND DISABILITIES COMMISSIONING STRATEGY

**Appendix F
(Pages 61 - 112)**

The Director of Adult Social Care and Commissioning submits a report on the Joint Special Education Needs and Disabilities Commissioning Strategy.

10. UPDATE ON SEND LOCAL AREA REVISIT

**Appendix G
(Pages 113 - 142)**

The Strategic Director of Social Care and Education submits a report, which sets out the findings of the May 2021 Special Educational Needs and Disabilities (SEND) inspection revisit.

11. COVID 19 LEICESTER'S SCHOOLS AND COVID & FLU VACCINATION PROGRAMMES UPDATES

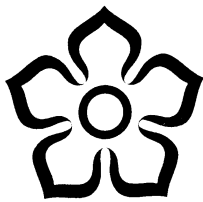
The Strategic Director of Social Care and Education and the Director of Public Health will provide a verbal update on the current situation concerning the impact of Covid-19 and the Covid and Flu vaccination programmes.

12. WORK PROGRAMME

**Appendix H
(Pages 143 - 148)**

The Commission's Work Programme is attached for information and comment.

13. ANY OTHER URGENT BUSINESS



Leicester
City Council

Minutes of the Meeting of the
CHILDREN, YOUNG PEOPLE AND EDUCATION SCRUTINY COMMISSION

Held: TUESDAY, 22 JUNE 2021 at 5:30 pm

P R E S E N T:

Councillor Gee (Chair)
Councillor Cole (Vice-Chair)

Councillor Batool
Councillor Pickering

Councillor Pandya
Councillor Riyait

Councillor Willmott

In Attendance:

Councillor Cutkelvin, Assistant City Mayor - Education and Housing
Councillor Russell, Deputy City Mayor - Social Care and Anti-Poverty

Also Present:

Mr Mohit Sharma - Parent Governor (Primary / Special Schools)

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1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Gerard Hirst (Roman Catholic Diocesan), Carolyn Lewis (Church of England Diocese), Janet McKenna (Unison) and Joseph Wyglendacz (Teaching Unions).

2. DECLARATIONS OF INTEREST

Councillor Cole declared an Other Disclosable Interest in the general business of the meeting that he had family members who worked within schools and a family member that worked within the Council.

Councillor Pickering declared an Other Disclosable Interest in the general

business of the meeting that she was a school governor.

Councillor Riyait declared an Other Disclosable Interest in the general business of the meeting that he was a school governor.

In accordance with the Council's Code of Conduct, these interests were not considered so significant that they were likely to prejudice the Councillor's judgement of the public interests. Councillor Cole, Pickering and Riyait were not therefore required to withdraw from the meeting during consideration and discussion of the agenda items.

3. MINUTES OF THE PREVIOUS MEETINGS

AGREED:

that the minutes of the Children, Young People and Schools Scrutiny Commission meeting held on 25 February 2021 and 11 March 2021 be confirmed as a correct record.

4. CHAIR'S ANNOUNCEMENTS

The Chair welcomed everyone to the meeting and requested Members, Officers and invitees present at the meeting to introduce themselves.

The meeting undertook a minute's silence in recognition of the recent passing of Councillor John Thomas (Member of the Humberstone and Hamilton Ward).

At the invitation of the Chair, it was noted that the Principal of Phoenix Agenda Supplementary School - Camille London-Miyo MBE. NPQH was invited to participate in discussion of item 9 'The Underachievement of 'Black Caribbean' and 'White British Working-class' pupils of secondary school age in Leicester'.

5. MEMBERSHIP OF THE COMMISSION

AGREED:

That the membership of the Children, Young People and Education Scrutiny Commission for 2021/22 be noted.

6. DATES OF COMMISSION MEETINGS 2021/22

AGREED:

That the dates of meetings of the Children, Young People and Education Scrutiny Commission for 2021/22 be noted.

7. PETITIONS

The Monitoring Officer reported that no petitions had been received.

8. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer reported that no questions, representations, or

statements of case had been received.

9. REVIEW OF SCOPE OF THE COMMISSION

The Strategic Director for Social Care and Education submitted a presentation and commission structure chart in relation to a review of scope of the Commission, including the work done within the department to deal with the impact of Coronavirus on Leicester's Children's Services and schools.

The various service Directors presented the following:

- The **Education service** area focussed on schools including ensuring the readiness for school, that children attended school and that sufficient places were available for children to attend school.
- In addition this area looked at the education welfare of children, early years settings and Connexions - which IS a careers service for young people who live in Leicester City aged 16-19 or up to 25 years for young people with Special Educational Needs (SEN).
- In terms of improvements the team also worked in and with schools to improve outcomes, performance and to support governors, as well as ensuring the right data was in place to determine how well schools were performing.
- **Social care services** and families in need of ongoing support, was noted to cover: children's services, looked after children service area, supporting ages 16+ into the adult world, fostering and adoption services, safeguarding teams/ safeguarding for all schools, quality assurance and management programmes, investigation, responsibility for health assessments and many more aspects.
- **Special Education Needs (SEN)** service area delivers services to children and young people with disabilities, including physical disabilities, learning disabilities and those with neurodevelopmental conditions. There are currently over 3,000 children and young people with a statutory Education, Health & Care Plan and a further 10,000 who have lower levels needs who are also supported by the SEN service. This support includes specialist teachers and support staff based in schools. The key priority for the service is to ensure that children and young people with a disability are taught in mainstream schools wherever possible and are prepared for adulthood as they grow and develop. The service also works closely with children and young people, their parents and carers, schools and the parent/ carer forum.
- Further to the structure of the commission's services, the budgets for each service and key challenges faced was also presented.
- It was requested that the Commission be aware of the external scrutiny the department receives from Ofsted and the Care Quality Commission (CQC), which includes a SEN re-visit in May 2021. It is also anticipated that Children's Social Care is likely to be subject to an inspection in

Sept/Oct 2021.

Following queries from Members of the Commission, the below responses were provided:

- Further to a Members request, the Officer agreed to bring to a future CYP&E Scrutiny Commission meeting a view about the population and the ethnic breakdown of children in schools across the whole of the city. In addition, it was agreed that details could be provided about all the different groups in the various sections that the service had data for. It was noted that last week external national data sets published of data were published in relation to the January school census around children in schools, however Officers would provide some analysis internally. Following the request, it was clarified that the service could not provide an ethnic breakdown of the staff as some of the staff were not employed by the Council.

AGREED:

1. It was agreed that the presentation slides and the scope of commission structure chart presented at the meeting for this item, would be circulated to Members of the CYP&E Scrutiny Commission.

10. THE UNDERACHIEVEMENT OF 'BLACK CARIBBEAN' AND 'WHITE BRITISH WORKING-CLASS' PUPILS OF SECONDARY SCHOOL AGE IN LEICESTER

The Principal Education Officer submitted the Underachievement of 'Black Caribbean' and 'White British Working-Class' pupils of secondary school age in Leicester' report to provide some context and background to the current work across Education to improve outcomes for all disadvantaged children and particularly those groups identified by Scrutiny Commission.

The following was noted:

- A working task group was set up to address the disparity of the groups highlighted to be underachieving.
- There were previously more funding and direct support opportunities because the LA used to have an ethnic minority achievement service and was able to monitor racist incidents, work and support schools with children new to English. However, there was now a reduced funding amount from £34m some years ago to now £1.9m that the service received which must go directly to schools for their school improvement activity. Therefore, the LA approach was now to focus on working in partnership with schools and delivering the statutory elements.
- Some of the key aims with schools in Leicester City are:
 - Working together and improve communication,
 - Ensure teachers from minority groups were represented at all levels,
 - Enable schools to develop their curriculum and their offer to

- children,
 - To ensure schools are providing aspects such as racial literacy training and having an understanding of the whole range of curriculum needs,
 - To enable schools to develop their curriculum which was right for their pupils/ students and provide support for dealing with bullying and racist incidents in a proactive way and preventing those coming forward.
 - The Local authority needed to work with schools via discussion, challenge, debate and demonstration,
 - Experts exist within Leicester city communities and schools and it was therefore necessary to enable those groups to work together to address the key findings of the recommendations of the Scrutiny Commission to improve those outcomes for all children and those specific groups underachieving - children of black Caribbean heritage (and other black heritage) and children of white heritage living in deprived area. It was noted that of these groups over 50% of children are eligible for pupil premium.
- It was anticipated that with the task group the work will be able to move forward. The initial focus would be to look at attitudes and behaviours, environment and curriculum that schools are offering, with focuses on secondary education but also being aware of the challenges being faced in primary schools.
- A three-year strategy would be developed, working with schools and partners, early years setting, universities, and parents etc to identify what needs to be done to improve all outcomes particularly for those underachieving.
- The Covid-19 pandemic was noted to have broadened the disparity and also had an impact on many children's mental health. Schools had faced several challenges.

Following queries from Members of the Commission, the following responses were provided:

- To clarify certain aspects, it was agreed that the task group report would be circulated to Members of the Commission.
- Officers clarified the reasons/ evidence as to why these specific groups had been identified as underachieving. However, it was further expressed that the work being carried out was for the benefit of all children who were suffering disadvantages in Leicester City schools.
- The Principal Education Officer noted that data about groups of children underachieving was available, and the Commission would be regularly updated with this information.
- It was noted that parental engagement was an important aspect and the service would continue to encourage schools to reach out to parents. Work was already underway in this area from early years, of which Member of the Commission encouraged that going back to the early years age group was very important.
- Work to develop an education strategy for the City had commenced in

January 2020 but had to be paused for several reasons, however, it was reported that this work would be resuming in Autumn 2021. It was emphasised that this work would need to be looked at from a range of perspectives including partners, businesses, children's centres etc to ensure the needs of the City were being met and also to identify what was essential for education in Leicester City.

- One Member reported bullying of specific communities at one of the secondary schools in Leicester (now an academy), it was therefore requested that Ward Members report any specific issues directly to the service officers. In this regard the importance of Members being school governors was also noted.
- In terms of educational attainment, a Member of the Commission requested that the data be looked at to understand what had made the most impact/ difference over the past years. In response, the Officer noted that in 1997 Leicester City was at the bottom of the table, however in the past 25 years Leicester had shown improved outcomes for all children, but further improvements were still to be made.
- The performance outcomes would now look at the longer trends/ picture as well as the past three years to ensure the delivery of a curriculum which was right for Leicester.
- It was reiterated that the plan was to ensure systematic change of things being done periodically and to keep it at the top of the agenda until it was common in education. It would then be crucial to police the work done to ensure the achievements were being made and the environment was favourable for all children.

The Principal of Phoenix Agenda Supplementary School/ a member of the task group was present at the meeting and noted the following:

- Many issues previously highlighted by Bernard Coard in 1970's still exist in terms of African heritage young people in education.
- There was now an impact of exclusions and Black Caribbean boys were five times more likely to be excluded from schools than any other group.
- Institutional racism existed in our society, some of the structures that obstruct the achievement in schools still existed and it was therefore crucial to talk about how to make an impact and inevitably change those structures.
- Schools had a commitment of care to give the available data to the DfE, however this request needed to be influential enough for them to release the figures.
- Communities had concerns about the commitment of Leicester City education to address the disparities that exist in terms of educational achievement of African heritage communities and the white working class and other groups. Hence the reason for the necessity of the race equalities mark within schools, that can provide schools with a framework and structure that they can work towards.
- The Principal of Phoenix Agenda Supplementary School noted the significance of having a curriculum that represented the community it served.
- The task group was a way forward and it was time to address these

issues with consistency that would allow transformation in our schools.

The Chair thanked the Principal Education Officer for all the hard work put into the report.

AGREED:

1. The structures – to widen the diversity of school governors, as individuals and members of various faiths. With the support of the Local authority to support communities to step forward and be governors and diversify that group.
2. That an update be provided from the task group to the Commission for the October meeting.
3. That the task group report be circulated to Members of the Commission.

11. PROVISION OF TAXI FRAMEWORK FOR VULNERABLE PEOPLE

The Strategic Director for Social Care and Education submitted a report to provide the Children, Young People and Education Scrutiny Commission with an update on the provision of taxi journeys for Vulnerable people and the implementation/procurement of a new Framework.

The Head of Commission, Adult Social Care noted the following:

- The purpose of the intended new framework was to both improve quality by implementing a more robust quality assurance process and to seek to bring a level of management/consistency of journey costs.
- There are two work streams in place, one to reduce the reliance on taxi's and the other to re-procure a new framework.
- A previous procurement exercise took place which involved engagement with the existing and new taxi companies prior to the contracts being awarded. However, post award the majority refused to accept the journeys due to price.
- The service had learnt from the 'failure' of the previous procurement exercise and was now seeking to introduce a Dynamic Purchasing System and engagement with all relevant partners, especially the taxi providers themselves was in process to deliver a revised framework that would provide a cost effective taxi service that is safe for all users.
- The procurement exercise would manage to bring consistency to journey rates and ensure a robust quality assurance process. It would also set out to operators that if a fixed rate was used again, there would be no room for negotiation once the tender was advertised.
- Options to enhance the rate for carrying people with more complex needs as part of the journey would be explored.
- Increased work with members throughout the consultation and procurement exercises would take place.

Following Members comments the below responses were provided:

- The presenting Officer agreed to share further detail of the new

framework with the Member of Commission that requested it.

- In terms of the timescale, the service was working towards releasing the opportunity to the market at the end of summer 2021 and was currently engaging with operators. This would give lead in time for contracts to be in place for April 2022, current arrangements had been extended until this date to provide continuity.
- The service was also looking into various options in relation to reducing the use of taxi's including some of the below:
 - Allocating personal transport budget for families i.e. parents/ carers, so they could transport the children themselves in own vehicles/ leasing cars etc.
 - Travelling Independently – travel training offer was being looked at.
 - Central pick-up points and greater use of in-house transport (using taxi's as a latter resort rather than a primary).
- The presenting Officer expressed the importance of quality service standards, in this regard, the service had built into the process a number of opportunities to ensure this. At first point of submission a minimum of quality requirements and evidence from operators would be requested and checked, this would also be followed up. Once the contract was live a dedicated team would be overseeing and operating a contract management framework approach which would require regular checks to ensure quality standards were maintained. In addition, there would be an opportunity for people to raise any concerns, which could be investigated further if necessary.

AGREED:

1. To note the position of the report.
2. That further updates be provided to the Commission in a future meeting once the travel policy has been developed.

12. REVIEW OF HIGH NEEDS BLOCK - SEN SUPPORT FOR PUPILS IN MAINSTREAM

The Head of Service – SEND Support Service provided a verbal update and presentation on the Review of High Needs Block – SEN Support for pupils in mainstream.

The Head of Service, SEND Support Service provided the following information, in addition to the report:

- The High Needs Block was ringfenced and was the total sum available for SEND Support in Leicester City. As a result of increased costs since Element 3 top-up was introduced, the Council were looking at how funds can be used more efficiently.
- The aim was to ensure every child and young people with SEND had the right opportunities and access to support their needs and improve outcomes.
- An engagement process was currently taking place with schools and other partners to gather views and feedback.

- A formal consultation would then take place and Officers would come back to the Commission with regular updates.
- Top-Up Funding was explained in detail – which was noted as the mechanism which schools receive top up funds.
- Leicester City provided top up funding for pupils with an EHCP (statutory) but also had an additional mechanism for funding pupils at SEND Support (discretionary). Funding was allocated to schools in two parts: Banding Top-Up and Notional Top-Up. One of the concerns, was that some schools with similar numbers of children were receiving a larger sum of notional top-up funding than other schools. The service would be consulting on possible ways to ensure a fair and accountable distribution of funding to schools.
- Next Steps would be:
 - Informal Engagement – April 2021 – July 2021
 - Formal Consultation – Autumn 2021
 - Changes to be implemented – April 2022
- It was further noted that children achieved better in mainstream school settings rather than in behavioural type schools and therefore a larger piece of work around ‘inclusivity’ would be launched.

The presenting Officers further clarified details and responded to comments from Members of the Commission:

- Following a members query, it was noted that the Council had to use reserves in the past for deficits, if there were no more reserves and the spend was over, a recovery plan would most likely take place with the Department for Education (DfE).
- Different options for the spend reduction / more equal fund distribution were explored including taking away notional top-ups, capping the notional top-up budget or even freezing the amount per child. However, the presenting officer confirmed that feedback from the consultation process was important before suggesting any of the above.

AGREED:

1. To note the position of the report at this stage
2. That further information on the engagement process be brought to a future Commission meeting.

13. NATIONAL REVIEW OF CHILDREN'S SOCIAL CARE

The Chair announced that this item would be deferred to a future meeting of the Children, Young People and Education Scrutiny Commission.

14. UPDATE ON IMPROVEMENT PROGRESS

The Chair announced that this item would be deferred to a future meeting of the Children, Young People and Education Scrutiny Commission.

15. JOINT SPECIAL EDUCATION NEEDS AND DISABILITIES COMMISSIONING STRATEGY

The Chair announced that this item would be deferred to a future meeting of the Children, Young People and Education Scrutiny Commission.

16. WORK PROGRAMME

This item was deferred to the next meeting.

17. ANY OTHER URGENT BUSINESS

The Director for Adult Social Care and Commissioning provided a verbal update on the SEND local area re-visit. It was noted that a re-visit took place 5 and 7 May 2021, Ofsted noted that the Council was now compliant in 4 of the 5 key domains and the robust plans were in place for the area 5, but they now needed to be accelerated. This was anticipated for the next six months.

It was noted that information slides regarding the Care review were available at Members requests.

The SEN team were thanked for their immense work and contribution.

The Deputy City Mayor - Social Care and Anti-Poverty noted that presentation slides were available for the care review or a session could be organised to go through the findings, at Members requests.

18. CLOSE OF MEETING

The meeting closed at 8.09pm.



Annual Report of the Independent Reviewing Officers Service 2019/2020

For consideration by:
Children, Young People and Education Scrutiny Commission

Date: 2 September 2021

Lead director: Caroline Tote

Useful information

■ Ward(s) affected: ALL

■ Report author: Julie Jordan, Service Manager, Childrens Safeguarding and Quality Assurance Unit and

Teo Bot, Head of Service, Childrens Safeguarding and Quality Assurance Unit

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The executive decision-making process

| Stage | 1 “Policy development” <small>Private meeting</small> | 2 “Defining our approach” <small>Private meeting</small> | 3 “Giving notice” <small>Public</small> | 4 “Announcing the decision” <small>Private/Public meeting</small> |
|-----------------------------|--|--|---|---|
| What happens | Initial briefing of City Mayor, Deputy or Assistant Mayor/s or Cabinet about new policy or decision that is needed | Officers draw up options paper for City Mayor etc. | We give 5 clear days’ notice of our decision | We let you know what our decision is and seek final comments questions from press, public, other Councillors |
| Where you can find out more | Informal notes Briefing documents Forward Plan Scrutiny may start to help develop the idea | Agenda, report, minutes Forward Plan Scrutiny may start to define our approach | Agenda, report Forward Plan | Decision record Press release Forward Plan Scrutiny may start to ask for a “pause” of the decision or to make sure our decision works as we said it would. |

“Key decisions” are defined as:

An executive decision which is likely: -

- (a) to result in the Council incurring expenditure which is, or the making of savings which are significant having regard to the Council’s budget for the service or function to which the decision relates; or
- (b) to be significant in terms of its effects on communities living or working in an area comprising on or more Wards in the City.

Expenditure or savings will be regarded as being significant if: -

- (a1) in the case of revenue the expenditure/savings are outside the approved revenue budget and are greater than £250,000
- (a2) in the case of capital, the capital expenditure/ savings are £1,000,000 or more.

Not all decisions to be taken by the Cabinet will be key decisions

1. Decision Summary:

Members and the City Mayor to note the work and activities undertaken by Leicester City's Independent Reviewing Officers Service.

The Independent Reviewing Officers' Service operates within the context of Leicester City Council being the 'Corporate Parent' for all of the children and young people in its care.

As Corporate Parents, the Council's ambition is not merely limited to ensuring that children and young people in care are safe and their welfare promoted, but they achieve their possible outcomes.

In order for the aspirations and expectations for children who experience our care to be realized, it is important for the Corporate Parenting Board (responsible for achieving them) to receive regular reports setting out progress. The annual Independent Reviewing Officer (IRO) report is part of that process.

As a service, we believe that transparent challenge and a collaborative approach across the Council and its partners, are more effective in improving the experiences and the outcomes for children in our care. Therefore, this report is aimed to provide opportunities for reflection and potentially influence/ inform future plans of actions and development of services across the Council.

In addition, the Independent Reviewing (IRO) Service for looked after children is required in accordance with the Children and Young Person's Act 2008 and subsequent statutory guidance published by the Department for Children Schools and Families in 2010 as set out in [The IRO Handbook](#).

Following presentation to the responsible Leicester City Council's Director for Children Services, Lead Member for Children and the Corporate Parenting Board, the report will be placed on the Council's website as a publicly accessible document

2. Why it is needed:

The report provides:

- an overview of Leicester City's children looked after population
- a summary of the Local authority's and IROs activities in the context of the 2019/2020 performance information;
- an overview of the participation of children and young people

The report notes the significant improvements made by the service, the Local Authority and partners in the period as follows:

- significant increase in IROs' oversight leading to better grip and challenge around progression of care plans
- continuing positive impact of the Edge of Care Services leading to successful pre-proceedings interventions and less children in care

- increased number of Special Guardianship Orders leading to children achieving permanency outside the care system.
- fully implemented offer of advocacy for our children looked after in meetings
- new developments in safeguarding children through robust and timely Foster Care Reviews and an increase in Independent Visitors

Areas for further focus:

- the partnership response to the health and educational needs and outcomes of our looked after children;
- the continuing development of the Signs of Safety, Stability Success and Wellbeing model for our LAC
- implementation of the Care Leavers' Action Plan & Transitions Strategy
- implementation of the sufficiency strategy
- targeted IRO focus on the most vulnerable children in and leaving care
- consistent high-quality child centred LAC/Pathway Reviews leading to improved outcomes for our children and young people

3. Options

To agree the Annual Independent Reviewing Officers Report for 2019- 20.
To note the actions within the report

4. Tell us how this issue has been externally scrutinised as well as internally?

IRO activities are being scrutinised as part of the OFSTED Inspection framework and part of LCC internal Corporate Parenting Board.

5. Financial, legal and other implications

5.1 Financial implications

There are no identified financial implications
Martin Judson, Head of Finance 0116 4544101

5.2 Legal implications

There are no direct legal implications arising from the contents of this report.
Pretty Patel, Head of Law- Social Care & Safeguarding Tel: 0116 454 1457

5.3 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

N/A

6. Background information and other papers:

Appendix A - IRO Service Annual Report 2020-2021

7. Is this a confidential report (if so, please indicated the reasons and state why it is not in the public interest to be dealt with publicly)?

No

8. Is this a “key decision”?

no

INDEPENDENT REVIEWING OFFICERS SERVICE

I R O

Annual Report 2020



Every picture paints
a life story



1. Introduction and Purpose of the Annual Report

The Independent Reviewing Officers' Service operates within the context of Leicester City Council being the 'Corporate Parent' for all the children and young people in its care. As Corporate Parents, the Council's ambition is not merely limited to ensuring that children and young people in care are safe and their welfare promoted, but they achieve their possible outcomes.

For the aspirations and expectations for children who experience our care to be realized, it is important for the Corporate Parenting Board (responsible for achieving them) to receive regular reports setting out progress. The annual Independent Reviewing Officer (IRO) report is part of that process.

As a service, we believe that transparent challenge and a collaborative approach across the Council and its partners, are more effective in improving the experiences and the outcomes for children in our care. Therefore, this report is aimed to provide opportunities for reflection and potentially influence/ inform future of actions and development of services across the Council.

2. Strategic aims and principles for Leicester City's looked after children – our aspirations for our children

The Local Authority has high standards for how we want our children to be cared for, as such there are key principles that underpin all our work:

- Being passionate advocates for children, young people and families
- Being respectful, compassionate, able to evidence relationship-based practice
- Honouring / valuing strengths and difference
- Having a shared understanding of the child's story
- Working in partnership with families, networks and colleagues
- Keeping families together wherever safe and practical to do so; where it is not, promoting permanency, identity connections, and relationships

These have been incorporated in the Pledge to the children in our care, the Leicester's strengths-based practice shared goal:

'Supporting children, young people and families to be safe, be independent, be ambitious for themselves and live the best life they can'

3. Independent Reviewing Officers - Legal context

The appointment of an Independent Reviewing Officer (IRO) for a child or young person in the care of the Local Authority is a legal requirement under s.118 of the Adoption and Children Act 2002. Leicester City's IRO Service is part of the wider Safeguarding Unit and Quality Assurance Service. The Service is fully independent with the IROs having no involvement with the preparation of children's care plans, the operational decisions and management of cases or have any control over resources allocated to a child.

In summary, the statutory responsibilities attached to the IROs are defined by the IRO Handbook (2010) with main focus on:

- promoting the voice of the looked after children, their participation and understating of their situations;
- scrutinizing and ensuring that care plans for looked after children are well informed by assessments and meet their holistic needs;
- monitoring the activity of the local authority as a corporate parent (further details of children's demographics and Leicester City's key performance indicators are available in **Appendix 1**).

These three areas will be further explored later on in the report.

4. Profile of the IRO Service – Who we are

During the reporting period, there has been a slight change in the IRO service personnel, with three more staff members joining the team on a permanent basis. The service comprises nine permanent IROs, five of the teamwork full time and four part time, providing a full time equivalent 7.8 posts. There are 8 females (1 British Asian, 5 White British, 1 mixed heritage) and 1 male (White British).

All IROs working for the Service are qualified Social Workers registered with Social Work England and subjected to regular Disclosure and Barring enhanced checks. All IROs have relevant and appropriate skills, bringing to the role specialist knowledge and experience from various areas of children's social care practice. All IROS have substantial experience of effective direct work with children and young people.

Through the year, the service has had consistent leadership from two Service Managers who work part time and cover the whole of the service. The post holders are qualified Social Workers, registered with Social Work England and have been subject to Disclosure and Barring Service enhanced checks. The Service Managers ensure there is casework oversight, professional advice and learning, management support and development for each IRO. This

includes monthly supervision sessions, team & peer meetings and access to appropriate training and research materials.

The IRO Service managers are members and attend the East Midlands IRO managers Regional network on quarterly basis. These meetings provide opportunities for professional network development, peer-support and sector-led improvement.

We are committed to ensuring our practice standards are high by providing our IROs with continuous opportunities for professional development. The Local Authority has invested in the implementation of the Signs of Safety practice framework across Children Social Care and Early Help Division. This is a strength-based approach and further details around the ethos and principles of the framework are available on <https://www.leicester.gov.uk/schools-and-learning/support-for-children-and-young-people/early-help/signs-of-safety/>. The IROs become practice leads, implementing the model within our current practice and being champions for social workers/other practitioners to embrace and contribute to the expectations of the Review - building on children's care plans to the highest standard as our overall goal. The framework has brought significant changes in the way LAC Reviews are being held, with more measurable engagement from children and young people and more focus on their lived experiences, networks, wishes and feelings.

5. Our core commitments to children and young people – key roles of the IRO

2020/2021 has been an unprecedented year due to the Covid 19 pandemic leading to many changes for the children, young people families and carers we work with, as well as changes in practice and ways of working for the team and partners. As expected, arrangements have been fluid and dynamic as we adjusted to these unusual times. Practice Guidance and Risk Assessments were developed and amended throughout the year to support safety for all and in line with government and local guidance. (The government published additional materials and information under Coronavirus (COVID-19): Guidance for Children's Social Care Services <https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-for-childrens-social-care-services/>)

In line with the national 'stay at home' guidance, the teams' office base closed in March 2020 with IROs and colleagues/partners being home-based. The service adapted quickly, moving to a model of virtual meetings and visits taking place mainly via Skype and MS Teams. This transition has been quite smooth and led to a significant increase in the attendance to the reviews.

The extended lockdown in Leicester City also impacted upon the ways in which the IRO service has functioned throughout 2020-21 with virtual meetings and visits continuing through much of the year. IROs rose to the challenge and embraced new ways of working, while supporting each other as a peer group. In addition, we worked in partnership with our colleagues in social care and partner agency colleagues to adapt our practice to provide child and family orientated meetings. In particular, IROs worked sensitively with the foster care service when

sadly a number of carers became ill through the pandemic leading to an impact for a number of children and foster care families.

In 2020-21 the average caseload of an IRO was 78 children per FTE. The IRO Handbook notes the case load size for an IRO should be between 50 -70 cases per FTE. However, the size of caseloads alone does not indicate the overall workload for each IRO as individual roles and responsibilities vary depending on the case complexities and the stage of the child's journey.

The IRO Service Managers oversee all new children entering and exiting care ensuring:

- timely allocation to an IRO, alongside allowing for a thoughtful allocation 'match' between the child and the IRO.
- a clear oversight of any emerging issues pertaining to the circumstances of new looked after children.
- ensuring safe discharge from care arrangements at any stage of their journey

In 2020-21 the IRO Service chaired 1544 LAC Review meetings, a decrease of 149 meetings from the previous period, which has continued to reflect the overall reduction of children in our care with either less children coming into care or left care by a range of orders, turning 18 years of age or by other means

Statutory LAC Review meetings for our children have been timely, with strong service performance of 99% of meetings being held within timescales throughout the year, which is an increase in % in time by 3% from last year. Of the 1% of meetings (12) which were not held in time, an analysis of the reasons behind this relates to unforeseen IROs' absences, awaiting the finalising of care plans where specialist assessments were outstanding and the early impact of COVID 19. Meetings were rebooked within a month.

It is important to note that the strong performance relating to the timeliness of Reviews has been achieved through partnership working with Leicester City Council's operational teams (Social Work, Fostering, Residential and Adoption Services etc) and other statutory, and targeted community agencies. Again, throughout this year, there has been a continued improved partner contribution and commitment within the Childrens Reviews and within the Corporate Parenting Board.

5.1 Promoting the voice of the looked after children, their participation and understating of their situations

The IRO Service is committed to ensuring that our children and young people have opportunities for their experiences, views, wishes and feelings to be shared and included in the development and implementation of their care plans.

Participation and coproduction figures for children and young people taking part in their Reviews have been excellent, with a perfect 100 % involvement/ collaboration in their reviewing process. This great performance has been achieved due to a number of existing mechanisms facilitated by the Ros ' flexibility and to talk with children/young people at different times of the day, be in touch prior to their meeting or after as part of their review process. Additionally, the improvement in children's engagement is due to:

- various means of use of technology being available to children throughout COVID 19 due to face to face visits being limited due to lockdown within national and local arrangements
- implementation of using the bespoke LAC Review Consultation Papers for three age bands of children/young people with positive comments received.
- IROs ensured children and young people have access to a trusting adult advocate who would be able to represent their views. If one is not identified within the child's social network, IROs offer their support or make referrals on the child's behalf to Leicester City Councils Advocacy service.
- opportunities for 16+ young people to 'lead' their own review meetings (with the assistance of the IRO). In this year we have worked in co-operation with our Participation Service colleagues to progress this initiative to support young peoples increased engagement, confidence, and negotiation skills. there has been an increase in Independent Visitors (IV's) for LAC and more timely referrals and matches made, with IVs undertaking some creative ways of holding virtual meetings and dropping activities at the door for children/young people to complete such as a 'bake off' challenge In the previous year the Independent Visitor Co-Ordinator jointly worked with an IRO to develop the support for LAC in their LAC Reviews by their IV .In this year there has been an increase of IVs joining the children /young people's LAC Reviews with their consent and ensuring their voice is heard.
- development of the participation framework for engaging children and young people to be empowered to have a voice and influence in decisions made with/about them known as the *LUNDY model

It is important to acknowledge the Local Authority's commitment to put the voice and participation of children and families at the heart of everything we do. This commitment has been formulated via the new Participation strategy, launch in October 2021. This pioneered approach based on the Lundy Model of participation is already well embedded within the work of the IROs.



We would like to share an example of feedback received from a Young person's advocate following a Review meeting. This was a review chaired by a young person with the support of the IRO:

“The young person held her placement and all the professionals to account and conducted the meeting in a welcoming manner. She was clear and concise; she was totally amazing and natural in her role as a chair.

The IRO and social worker enabled and created the environment to allow K to do this, K was able to share her feelings as well as chair her meeting, even though difficult conversations needed to take place. The IRO/SW managed those conversations in a sensitive manner empowering the young person to reflect on experiences, look at solutions and create a plan in partnership with K. Thank you, you really have brightened up my day by seeing such great practice.” (Voice of an advocate)

Another source for learning and reflection is the formal complaints received from children and families in relation to the IROs service delivery. Within the period only one statutory complaint was received from a parent in relation to communication from an IRO, this was investigated at Stage 1 and resolved satisfactorily for the parent. Lessons were learnt from this incident. We believe the low number of complaints is strongly linked to our ways of working and communicating with all parties involved, summarised in the next section of the report.

5.2 Scrutinizing and ensuring that care plans for looked after children are well informed by assessments and meet their holistic needs

Another important aspect of the IRO role relates to scrutinizing and ensuring that care plans for looked after children are well informed by assessments and meet their holistic needs. To strengthen the IRO oversight, we have developed and utilise a comprehensive action plan with 4 focused areas as follows:

- ❖ *Planning and preparation for LAC reviews* – this included quality assurance activities to ensure updated assessments/ reports were timely and shared with children, families, careers and the IRO prior to the meetings.

Within the period, the IROs have continued to drive and promote our culture around respectful practice by redefining and clearly articulating the expectations for Looked After Children’s Reviews.

To ensure good preparation for Reviews, a pre-meeting oversight by the IRO occurs two days prior to all meetings. This activity provides the opportunity for the IROs to have discussions with the children and all relevant parties, review the existing reports and care plan, and to ensure these had been appropriately shared with others (children, foster carers, family members etc).

Due to this advanced preparation the quality and duration of the LAC Reviews have continued to improve, with more targeted and solution focused discussions leading to better informed recommendations and decisions made in relation to the children.

The period of COVID 19 had both benefits and challenges in parents being able to join online meetings, however IROs and SWs endeavoured to gain their views.

- In this period 77% of parents were able to give a meaningful view to the meeting. While this is a reduction from the last period (by 5%), an analysis of the reasons for the parental non-attendance indicate some parents were unable to attend Reviews due to technological issues.
- 52% of parents benefited for 1-2-1 discussions with the IROs prior to their meetings. Some of the parents declined to have these prior consultations and attended the main meetings.

There has been relatively consistent compliance in relation to Social Work reports being available to the Review meetings, however, there has been a downturn to 77% (9% reduction from the previous year). An in-depth look at this issue identified the drop in performance was linked to the complications of embedding a new report processes in the electronic system; with the support from the SW teams and IT department, these are now rectified.

IRO oversight in between the meetings

In addition to scrutinising the children's care plans at statutory Reviews, IROs have a responsibility to monitor the children's progress between meetings. To achieve this, we have an internal RAG rating system (Red, Amber, Green) to assist our IROs in identifying and ensuring appropriate levels of challenge and oversight are applied to children's situations. The expected standard is that as a minimum each child's records can reflect IRO oversights in any quarter period. The primary aim of this system is to ensure IROs focus on the most vulnerable children and that critical tasks/ actions are completed in a timely way for the benefits of children.

Similarly, to the pre-meeting oversight, this tracking system has led to IROs:

- having a better grip and understanding of their caseloads.
- ability to identify cases that require closer monitoring and actions.
- improving communication between the IRO Service and SWs, Foster carers, other professionals.
- experiencing a decrease in the number of formal escalations that need to be actioned.

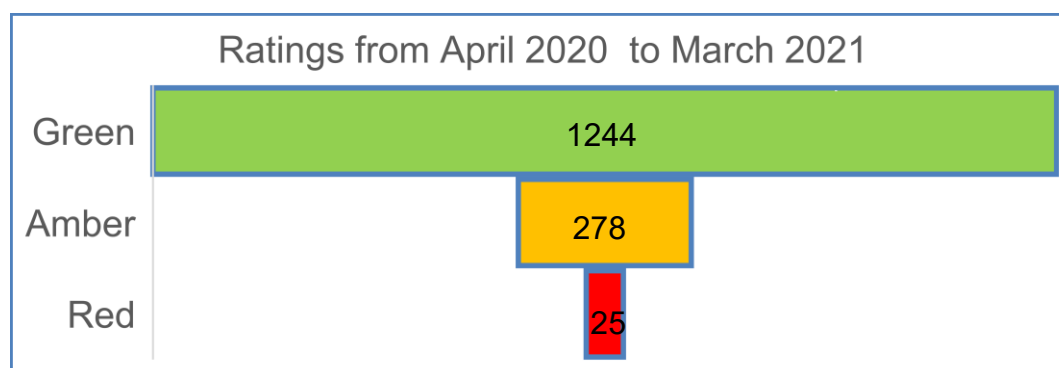
The RAG criteria are agreed following a Review, with clear actions/timescales noted for the IRO to track as follows.

Red: Time-critical elements of the care plan are becoming subject to drift or delay or where there are significant safeguarding issues, and this is likely to have an impact on outcomes for the child. These actions will subsequently be subject to IRO review and oversight from an immediate action up to 4 weeks. The IRO has options to set an earlier date for a review, require an up-date from the social worker at regular intervals, and/or monitor activity on the child's file. They may also complete an escalation and where the concern includes the manager's oversight of the case, they will alert this to the Service Manager or Head of Service.

Amber: Where there is emerging evidence of potential drift or delay or where less critical elements of the care plan are not being progressed, the IRO may require an interim up-date from the relevant member of staff, and/or check the child's records up to 5 -8 weeks from the Review meeting.

Green: The care plan for the child in the main progresses appropriately. The IRO completes a 'Desktop mid-way review' and undertakes conversations with SWs, children, carers etc to understand their view of how their care /pathway plan is progressing

The table below shows ratings made in the last year with 1,244 cases rated green, a small increase from last period, with 278 Amber cases and 25 Red rated cases having decreases in this period. Where Childrens cases have required formal/informal escalations the operational services and partner agencies have responded and acted upon the IROs' recommendations in a timely way.



IROs oversight (between LAC Reviews) in this period has significantly increased, with a total of 3,604 case records being added on children's records, indicating the IROs' footprint and oversight on cases. This represents 718 more recordings than the previous period, leading to less formal escalations occurring due to the amount of communication with Social Workers/Managers and informal tracking.

- ❖ IROs having bespoke 'In Contact Plans' with the children they are responsible for to enable better relationships

The principles of 'In-contact Plan' is an agreement between the child and his/her IRO of how IROs will keep in touch with them in between or at their Reviews. This has been completed by meeting face to face, phone, text, letter or skype etc.

- ❖ Promoting and facilitating the Local Authority's Advocacy offer

The LA's independent advocacy offer aims to support children and young people to express their views, wishes and feelings at key points of involvement within statutory services.

The advocacy service is delivered via stepchildren's Rights and Participation Service through the appointment of Independent Advocates. The IROs role has been essential in continuing to embed the culture of advocacy across social care. All children who have not engaged with the Review process (by any means) have been considered for a referral to the Advocacy Service by their IRO.

Between April 1st, 2020 and 31st March 2021, the Participation, Engagement and Childrens Rights Service received more than 86 referrals of advocacy to support young people in their

LAC Reviews/ Childrens Rights support. The overall feedback from young people regarding the input of the Advocates is highly positive:

A young person's perspective:

"During this difficult and stressful but amazing period of my life growing my daughter in my stomach I have to say that my advocate has helped me a lot. She has supported me and guided me in ways I never thought she could. She has been there every step of the way and helped me be heard by those who I felt never listened. Working with her has made me more optimistic and made me work harder and better towards a better future for me and my daughter. I want her to carry on working with me and assisting me during my assessment and meetings so that I can remain confident that my side is being put across. I appreciate her help and her hard work, and it is I believe beneficial for us to remain in contact."

Fostering Independent Reviewing Officer: (FIRO)

The FIRO is managed by the Service Manager within the Child Protection Independent Chairs and the LADO services in the SQUA. The role is for the Independent Chair to review the foster carer/home environment to required standards on an annual basis and make recommendations in their suitability to continue to foster as well as their learning and development. This arrangement has enabled one manager to have an holistic overview and in-depth understanding of any issues/ strengths emerging from both the foster homes reviews process and the LADO investigations.

Of the cohort of foster care reviews that were required to be held in 2020- 2021 95% (255) were held in timescales. This is a significant improvement from the previous period. The Reviews that were not able to go ahead the reasons largely relate to illness of the carer/ carers being subject to the LADO process etc. The service has held learning events around improving the support and development of foster carers and in keeping children safe.

Independent Visitors Scheme for LAC:

The service is located within the IRO Service. This enables the IROs to quickly identify with children, networks, social workers, carers those young people where they may need an Independent Visitor (IV) as a special person to develop a relationship with outside of their foster family or residential placement (in particular where they may have little to no contact with their birth family). Independent Visitors core role is to listen, befriend and advise children and young people by taking them out to activities of their choice generally monthly and stay in touch in between. This IV also helps to build children's confidence and increase their social skills and sense of belonging. In this year, despite lockdown, 9 new IVs were recruited and matched with children by the end of March 2021. We have increased the pool of volunteers in the year with presently at 29 successful matches.

5.3 Monitoring the activity of the local authority as a corporate parent

Further details around children looked after demographics and performance of the Local Authority as Corporate Parents are available in Appendix 1.

The role of the IRO Service is to monitor the activity of the Local Authority and partners, to quality assure, acknowledge positive practice, and challenge any areas of practice deficits. Where IRO escalations are made, they need to be meaningful, effective and improve the quality of services provided to children and young people.

The IRO SM has attended the Corporate Parent Forum virtually through the year on occasions and has had oversight of the performance book and linking to the 5 subgroups where appropriate. The IRO SMs will continue to have oversight of the Forums work/performance. An Independent Visitor joined the 'Active Citizenship' subgroup in this year to give a perspective of how children and young people can take part and achieve life skills and friendships that are enduring. A summary of Corporate Parenting data is summarized as follows:

Education, Employment, Training: The COVID 19 period brought many challenges to the education of our children and young people, not least that there were no exams/tests. While carers, Virtual School, parents etc supported on line sessions, some of our vulnerable children and children of keyworkers were able to attend school on occasions. Through this period IROs have continued to ensure that the children's educational needs including 16 + young people had been considered during their Review meetings and when specific provisions have been required to cater for individual needs, these were discussed with the Virtual School, relevant schools/colleges to promote rapid solutions. The impact for children /young people's educational outcomes will be monitored throughout the next year and considered within the data that will be made available locally and from the DFE in time

Where young people are not engaging, IROs have had discussions with young people to further explore and understand any barriers to support them in overcoming these. Appendix 1 gives further overview of the progress of EET/NEET (In/Not in education/employment and training)

Health: Up to date health assessments have increased significantly, while dentist, initial and review assessments required closer monitoring. An IRO Service Manager undertook a joint Audit with our Health colleagues focusing on timeliness and quality of provision. In addition, in this period one escalation was made to a senior health colleague regarding a child's health review, this was responded to swiftly and a resolution made

Safeguarding: IROs ensure children's safety is given paramount consideration alongside the team around the child. In this period Child Criminal Exploitation/Child Sexual Exploitation meetings have become independently chaired from within the SQUA. The team continue to also chair meetings related to Harmful Sexual Behavior from young people to young people.

Positive Activities: IROs monitoring forms note that 99% of children have access and opportunities to enjoy some form of leisure activity appropriate to their age, with 98% of children's cultural needs being met, this is a consistent area of positive practice. This is a slight increase from the previous period and is reflective of the time taken and opportunities available to engage children through the pandemic to support their social, physical, and mental wellbeing.

Formal Escalations:

One of the key functions of the IRO is to resolve problems arising out of the care planning process. The IRO Service has a formal Escalation' policy as part of their statutory function and have a set criterion for raising concerns (that includes all statutory work and safeguarding requirements that have drifted or not in place according to the needs of the child). Electronic forms are within our recording system (Liquid Logic) that enable the issues to be escalated and tracked and visible to all.

In the period, the IRO Service generated 11 formal escalations, concerning 11 children with 22 areas of concern. These escalations have all been resolved at Social Worker/Manager level without any concerns being raised to Director or externally to CAFCASS. This is a decrease from the previous period however there have been less children and young people in the system and as noted greater IRO Oversight in the period.

IROs assist Social Workers and other practitioners to achieve their best practice through regular feedback and through their 'critical friend' role, including auditing of children's lived experiences. Generally these have related to the IRO role being a 'champion' for bringing the Signs of Safety /Success approach to their practice with children /families and where there is a strong network that supports the child through challenges and successes for their future adult life.

6. Other achievements of 2020-21

- IROs have contributed to the generic Children's Early Help, Social Care and Education Division's Quality Assurance Framework through completion of monthly thematic audits and taking part in various QA training. Learnings from audits and various reviews are integral part of IROs professional developments;
- The IRO service contributes to the induction and learning programmes for newly qualified and qualified social workers, to emphasise the role of the IRO in care planning and what makes a good review for children and young people.
- The IRO Service has continued to enhance and embed our practice standards while recognising some of the limitations in the last year. We will remain committed to our ethos to put the children and young people first, ensuring their experiences, views and feelings are at the heart of their care plans. Having a stable team means we continue to build on our ability to monitor the progress of plans in between meetings, by applying our RAG rating system, Mid-way Review process, IRO Oversight and using the Sops

(Stability and Success) model. The service also takes pride in having the additional benefit of advocates, Independent Visitors, and Independent Foster

7. Next Steps

This report and additional documentation evidences the progress and steps that Leicester City Council, the IRO Service and its partners, have taken over this unprecedented time, to continue to progress and improve the quality of care provided to our children looked after. It summaries the collective challenges we have faced, but also the commitment to continually improve our practice. As a result of these challenges, we have adapted our practice where possible to find new solutions and ways of working to meet the needs of children and families in the context of a post global pandemic that we will embed where appropriate in our work over the next year.

For the next period we will:

- ✚ continue to increase the opportunities for young people age 16+ to chair their own reviews, where children & young people actively choose not to chair their review, we will support them to effectively participate and influence their meeting
- ✚ seek post review feedback, separate to pre-meeting consultation documents, to gather more varied information of children, young people, parents, and professionals' views to inform how well we are doing and what more we can do
- ✚ continue to promote the stability and success of children and young people through their care plans and Looked After Reviews, ensuring safety planning is established and effective and there be rigorous in ensuring a network is well established
- ✚ review new ways of working and measure the success of undertaking Reviews in different ways for children and young people as we have learnt t in this year
- ✚ align our work to the LA's 3-year plan that sets out the priorities for Social Care and Early Help Services where we have key activity to achieve.

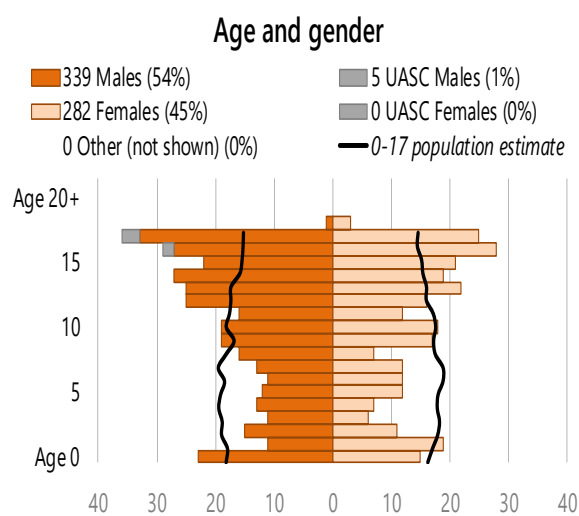
Julie Jordan
IRO Service Manager
SQUA

Julia Khoosal
IRO Service Manager
SQUA

APPENDIX 1:

Corporate Parenting Performance 2020 - 21 Demographics and analysis of looked after children and young people

Considering the profiles of our CLA, the charts below provide an overview of their age, gender, ethnic background, legal status, placements and stability of children.



Ethnic background

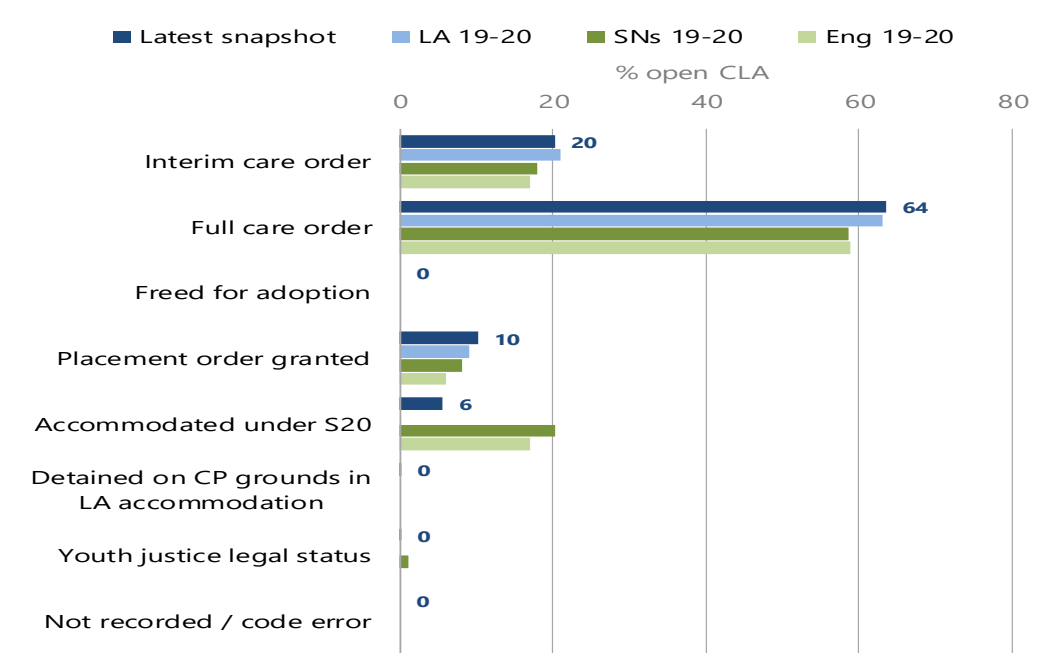
| | All CLA | Not UASC | UASC |
|------------------------|---------|----------|------|
| White | 62% | 63% | 0% |
| Mixed | 19% | 19% | 0% |
| Asian or Asian British | 10% | 9% | 60% |
| Black or black British | 7% | 7% | 20% |
| Other ethnic group | 1% | 1% | 20% |
| Not stated | 1% | 1% | 0% |
| Not recorded | 0% | 0% | 0% |

As in previous years, the number of males in our care continues to be slightly higher than females, and also of the upper age group.

In relation to the diversity and ethnic background, there is no significant change in the period and along with gender and age Leicester City CLA population is broadly comparative with national trends.

The below graph notes that most children are looked after under a Care Order, Section 31 of Children Act 1989 with a slight increase in these orders in the last year. The Local Authority has maintained its practice around rigorous use of Section 20 voluntary accommodation. In the past year, the number of children subject to placement orders (for adoption plans) has again increased. This has been a positive trend year on year.

Comparing legal status of open CLA (snapshot)



Placements

As of March 2021, most of our children were placed in foster care followed by residential care. From the previous year there has been a slightly lower % of children being placed in foster care provision overall. In the same period there has been an increase in placements for children into childrens homes , this generally relates to children being placed for specific therapeutic reasons out of area.

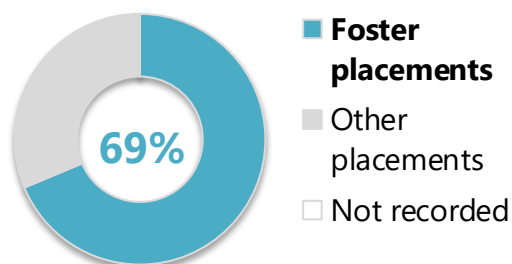
In relation to the location of the placements the majority of our children are placed within Leicester/Leicestershire. There are circumstances whereby children being placed beyond the boundaries of Leicestershire are considered to be in their best interests (for example for those children/young people at risk of sexual exploitation).In this period we undertook an audit of children under 12 years of age placed in our local residential care services as well as external placements to understand their trajectory towards being placed in family care. A range of recommendations were made while also seeing some excellent examples of direct therapeutic work with children and young people that has impacted on their ability to be placed into a foster care family into the near future.

The IRO SMs attend a monthly panel to have oversight of the children/young people who require long term foster care placements.This provides both a tracking and monitoring function as well as reflecting and developing best practice in achieving permanency.

The 16+ Accommodation Strategy continues to provide suitable accommodation for young people who are leaving care or require semi independent provision. Our in house residential services have excellent Ofsted gradings of Good or Outstanding

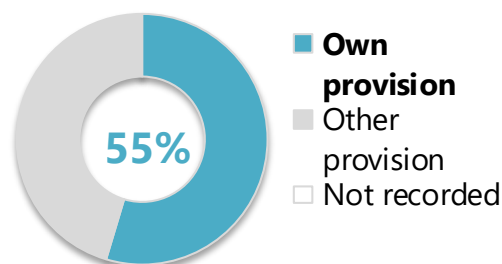
CLA placements by type and provision

Foster placements



| | |
|-------------|-----|
| LA 2019-20 | 77% |
| SNs 2019-20 | 71% |
| Eng 2019-20 | 72% |

Own provision



| | |
|-------------|-----|
| LA 2019-20 | 70% |
| SNs 2019-20 | 42% |
| Eng 2019-20 | 49% |

| Placement type (open CLA) | Own LA | Private | Other | Total |
|----------------------------|------------|------------|-----------|------------|
| Foster placement | 303 | 125 | 2 | 430 |
| Placed for adoption | 14 | 0 | 18 | 32 |
| Placed with parents | 0 | 0 | 46 | 46 |
| Independent living | 1 | 21 | 0 | 22 |
| Residential employment | 0 | 0 | 0 | 0 |
| Residential accommodation | 0 | 6 | 3 | 9 |
| Secure Children's Homes | 0 | 1 | 0 | 1 |
| Children's Homes | 24 | 47 | 0 | 71 |
| Residential Care Home | 0 | 2 | 0 | 2 |
| NHS/Health Trust | 0 | 0 | 3 | 3 |
| Family Centre | 0 | 4 | 0 | 4 |
| Young Offender Institution | 0 | 0 | 1 | 1 |
| Residential school | 0 | 4 | 0 | 4 |
| Other placements | 0 | 1 | 0 | 1 |
| Temporary placement | 0 | 0 | 0 | 0 |
| Total placements | 342 | 211 | 73 | 626 |

Stability is measured by placement moves for children, the lower the figure the more stable children are likely to be. At the end of March 2021 while less children were placed into care through the year, the duration of placements continued to be as stable. This can be attributed to the continued tight grip on matching, achieving permanent placements for children earlier on, the implementation of 'mapping' children's cases under Signs of Safety /Stability to have assured safeguarding and a greater use of 'Placement Support Planning' and 'Disruption Planning' meetings held where pre-planning can take place if a disruption is likely to or has occurred.

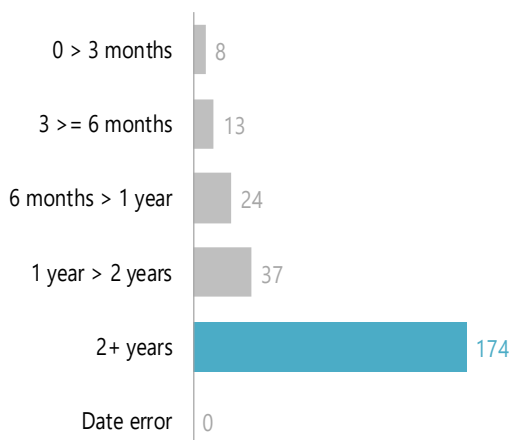
In addition to children in care being 'placed with their parents', there has been an increase in children who were subject to Section 38.6 arrangements and remained living with their parents through the period of assessments authorised by the Court, and of those children being placed at home as part of a transitional plan for revocation of care orders again through the Courts. In total the increase has been of 22 children.

The impact of a full time 'kinship care worker' post has continued to make improvements. This post has enabled less external foster care agency assessments needing to be undertaken thereby focussing on the quality and timeliness of the assessments and placements for children and carers. .

IRO's receive an electronic alert to inform of any emergency unplanned move so they can have immediate oversight with the aim to scrutinise the arrangements being made as being appropriate. Alongside this the IROs will visit/ support children through their In Contact Plan until there is a rearranged meeting usually held within 20 working days.

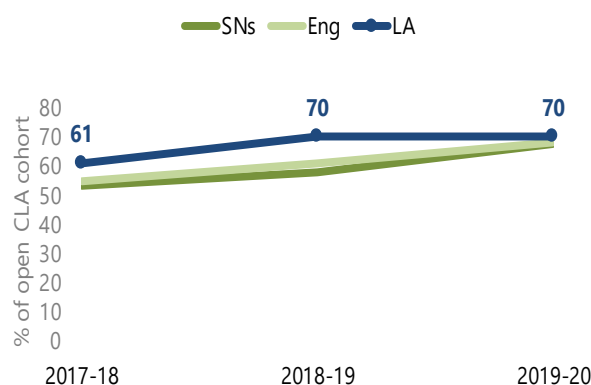
Duration of placements

Duration of latest placement for each current CLA aged under 16 who have been looked after for 2½ years or more



May include "status" changes as well as placements

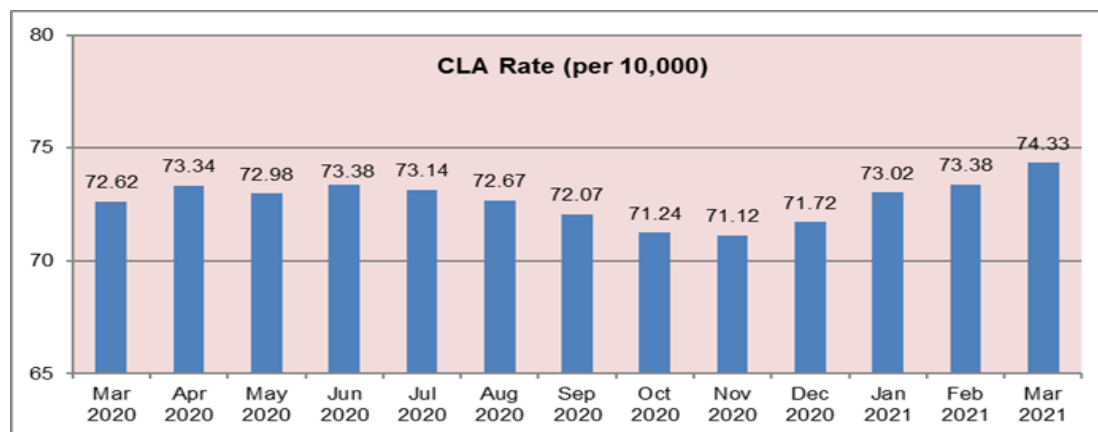
Comparing long term placement stability



Due to limited data in the Annex A dataset, ChAT does not present long-term stability alongside published statistics

Children entering and exiting care

Between April 2020 and March 2021 there were fluctuations in children entering and exiting care. The graph below notes the rate of CLA per 10,000 population of children aged under 18 years in care at that point in the year.

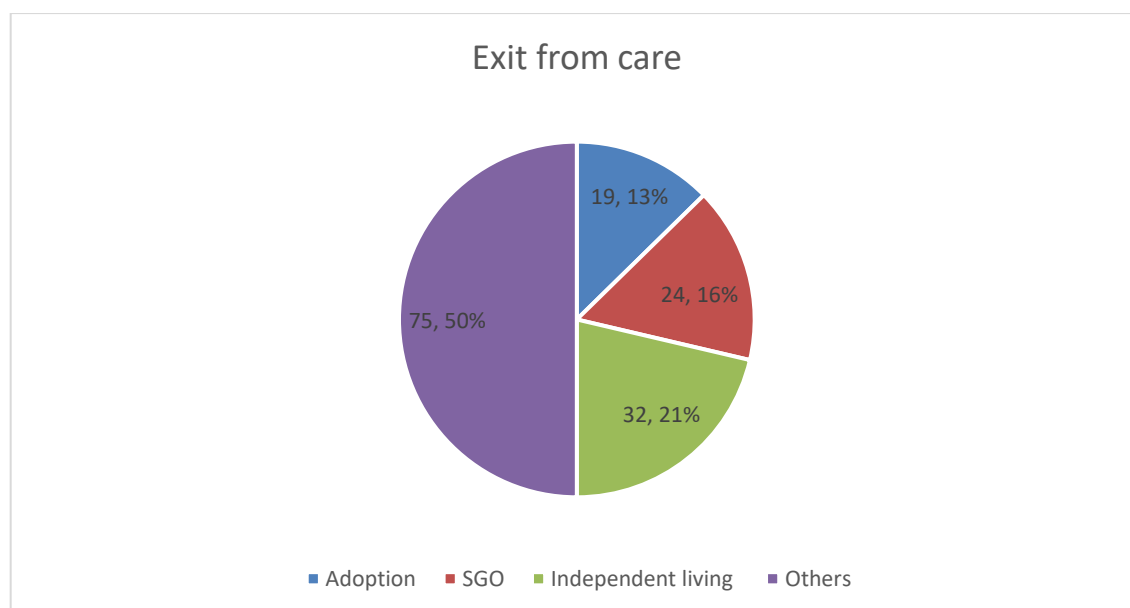


As of March 2021 52 families (71 children) had been subject to Public Law Court Pre-Proceedings, this is a slight reduction of families within the Court process from the last period. The number of children subject to care proceedings fluctuated through the year with the impact of COVID 19, and as children returned to schools for example there were periods of increase in issuing for interim/care orders to the Court. Some delays have been experienced in childrens court care cases being finalised.

While the performance measurement for completion of Court Proceedings within 26 weeks continues to be a challenge for Leicester/Leicestershire Courts there has been an improvement within Leicester City of cases referred to the Courts that have concluded within the above timescales. This is a continuing area of priority for the Local Authorities and Judiciary, with an improvement plan being in place, overseen by the Family Justice Board and Ministry of Justice.

The Local Authority's commitment to strengthen and support children and families through provision of targeted, Edge of Care Services including MST Services and Family Group Conferences continues . The number of children subject to pre-proceedings and care proceedings continues to be managed and tracked by the Case Work Progression Manager, with good liaison with the IRO Service and the operational teams.

There were 150 children who ceased to be looked after in the period, a reduction of 53 children from 2019- 20, however through the year there had been less CLA in the care system . The graph below notes the key exit plans from care in the period.



In 2020 – 21 94 % of young people/care leavers aged 16 – 18 years of age were deemed by the LA to have been placed in suitable accommodation, this is a very slight reduction from the

previous period (1.1%) The COVID pandemic had an impact on the availability of placements on a local and national scale.

Health of Children Looked After

Tracking of performance of the number of children subject to an up to date health assessment when being in care for 12 months or more at the end of March 2021 was 92% This is a consistent picture from the previous period. While there remain challenges in the timeliness of Initial and Review Health Assessments and in dentist examinations these have improved and remain subject to close monitoring via the Corporate Parenting Board.

From previous activity in relation to strengthening the Health Summaries for young people leaving care, the figure for this period is 85.7% completed of 16 -18 year olds have received their health information which is an increase of 11.1 % in the year

The IRO Service Managers liaise with the senior managers of the Strategic Health Board for CLA contributing to the progress of the improvement plan.

A joint audit was undertaken earlier within the year by the Health lead and IRO Service Manager of a small sample of children and young people across the care spectrum in order to understand the strengths /deficits in multiagency practice, alongside the children's experience and outcomes of their health plans.

Education Employment & Training of Children Looked After

Leicester City's Virtual School, under the leadership of the Virtual Headteacher, oversees all the Personal Education Plans (PEPs) of children looked after, from reception class to Year 11. In this period there have been strengths and challenges in relation to educational outcomes.

As of March 2021, 98% of PEPs of school age children are completed which is the same outcome as in the previous year. The completion of PEPs are subject to ongoing analysis and scrutiny from the Virtual Headteacher, IRO service and the Authority.

The Local Authorities data indicates that as at March 2021 post 16 PEPs were completed in 60% of young peoples cases. At the same point 65 % of young people are currently noted as EET, the 35% that are NEET are due to illness, disability, pregnancy/parenting, and other individual reasons. This is getting closer to the LCC Mayoral ambition to achieve 70% of our LAC in EET. There continue to be a range of innovative projects within the Council to support this such as ring fenced posts for care leavers, apprenticeships, with further initiatives being built on such as within the construction industry for care leavers. These young people's circumstances, as well as those young people subject to Education and Health Care Plans & SEND processes are regularly reviewed, led by LCC Education Department, and activity is being focused on this cohort of young people

The IRO service continues to have a crucial role in improving the quality of education received by our children, with provisions in place for all IROs to have access to children's E- PEPs, (& EHCPs) an on-line platform to appraise the most up to date information. The education of CLA is fully explored and discussed within/outside of LAC Reviews and any identified actions are monitored and subject to further review by the IRO.

Appendix 2

7 Minute Briefing – Good Practice Review 3



Minute Briefing – Good Practice Review 3

1

Background

Leicester CSC were granted Interim Care Orders in Dec 17 for 4 siblings (of 5) due to neglect, parental substance use and domestic abuse. 2 girls (aged 6 & 7 at the time) were placed together in foster care. The concerns did not change. Their social worker was a strong advocate for permanency wishing to support their wish for a new family, whilst maintaining connections with the birth family. Placement Orders were granted in July 2018. Extensive family finding took place and the girls moved to their adoptive family in April 2019, with Adoption Orders being granted Feb 21.

The adopters are committed to supporting ongoing contact with birth family and the older siblings have been very involved with providing information, photos and updates to support their sisters' sense of self and understanding of their experiences.

This has been identified as 'good practice' due to permanency through adoption being an unusual outcome for older children.

Why it matters

A Good Practice Review is part of LCC QA framework and is an opportunity to recognise and showcase positive practice.

The purpose of the Review is to:

- Recognise good practice and gather feedback
- Provide opportunities to all for reflection
- Understand what supported the positive practice to occur.
- Share learnings across the division and consider actions to enable future positive practice.

7

Implementing change

Reflect on the findings and discuss the implications for your service/practice.

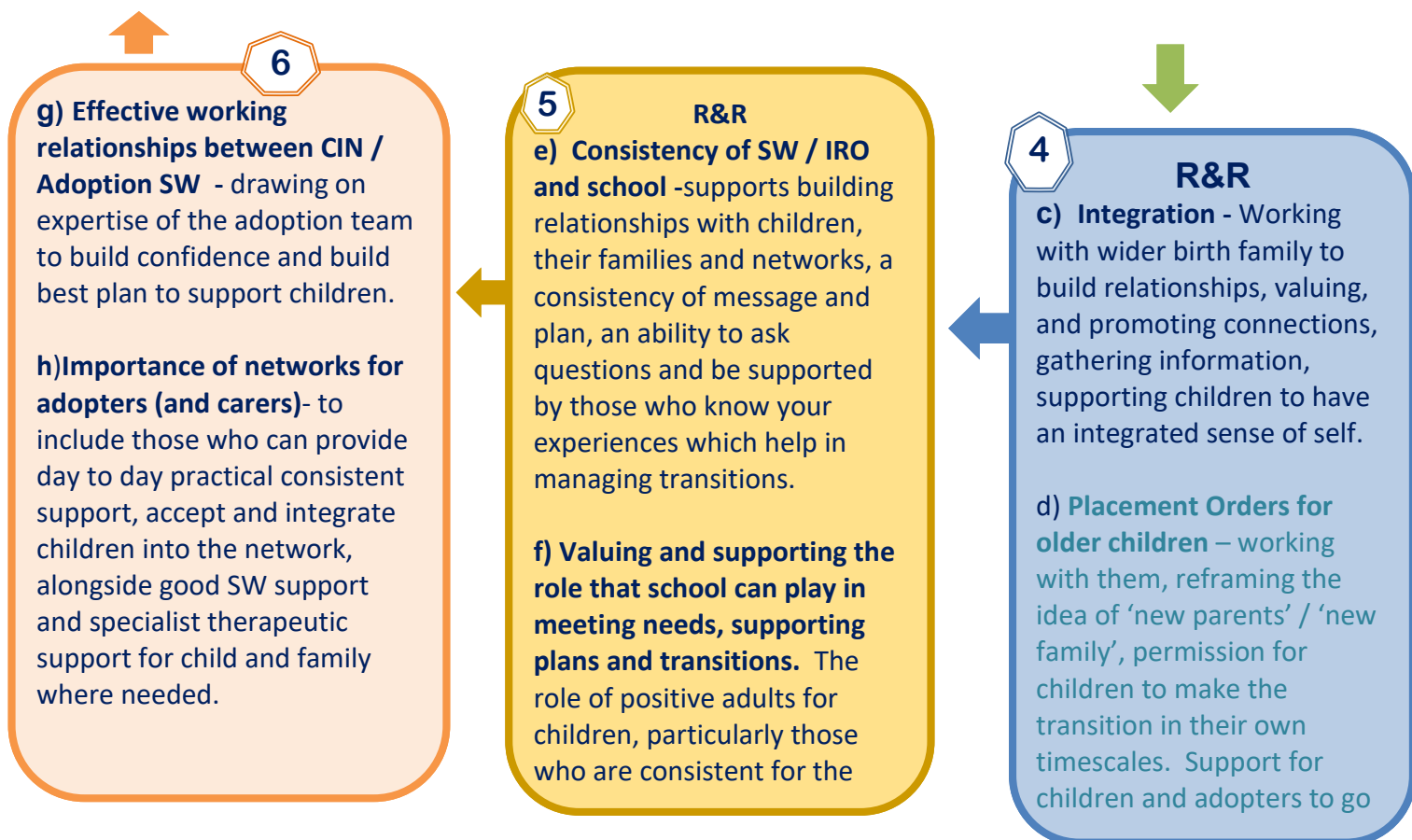
Identify and outline the steps you and your team will take to improve practice in line with the findings and recommendations

Reflections and recommendations (R&R)

3

- a) The importance of direct work, **ongoing conversations with children** about their experiences and their plans and all being prepared and able to do this. Honesty even in uncertainty.
- b) The importance of the **belief in adoption as an option for all who cannot live within their birth family**, if that is what is best for them, understanding the benefits and impact & developing plans to manage the impact.





IRO Service Continuing Priorities for CLA 2021- 24
Review of progress and development Action Plan

| Priority Area | Measurement | Intended Impact for children & families | Further Action 2021-24 |
|--|---|--|--|
| Committed confident and competent workforce | | | |
| Continue to develop and embed Signs of Safety (SOSSS) approach to planning and reviews | <p><i>*All IROs are SoS trained and incorporate principles in their practice</i></p> <p><i>IROs attended a range of SoS workshops some targeted at the role of the IRO as chair of meetings and the progression of the child's care plan</i></p> | Better participation and strengthened relationships, enabling networks to support better outcomes for children & families | <p>Develop evidenced based outcomes for the foster carers contribution to the Review</p> <p>Use the LAs LL recording system to best effect when the SoS methodology is built in the system</p> |
| <p>Ensure children are enabled to participate in meetings that inform their plans which are succinct, contain clear details, actions and timescales</p> <p>IROs and the children they are responsible for have a positive working relationship based on mutual trust and respect</p> <p>Young people are supported and encouraged by their IRO/SW to lead some /part of their Review as their choice</p> | <p><i>Embrace the LUNDY model within our work – this has been implemented by IROs since 2021</i></p> <p><i>Completed the work of the redesign and production of communication material for children/young people's reviews</i></p> <p><i>Some young people have chosen to lead their Review, the LUNDY model provides us with a framework</i></p> | <p>Children feel included and heard, they contribute to plans, feel more empowered and involved in the decisions that are made with them and about them</p> <p>CLA will understand their past and current circumstances through life story and direct 1-1 work</p> <p>Children are comfortable in contacting their IRO and have their contact details</p> <p>Young people will have the opportunity to experience greater sense of empowerment and enhance their skills in negotiation, confidence, respectful challenge .Lundy Model is the</p> | <p>Review the way in which we involve children in their meetings, for IROs to have a greater use of technology such as skype, apps on SMART phone to demonstrate their reach of children & young people and to produce a child friendly version of the IRO Annual Report with children in /leaving care.</p> <p>Lead IRO for participation to discuss with CIC/CEC and pilot preparation workshops for key personnel including young people being peer mentors for other LAC (in progress)</p> |

| Priority Area | Measurement <i>*Update of Progress against measurement of 2018-19</i> | Intended Impact for children & families | Further Action 2021-24 |
|--|---|---|---|
| | | framework for participation & Engagement. | |
| Parents participation in LAC Review process is given greater consideration by their feedback about the service | <i>Parents inform that they are treated with respect, their views are considered, and responses are appropriate to the situation, they have told us what we could do better to support them in circumstances such as when an adoption plan is decided upon We need to prioritise this action again since the lockdown from the pandemic</i> | Parents participation in the network strengthens the plan and outcomes for children/young people where it is appropriate to do so | Discussion with parent participation leads, develop an information sheet that enables parents to understand the review process and their contribution, alongside the opportunity to take a full part in the SoS toolkits pre/during Reviews. |
| Effective Partnerships | | | |
| Key services/agencies fully understand their role in the process and have a shared vision for high aspirations for our children in and leaving care. Transition Services are planned for enabling care /pathway plans to progress without delay | <i>*Agency contributions have increased by attendance at Reviews, reports to Reviews and there is more evidence of robust action planning in care plans via audits RAG rated system in place to track the outcomes for care leavers one month pre leaving care</i> | Childrens outcomes and opportunities will improve as a result of strong and meaningful partnership working Young people are supported into adulthood and to be as independent as they can , making safe choices and a positive contribution to their overall goals & aspirations | Analylsis of the RAG rated system by auditing cases to ensure there is a positive impact for care leavers, and to discuss with professionals (Sws, PAS, Transitional workers) the findings as to how much more we can do to increase timley referrals and pathways are in progress at the right time the young person leaves care |
| Health Improvements Continue to Improve the range of health outcomes to enhance children & young people's overall well being with IROs QA Health plans for our CLA | Timely progression of IHA, RHA, SDQ Health Summaries and care packages of intervention | Health plans reflect the specific needs of each child and young person and young people leave care knowing how to access services at a time they need them. | IRO SM/ lead for Health and Well Being works within the partnership to audit cases to consider the qualitative aspects of children's health care plans |
| Educational Attainment | | | |

| Priority Area | Measurement <i>*Update of Progress against measurement of 2018-19</i> | Intended Impact for children & families | Further Action 2021-24 |
|---|--|---|--|
| Further improve the educational/employment /training outcomes for CLA in Leicester City | All IROs appraise PEPs prior to LAC /Pathway Reviews to ensure appropriate challenge and <i>Continue to promote educational outcomes and EET for our looked after young people even through the challenges such as in the last year</i> | PEPS reflect the educational needs of the child and drive the areas for educational attainment and attendance leading to less NEET | SM/HoS closer liason with the Virtual Head and the Corporate Parent lead to understand the journey to improvement of the Key Stages for children and young people as noted in 2020-21s outcomes. IROs Escalation policy to be used to highlight gaps, drift and delay in educational /employment prospects for children /young people |
| Knowing ourselves well | | | |
| The Performance Management and Quality Assurance framework identifies areas of strength and of improvement. A dataset for the service provides in-depth performance information which drives improved and timely care | A Performance Book for the service informs on trends, directs service planning and development <i>A new performance book has been developed for 2021 and beyond</i> | IRO service will contribute to a child's experience whilst in care by using performance information to support informed decision making to meet the range of needs of CLA | Continue to review and improve the IRO Service dataset to provide meaningful reporting. Build a new IRO Monitoring Form that is reflective of SoSSW, appropriate RAG rating and can inform the service of the areas of progress / where targetted action needs to take place across the outcomes for LAC Learn from Regional Leads by visiting good/outstanding LAs/ & SM/IROs having further opportunity to take part in a Peer Review/ Challenge |



Leicester City Children and Young People's Justice Service Draft Youth Justice Plan 2021-22

For consideration by:
Children, Young People and Education Scrutiny Commission

Date: 2 September 2021

Lead director: Caroline Tote

Useful information

- Ward(s) affected: All
- Report author: Karen Manville Head of Early Help and Prevention.
- Author contact details: 0116454600 karen.manville@leicester.gov.uk

- Report version number: V4

1. Summary

- 1.1 It is the duty of each local authority after consultation with partners to formulate and implement an annual youth justice plan setting out:
 - a) how youth justice services in their area are to be provided and funded; and
 - b) how the Children and Young Peoples Justice Service will be composed and funded; how it will operate, and what functions it will carry out.
- 1.2 The statutory youth justice plan is approved by the Leicester Youth Justice Management Board and must be submitted to the Youth Justice Board (YJB) and published annually by 31 August 2021 with formal approval from full council. Due to the coronavirus pandemic, last year the Youth Justice Board (YJB) stated that statutory youth justice plans were not required for 2020-21 to secure the YJB grant. However, the decision was made to complete a plan which enabled priorities to be set for the year. This year the Youth Justice Board have stipulated a plan which can extend past one year in focus up to a maximum of three years. However, the plan had already been drafted as a one-year plan.
- 1.3 The document is the youth justice partnership's main statement of purpose and sets out its proposals to prevent offending by children and young people. The plan shows not only what the Children and Young Peoples Justice Service (CYPJS) will deliver as a service, but how strategic links with other supporting initiatives will be developed and maintained.
- 1.4 This plan supports a range of associated partnership strategies including the Leicester Early Help Strategy 2020-2023, Police and Crime Plan, Violence Reduction Strategy, the Safer Leicester Partnership Plan and delivery plans within the Social Care and Education department. The youth justice plan is supported by a more detailed operational CYPJS Delivery Plan (YDP) overseen by the Head of Service for Early Help and Prevention, who reports progress to the Leicester Youth Justice Management Board
- 1.5 As a statutory regulated service, youth offending services are normally inspected every three years by Her Majesty's Inspectorate of Probation (HMIP). The most recent single inspection took place in Aug 2019 with 10 inspectors over 5 days and comprised of focus group discussions with staff and partners, observations and casework. The inspection produced an overall grading of GOOD demonstrating strength and ongoing improvements. (The previous inspection, although a different set of criteria and grades judged the service as satisfactory in 2016). The service continues to strive for outstanding as a service and inspection ready.
- 1.6 Recommendations identified through the inspection have been embedded within the operational and strategic partnership delivery plans, with excellent progress made against them. Refer to the full report here: <https://www.leicester.gov.uk/health-and-social-care/support-for-children-and-young-people/children-and-young-peoples-justice-service/>
- 1.7 The Youth Justice Plan is required to address the areas of performance, structure and governance, resources, value for money, partnership arrangements and risks to future

delivery. The plan takes into account local performance issues, lessons from CYPJS thematic inspections, together with learning from any serious incidents.

- 1.8 The plan highlights key achievements over the past year including our outstanding performance in areas such as Pre-16 education, training, and employment. The service has consistently performed higher than the region and family group and has been in the top 5 nationally for several years for both pre and post 16 education, training, and employment. The service has worked hard to reduce custody numbers and is concentrating on continuing to drive this piece of work looking at strengthening resettlement support. The service has developed a bespoke health dashboard to support children with identified health needs and provide a robust package of support to meet their needs in partnership.
- 1.9 Key priorities for the Leicester Youth Justice Management Board for 2021-22 include areas for development highlighted by the HMIP inspection and self-assessment against the Youth Justice Board national standards. Some of the priorities from the 2020-2021 plan have also been rolled forward as a result of ongoing work required which was impacted by the coronavirus pandemic.
- a. Leicester Youth Justice Management Board to continue to improve ownership of strategic priorities with a full self-assessment completed in 2021-2022.
 - b. Embed the social care and education participation strategy, ensuring that the views of children and young people, their parents/carers and other stakeholders are fully embedded in key areas within the CYPJ service as follows:
 - 1. strengthened co-production informing improved assessments, plans and service delivery which is evident within quality assurance processes
 - 2. use friendly induction processes evidencing that children and young people know why we are involved and what the trajectory is.
 - 3. victim voice more evident within out of court disposals with a stronger focus on restorative justice processes
 - c. Improve quality of practice in the following areas:
 - 1. improvement in the quality of reviews and effective management oversight
 - 2. board members to become part of the quality assurance process
 - d. To implement the recommendations from the task and finish group findings, exploring disproportionality of ethnicity and children looked after.
 - e. Establish a bespoke programme to support young people through transitions smoothly.
 - f. Create a 'Remand Strategy' to support the effective management and support for young people who are remanded into custody including those who are held overnight in police custody.
 - g. Increase the focus on substance misuse treatment both through increased and appropriate referrals and informing the new commissioning arrangements from 2022.
 - h. Expand the offer within the service, merging a range of programmes to develop a co-ordinated pathway of interventions to both prevent and protect young people who are risk of offending and child criminal exploitation. This will include the development of the POP pathway (prevention of offending) which will reflect support from across the wider social care and help division.
 - i. Work in partnership to provide a response to Serious Youth Violence through the Police, Crime, Sentencing and Courts Bill which seeks to place a new statutory duty to local

authorities and wider partners to collaborate and plan to prevent and reduce serious violence. To ensure a public health approach is taken to tackle serious violent crime.

1.10 Although this last year has certainly brought more challenges, the service has continued to be innovative with a number of achievements to be proud of. The following outlines some of the examples of success:

- The service has embedded a robust offer to young people who have experienced Acute Trauma (ACE) in their lives and how to support young people with a history of trauma.
- Embedding the groupwork programme 'Which Way' focus on reduction of reoffending. Refer to [Appendix Seven: Which Way Programme Evaluation Quarter Three Oct – Dec 2020](#)
- Development of a localised approach and strategy embedding the 'Lundy Model' as an effective way of engaging children, young people and their families in influencing service delivery and design. This has also led to improvements with young people knowing why the service is involved with clear evidence of engagement within assessments and plans.
- Focussed deep dives through task and finishing groups, exploring disproportionality and unconscious bias within the CYPJS cohort in relation to ethnicity and children who are looked after.
- Innovative and creative response to the coronavirus pandemic, ensuring that children and young people were fully supported.
- Continued to perform highly for pre-16 education, training and employment attendance and engagement by young people, having consistently been in the top 5 nationally for our pre and post 15 EET performance.
- Establishing the Community Resolution and Prevention using evidenced based practice to secure outstanding results, particularly in the prevention of young people becoming first time entrants and a reduction in further offending for young people who receive a community resolution. Refer to [Appendix Four: Community Resolutions and Prevention Team Quarter 3 2020-2021](#)
- Specific focus on the Post 16 EET that has been directly impacted by COVID over the past 12 months
- Developing a strong offer to support children on EHCPs and identified learning needs through working collaboratively with SEND and SES colleagues. To continue to develop the health dashboard to respond to individual needs in a timely way and monitor trends and themes to inform service delivery.

2.10 Key risks and mitigations

- a. A key risk at the time of finalising this plan is the continued impact of the coronavirus pandemic. CYPJS is operational in line with government guidance but there have been some restrictions in place such as the suspension of face to face contact with young people in custodial establishments and an increase in court proceedings due to delays. This alone will see an increase in workload for the service as services start to resume

with potential spikes in offending. The service has a business continuity plan in place with a robust response to COVID-19 with all risks are considered and mitigated against. This is regularly reviewed and will inform service delivery moving forward. Refer to [Appendix One: Leicester CYPJS Response to CV-19](#)

- b. An ongoing challenge for the CYPJS is to maintain continuous improvement in the context of any proposed national changes. Additional risks to future service delivery arise from reduced government and partnership funding.
- C. The service is working with strategic partners through the YJMB to ensure that national changes to the criminal justice system through Police, HM Courts and Probation services are managed appropriately and address risk, public protection and safeguarding priorities for young people.

2. Recommended actions/decision

2.1 The purpose of the report is to review the statutory Youth Justice Plan for 2021-22, directing any comments to the Head of Service for Early Help and Prevention.

Recommendation

2.2 To consider, and note, the achievements from 2020-21

2.3 To consider, and agree, the priorities for 2021-22

3. Scrutiny / stakeholder engagement

3.1 The report has been presented to the Leicester Youth Justice Management Board and SMT, SCE leadership, LMB and CMB.

4. Background and options with supporting evidence

4.1 The full report has been provided with a number of key links including performance reports on the whole service and the prevention team.

5. Detailed report

[Leicester City Annual Youth Justice Plan 2021-22 Full report](#)

6. Financial, legal, equalities, climate emergency and other implications

6.1 Financial implications

There are no direct financial implications arising from this report. The YJB grant is £720k for 2021/22, which together with the Council's contribution of £439k and smaller contributions from Police and Probation means a total budgeted gross expenditure on the YOS of £1.2m.

Martin Judson, Head of Finance

6.2 Legal implications

There are no direct legal implications arising from the contents of this report.

Pretty Patel, Head of Law, Social Care & Safeguarding Tel. 0116 454 1457

6.3 Equalities implications

Under the Equality Act 2010, public authorities have a Public Sector Equality Duty (PSED) which means that, in carrying out their functions, they have a statutory duty to pay due regard to the need to eliminate unlawful discrimination, harassment and victimisation, to advance equality of opportunity between people who share a protected characteristic and those who don't and to foster good relations between people who share a protected characteristic and those who don't.

Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.

The report sets out the proposed statutory Youth Justice Plan for 2021/22. From the perspective of meeting our Public Sector Equality Duty aims, the Youth Justice Plan sets out priority activities that seek to promote equality of opportunity for young offenders by reducing the adverse impacts they are likely to experience through involvement with the criminal justice system; and by achieving these outcomes and enabling young offenders to take part in city and community life, contribute to improved good relations between different groups of people. In terms of the protected characteristic of race, the Leicester Youth Justice Management Board will implement the recommendations from the task and finish group findings, exploring disproportionality of ethnicity and children looked after.

However, the report and the appendix do not explore in any detail the protected characteristics of young people in the service, any potential issues in terms of over representation and how this compares to local demographics and the national picture or any work being done locally to address any specific issues related to this (other than race as cited above). To make further progress in meeting our public-sector equality duties, in particular that we are advancing equality of opportunity and eliminating discrimination, the service should ensure that the monitoring of disproportionality, trends and issues include the protected characteristics of young offenders not least sex, race, disability, religion and belief.

The proposed Youth Justice Plan 2021/22 offers a high-level overview of the planned work for the coming year, however there are a number of strands of work where equalities, and particularly the PSED, will need to be an on-going consideration, such as the creation of a Remand Strategy. It may be the case that an Equality Impact Assessment is required for some strands of work where changes will directly impact on young people in the service, and advice can be sought from the Equalities Team on this as required.

Sukhi Biring, Equalities Officer, 454 4175

6.4 Climate Emergency implications

There are limited climate change implications directly associated with this report. However, in line with the council's declaration of a climate emergency, it should be noted that the council has an important role to play in addressing carbon emissions relating to the delivery of its services, and those of its partners. This should be addressed through consideration of opportunities to reduce emissions, for example through the use of sustainable travel

practices, efficient use of buildings, use of the council's sustainable procurement guidelines and other measures as appropriate to the service.

Aidan Davis, Sustainability Officer, Ext 37 2284

6.5 Other implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

7. Background information and other papers:

8. Summary of appendices:

9. Is this a private report (If so, please indicate the reasons and state why it is not in the public interest to be dealt with publicly)?

10. Is this a "key decision"? If so, why?

Terms of reference for the independent review of children's social care: a bold and broad approach to support a fundamental review of children's experiences

Context

Government is committed to levelling up across the country. In order to do this, it is absolutely vital that we start with children and families – particularly the most vulnerable – to reduce the downstream impacts and costs to both the children themselves and society. Every child, no matter their background or the circumstances in which they grow up, must have the opportunity to fulfil their potential. Children's social care is at the heart of this endeavour, with a unique ability to protect children and young people from risks or harms both inside and outside the home, and to help them realise their talents and aspirations for the future. We want to improve children and young people's lives and outcomes at the earliest opportunity, to strengthen families, and to realise the benefits of establishing firm and loving foundations early in life, both to individuals and to society for generations to come.

It is for this reason that in our manifesto we committed to undertaking a review – the review will take a fundamental look at the needs, experiences and outcomes of the children it supports, and what is needed to make a real difference. In doing so, the review will contribute to ambitious and deliverable reforms, taking into account the sustainability of local services and effective use of resources. The review will also consider how the children's social care system responds to all children who are referred to the system. It will address major challenges, including the sharp increase in recent years in the number of looked after children, high and rising unit costs, the inconsistencies in children's social care practice and outcomes across the country, and the failure of the system to provide sufficient stable loving homes for children.

The review should consider the capacity and capability of the system to support and strengthen families in order to prevent children being taken into care unnecessarily.

Building on what we know and taking an evidence-led approach

This review will be bold and broad – a once-in-a-generation opportunity to reform systems and services. Children's needs and the context in which they are growing up have evolved. A children's social care system which can respond appropriately now and in the future is needed. The review will build on the strong foundations we have established: recent reviews over the past decade have given us rich insights into the component parts of the children's social care system such as fostering and residential care, alongside analysis of support in and around schools through the review of children in need. We have learnt a great deal about a range of policy 'enablers' and tools at our disposal, such as workforce reform and increasing professional freedom, that have unlocked real changes. We will improve our understanding of which levers offer the greatest potential to make a difference to children's experiences through social care and be open to new ways of conceiving and

delivering them. The wealth of existing evidence from national reviews and local practice should act as a stepping off point – so that we build on this understanding and move forwards, taking an evidence-led approach throughout. The review will also work alongside ongoing programmes for reform around raising standards in local authorities, boosting adoption, improving support for care leavers, and responding to the consultation on unregulated provision.

Scope for a bold and broad review

Starting from children’s experiences

What marks this review out is the singular opportunity it presents to take a fundamental look at the experiences of the people who matter most, children and young people themselves, and the services they receive through children’s social care and partner agencies. This starting point will ensure the review tells us what would serve children best based on their needs. The review will consider how the provision of services in one part of the system influences a child’s experiences and outcomes later. The review will prioritise hearing the voices of children, young people, and adults that have received the help or support of a social worker, or who have been looked after.

All children who are referred to or involved with statutory children’s social care

The review will look at the whole system of support, safeguarding, protection and care, and the child’s journey into and out of that system, including relevant aspects of preventative services provided as part of early help. This will include children throughout their interaction with children’s social care, from referral, child in need and child protection plans, through to becoming looked after. Evidence has shown that the outcomes of all children involved with children’s social care in this way are comparably challenging – for instance, children on a child in need plan had an average Attainment 8 score of 23 in 2016, the same as children in care (the national average is 50). The review will focus on what is needed to meet these children’s needs, starting with the contribution that children’s social care can make to these children’s lives – keeping them safe, improving their lifetime outcomes and reducing the impact to children and to society of failing to provide effective support – whilst also considering the role and contribution of the wider multi-agency system. The implications if we are not able to fully support children to achieve their potential are clear: children who have been in care comprise 25% of the homeless and 24% of the prison population. Over a third of care leavers (39%) are not in education, employment or training compared to 13% of all 19-21 year olds and just 13% progressed to Higher Education by age 19 compared to 43% of all other pupils.

The review’s focus should include children who are in care in formal settings such as fostering arrangements or residential care and also those receiving support under informal, kinship care. The review may want to consider support for children as they prepare to leave care and those receiving ongoing support once they have left care, drawing on care leavers’ experiences. It may also want to consider the support provided for adoption. The

review will give due regard to the SEND Review, which will consider the main questions relevant to children with special educational needs and disability.

Children's social care and interaction with partner agencies

Children's social care is central to improving lives but cannot achieve it alone. The influence of related social issues is fundamental, for instance domestic abuse, mental ill health and substance abuse. The responses to these issues are led by key partner agencies, such as police and health settings. In order to fully meet children's needs it is necessary that they and their families receive all the right support. The review will investigate how those services' roles, responsibilities and accountabilities interact with children's social care and recommend improvements to the way they work together.

Deliverable reforms that make the most effective use of resources

The review must be workable, leading to deliverable reforms that are evidence based and demonstrate a measurable impact. It is vital that recommendations are made following consideration of the key questions of sustainability and how social care funding, workforce and other resources can be used most effectively to change children's lives and represent good value for money.

Review's themes and questions

The review will focus on the following themes and questions:

1. **Support:** what support is needed to meet the needs of children who are referred to or involved with social care, in order to improve outcomes and make a long-term positive difference to individuals and to society?
2. **Strengthening families:** what can be done so that children are supported to stay safely and thrive with their families, to ensure the exceptional powers that are granted to the state to support and intervene in families are consistently used responsibly, balancing the need to protect children with the right to family life, avoiding the need to enter care?
3. **Safety:** what can be done so that children who need to be in care get there quickly, and to ensure those children feel safe and are not at risk of significant harm?
4. **Care:** what is needed for children to have a positive experience of care that prioritises stability, providing an alternative long-term family for children who need it and support for others to return home safely?
5. **Delivery:** what are the key enablers to implement the review and raise standards across England, such as a strong, stable and resilient workforce, system leadership and partnerships, and what is needed so that this change can be delivered?
6. **Sustainability:** what is the most sustainable and cost-effective way of delivering services, including high-cost services, who is best placed to deliver them, and how could this be improved so that they are fit for the future?
7. **Accountability:** what accountability arrangements are necessary to ensure that the state can act appropriately, balancing the need to protect and promote the welfare of

children with the importance of parental responsibility, and what is needed to ensure proper oversight of how local areas discharge those responsibilities consistently?

The review will engage with children, young people, and adults with direct experience of children's social care, in order to ensure those individuals' views and lived experience are fully embedded in the review's work.

The review will report to ministers and the government will publish a report and response.

Josh MacAlister, Chair of the Independent Review of Children's Social Care

By email to: Review.Childrensocialcare@education.gov.uk

26 February 2021

Dear Josh,

Many thanks for meeting with my colleagues and I recently. Since our meeting, ADCS Council of Reference has met and we took this opportunity to discuss the independent review of children's social care and I wanted to feedback to you some of the themes arising from that discussion.

DCSs welcome the review and agree it is a significant opportunity to addresses the challenges in the system to ensure it works well for children and families. ADCS is committed to engaging with the review in a meaningful way and would welcome the opportunity to be represented on the public sector group you are establishing. For the purposes of continuity, our nominated representative would be Charlotte Ramsden, who takes up the role of ADCS President on 1 April 2021. As mentioned in my earlier letter to you, ADCS would also be happy to facilitate access to a small, representative group of DCSs for you to test emerging thinking and recommendations. We believe the review must recognise the range and experience of views across all LAs, and this could be one of the mechanisms to achieve this.

The review presents a timely opportunity to debate how far the state should intervene in family life and to understand what actually helps families to thrive, and what is the purpose of care? It could be argued that over time and as resources have become tighter, we have moved away from the original principles enshrined in the section 17 of the Children's Act 1989 to focus on the more acute end of the business. The binary "in" or "out" system of care in this country no longer best meets the needs of the children and families we work with, particularly late entrants and adolescents. The boundary should be much more porous to reflect the fluctuating needs of children and families, many may benefit from some regular respite to provide time and space to reflect rather than fulltime care; the inspection and regulatory frameworks could also better accommodate more flexible ways of caring for children. The role of kinship care is an important consideration here also, and how we ensure that, where appropriate, children can remain successfully within their own families in the least intrusive way possible and with the right kind of support.

We welcome your expressed determination to listen and learn from those who are care experienced. Our current cohort of children and young people in care and care leavers should also have the opportunity to contribute, this is in addition to those who have experience of children's social care services but did not need to be brought into care. Their views provide us with current learning and we would want the review to have access to these views too.

Form must always follow function, we have the safest child protection system in the world and other countries consistently look to us for learning. So, we must safeguard the elements that work well whilst being open about the challenges in the system and how best to address

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them collectively; structural solutions will require time, money and attention and offer no guarantees of delivering meaningful, sustainable change. Indeed, the history of structural reforms, be that to children's services, schools or the NHS, is one of over-stating the benefits and under-estimating the disruption of reform.

Throughout this, the child's journey should be front and centre, the importance of local, connections and connectivity, relationships and love may be difficult to quantify but can never be underestimated. We are aware of the government's intention to reform adoption further, with a view to introducing a more national approach to some aspects of adopter recruitment. Whilst there may be benefits to be gained of scaling up some aspects of adopter recruitment it would be a mistake to think that nationalising aspects of the service would achieve the government's desired outcomes. This is also true of fostering, where of course, the vast majority of children looked after are cared for.

The scope of the review will be key and as you mentioned when we met, the wider societal determinants of family distress, particularly poverty, are a burning question. In Hertfordshire, my teams see first-hand and on a daily basis the impact that domestic abuse, unemployment and low pay, poor housing, ill-health and hunger have on many families. These challenges are not new for many families and the economic and societal impacts of Covid-19 will sadly bring others to our attention. This is a complex and multi-faceted issue but as a system, we need to be open and honest about the drivers of demand for children's social care. Improving the system response to relatively new risks faced by young people is also key. There is much more we need to learn about the complexities of contextual safeguarding, we are dealing with high level sophisticated criminals exploiting our young people, often with limited access to the intelligence the police have about these people.

Despite longstanding and ongoing discussions about the needs of children across the children's social care, mental health and youth custody secure estate, the three systems continue to be separately commissioned, have separate legislative frameworks and are the responsibility of different government departments. Yet it is clear that children who are in secure placements have similar complex and overlapping needs and it is often where and when they present that determines whether they receive a social care, health or justice response. Young people need secure provision which can address their mental health and welfare needs; the current lack of join up and integration hampers our ongoing work with this vulnerable group of children.

The role of the judiciary and Ofsted should be brought into the scope of the review as their behaviours directly impact on outcomes for children, for example the concept and use of care orders at home, and the children's home regulatory framework that inadvertently denies access to regulated provision for our most vulnerable young people.

The contribution of health and its poor prioritisation of the needs of vulnerable children, not limited to the role of CAMHS, and youth justice should also be key lines of enquiry. We need to always come back to the ways in which these services are contributing to the collective endeavour to meet the needs of vulnerable children and young people, supporting them to achieve the best possible outcomes and thrive. The health system has joint responsibility with children's social care, for ensuring that the needs of young people with complex health and mental health needs are met, with suitable provision, that is jointly

funded. Where this is not happening, the right accountability measures need to be in place. Although the Home Office is responsible for immigration, the provision of support for unaccompanied asylum-seeking children (UASC) and care leavers who are former UASC falls to individual LAs. The Home Office funds LAs for former UASC care leavers to age 21 but their entitlements as care leavers extend to age 25. As the numbers of UASC have significantly increased over recent years, so have the expectations on LAs and for some, this is now unsustainable with the numbers of care leaving UASC rising quickly. ADCS Safeguarding Pressures research suggests that between 2017/18 and 2019/20, there has been a 60% increase in the number of care leavers who are former UASC.

The published terms of reference do not touch on the significant role of the workforce. Over recent years there has been a continued national focus on the social work profession, almost exclusively and we know that only just over 50% of the social work workforce are case-holders. This is an opportunity to really explore and draw out the real value of our wider workforce and the vital work they do with children and families, particularly in the early help and prevention space. But we also need to be cognisant of the key role of residential care workers (in open and in secure settings), therapists, and personal advisors for care leavers, for example.

ADCS would want to see the review explore and develop strong links with transition to adult services, particularly in relation to support for care leavers, young people with learning disabilities, and young carers. Transitioning between services has often be described as a cliff edge by many young people whose needs do not stop when they are 18 or indeed 25, yet different eligibility criteria creates confusion and real barriers for some.

The children's social care system is complex and while the review will want to tackle head on some of the challenges we face, it must also guard against being a victim of its own ambition. In terms of prioritising areas of focus, ADCS would welcome an emphasis on:

- **What is care for and what does success look like:** the concept of care, what are we trying to achieve through the system?
- **Journey of the child:** best prevention, best purposeful nurturing care experience, best exit from care
- **Drivers of demand:** wider societal determinants (specifically child poverty), parental need including domestic abuse, mental health and drug and alcohol misuse
- **Prevention:** early help and prevention models, edge of care models
- **Placement sufficiency:** capacity (welfare secure, fostering), quality, geography, cost. The aging demography of foster carers is of concern
- **System response to specific cohorts:** adolescents and extra-familial risk, babies (particularly where parents are care leavers themselves), UASC, care leavers (including former UASC)
- **Resources:** funding, spend and outcomes, private equity and risk in the placement 'market', e.g. Safeguarding Pressures research shows that the six biggest IFA companies account for 51% of all IFA households, integrated commissioning, invest to save approaches and evidence of success

- **Role of partners:** referrals, health – CAMHS and links to SEND, wider health services meeting needs of vulnerable children and young people, the YJB and YCS, judiciary, the Home Office
- **Inspection and regulation:** regulatory reform, the impact of inspections on practice and behaviours
- **Workforce:** the role and value of the wider workforce beyond social work
- **Education:** the value of education, educational outcomes, and narrowing the attainment gap (for CiN, CP and CiC)

ADCS has produced several reports and policy position papers, which the review may wish to draw on during the initial fact finding phase:

- [ADCS Safeguarding Pressures 1-7](#) (2010 – 2021)
- [What is care for?](#) (2012)
- [What is care for – alternative models of care for adolescents](#) (2013)
- [A country that works for all children](#) (2017)
- [Building a country that works for all children post-Covid](#) (2020)
- [A vision for an inclusive and high performing education system](#) (2018)
- [Building a workforce that works for all children](#) (2019)
- [A health care system that works for all children](#) (2019)
- [Serious youth violence and knife crime](#) (2019)
- [Comprehensive Spending Review submission](#) (2020)
- Response to both the [review of residential care](#) (2015), the [fostering stocktake](#) (2017) and the [reforms to unregulated provision](#).

We are in the process of updating the ADCS position paper *What is care for?* and are planning to develop a policy paper on youth justice this year as well. We will share these with you in due course.

We agreed to meet again in the not too distant future, would it be helpful to do this prior to the publication of the review's scoping document? I will ask Esther Kavanagh Dixon, ADCS Senior Policy Officer, to contact the review team with a view to getting a date in the diary.

Yours sincerely,



Jenny Coles
ADCS President 2020/21

CC: Shazia Hussain, Department for Education

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21 January 2021

Katrina Gueli HMI
Regional Director – East Midlands

Martin Samuels
Strategic Director of Social Care and Education
Leicester City Council
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Sent by email to: Martin.Samuels@leicester.gov.uk

Annual Engagement Meeting 13 January 2021

Dear Martin

Thank you to you and your team for meeting with Nick McMullen SHMI, Deirdre Duignan SHMI and me to consider your self-evaluation and to discuss developments in children's services in Leicester.

Local authority context

You reflected that since taking up post in March 2020, the city has been in some form of lockdown due Covid-19 for most of this time. You feel children's services have responded well to the challenges this has presented with most services sustained, improvement work continuing and staff showing great resilience. You cited staff and management stability and experience as key factors in this. You also described strong political support from your lead member. The current Chief Operating Officer is leaving for a new post and plans to recruit a replacement are well advanced. The City's aspiration is to achieve excellence in its children's services and you are developing a three-year strategy to help deliver this.

Progress since last full inspection and focused visit

Your last full inspection was in 2017 and your last focused visit early in 2019. These inspections showed evidence of steady improvement from the authority's previous inadequate performance. Your most recent self-evaluation describes how this

improvement journey is continuing, despite the particular challenges of 2020. The self-evaluation is succinct and supported by a range of other documentation. You are confident it provides clear and accurate evidence of your line of sight to front line services. Your progress continues to be overseen by your Improvement Board, which has partner engagement and is independently chaired.

Service Responses to Covid-19

You described how staff and services made the transition to lockdown fairly quickly and how you have shifted between virtual and face-to-face contact over time, in line with public health advice and your individual risk assessments. Some services, such as your contact centre and short breaks, have needed to be curtailed or closed for periods, but overall, you feel you have sustained strong service delivery. You have had relatively little additional staff absence over the period and this remains the case. However, you are concerned about the impact of home schooling and ongoing high Covid-19 levels on staff availability.

Referrals dipped during the first lockdown but steadily increased after this and are now roughly at pre-Covid levels. You have operated a pre-threshold help line to encourage schools in particular to identify and discuss children who may be experiencing hidden harm.

You are pleased with the impact of your edge of care services and hope to build on this through the development of a new multi-agency service. This will be based on the 'No Wrong Door' model but will have a distinctive Leicester approach and title. You felt your engagement in this development was an example of an increasingly outward looking approach in Leicester, reflecting a greater openness and self confidence around service review and development.

Like many local authorities you are experiencing challenges in maintaining placement choice and sufficiency during the pandemic. You have confidence in your internal residential provision and feel in many cases this is providing better value and quality than a number of private providers. You are therefore considering whether to expand internal provision as part of your planning for children's residential care.

You believe your care leaver service continues to develop and improve, although the economic slowdown has created additional challenges to providing these young people with suitable training or employment. We also discussed the importance of recognising vulnerability post-18 and protecting care leavers from exploitation. We noted how care leaver services are also having to evolve to meet the needs of the increasing numbers of young adults aged 21 and over entitled to support.

Summary

Overall, you described an increasingly mature service which knows itself well and is able to respond confidently to new challenges. Over time, although there have been several changes at DCS level, underneath this there has been senior management stability and continuity which you believe has helped sustain a steady path of service improvement.

Inspection Update

Ofsted has now announced that we will resume our extended focused visits in January, and still anticipate returning to routine ILACS from April 2021. Please pass on our thanks to colleagues for their preparation and contributions to the meeting. I look forward to hearing about further developments in Leicester.

Yours sincerely

A handwritten signature in black ink, appearing to read "K. Gueli", enclosed within a large, thin, oval-shaped scribble.

Katrina Gueli HMI
Regional Director, East Midlands



Special Education Needs & Disabilities (SEND) Commissioning Strategy

For consideration by:
Children, Young People and Education Scrutiny Commission
Date: 2 September 2021
Lead director: Tracie Rees

Useful information

- Wards affected: All
- Report author: Clare Nagle
- Author contact details: Clare.Nagle@leicester.gov.uk
- Report version number: V1

1. Purpose

- To note the Leicester, Leicestershire & Rutland Joint Special Educational Needs & Disabilities (SEND) Commissioning Strategy, as detailed at Appendix A.
- A seven-week engagement exercise took place with a range of stakeholders, which has resulted in amendments to the strategy, which are summarised at Appendix D.
- An action plan has been developed and is in progress to underpin and deliver the strategy as detailed at Appendix C. Priority will be given to actions which support delivery of the SEND Accelerated Action Plan, following the feedback letter from Ofsted in June 2021.

2. Summary

- A joint Special Educational Needs & Disabilities (SEND) Joint Commissioning Strategy has been developed across Leicester, Leicestershire and Rutland (LLR), in partnership with the three Clinical Commissioning Groups (CCG's) and the three Local Authorities (L A's).
- The strategy identifies a common vision across Leicester, Leicestershire and Rutland *“we will work together across Leicester, Leicestershire and Rutland to improve the outcomes for children and young people with SEND”* and 7 priorities to address over the coming 3 years.
- Engagement took place on the strategy over a 7-week period earlier this year. A summary of the engagement is attached at appendix B. 82 responses were received across the Leicester, Leicestershire and Rutland area via an on-line survey, as well as comments from a number of meeting groups and forums.
- Overall, responses were positive about the vision and priorities and a set of proposed actions have been ranked by respondents. An action plan has been developed at appendix C which sets out proposed actions over the three-year period of the plan, reflecting the responses through engagement.
- There has been progress made during quarter one using of the SEND joint commissioning delivery group as the main vehicle for delivery and monitoring of the strategy, this includes
 - Agreeing terms of reference for delivery
 - Set out governance and reporting through the local authority SEND improvement Board and LLR Children and Young People's design Groups.
 - Seeking sign-off from all partners governance boards.
 - Identified leads for each of the 13 actions in year one – prioritising those actions to support the accelerated action plan
 - Establishing a rotating Chair amongst partners for the delivery group.

- An easy read version will be developed to support children, young people and families to understand the work and opportunities to engage further with delivery of the strategy.

3. Recommendations

- It is recommended the commission acknowledge the feedback from the engagement on the Joint SEND Commissioning Strategy, included at appendix B.
- It is recommended the commission acknowledge the action plan for year 1 at appendix C, drawing on feedback on which actions are most important to people responding to the engagement.
- It is recommended the commission acknowledge the changes to the strategy, set out at appendix D.
- It is recommended the commission acknowledge the proposed governance structure, set out at appendix E.
- It is recommended the commission support the strategy being published online on the Council's website, content set out at appendix A.

4. Supporting information including options considered

Background

- A joint SEND commissioning strategy has been developed across Leicester, Leicestershire and Rutland, covering the work of the three Clinical Commissioning Groups (CCG's) and Local Authorities.
- The strategy identifies a common vision across Leicester, Leicestershire and Rutland *"we will work together across Leicester, Leicestershire and Rutland to improve the outcomes for children and young people with SEND"* and 7 priorities to address over the coming 3 years.
- The strategy has been through engagement over a 7-week period with 82 responses received via an on-line survey and some additional feedback via presentations to a range of groups and meetings.

Who responded to the survey?

- Respondents were asked to identify which group they fell into; the following were recorded:
 - Child or young person (31%).
 - Member of staff supporting a child with SEND (29%).
 - School representative (18%).
 - Various other groups (22%).
- Respondents were from the following local authority areas:
 - Leicester – 17 respondents.
 - Leicestershire – 39 respondents.
 - Rutland – 5 respondents.
 - Other – 7 respondents.

What changes have been made as a result?

- Many, varied comments were received on the strategy. The majority were supportive of the priorities and actions. Some comments received were not relevant to the joint commissioning strategy but have been shared with partners to consider in their wider SEND work. Some comments were general observations or ways of working e.g. the on-going need to include children and young people in our work or the need to ensure we communicate well with families. These General comments have formed cross cutting themes that will be considered for each piece of work. Some comments were directly relevant to the strategy and have resulted in changes to the document. These latter set of changes are summarised in appendix D.
- A number of comments were received in relation to transition into adulthood. This is an identified priority in the strategy currently, with a proposal being drafted for a Leicester, Leicestershire and Rutland (LLR) approach to co-ordinating transitions work. It is proposed that the feedback on this section is fed into the development of an LLR transitions approach and that this is the delivery mechanism for this priority.

What does the action plan commit us to?

- The action plan was part of the engagement, asking for views on whether we had the right actions and asking respondents to actions in rank order of priority. The resulting rank order has been used to set out which actions are to be tackled in year one and which are identified for years 2 and 3.
- Appendix C contains the proposed action plan for the first year. Feedback on the strategy included requests to ensure there were measures in place to track progress, to identify the current position and the position we would like to be in, and the steps needed to take us there. These are all contained in the action plan as well as a new section in the strategy titled 'measuring our progress'.

What are the next steps?

- The strategy has been approved across the partner organisations. Once approved by all, it will be published on the City Council website as a web hosted document. There will be communications to formally launch the strategy and plan across all key stakeholders. There is intention for an annual commitment (action plan) and an annual summary of progress to be published on the website to allow for contributors and other interested parties to track progress.
- The SEND Joint Commissioning Delivery Group will ensure delivery of the actions in accordance with the year 1 action plan. This group will be overseen by the Joint Strategic Planning and Transformation Group, reporting into the Children and Families Strategic Leadership Group. The SEND joint commissioning delivery group will also report into local SEND management arrangements.
- The proposed governance structure is set out in appendix E.

5. Financial, legal and other implications

Financial implications

There are no direct financial implications arising from this report.

Martin Judson, Head of Finance

Legal implications

The findings of the consultation are appended to the report, summarised within, and should form part of the final consideration. Any data sharing with Leicester, Leicestershire and Rutland partners should be underpinned with appropriate data sharing agreements.

In respect of any future procurements which may be jointly commissioned with Leicester, Leicestershire and Rutland Partners, early legal and procurement engagement should be sought to advise on the model and ensure compliance with the Public Contract Regulations 2015 (as amended) and the Council's Contract Procedure Rules. Any collaborative working will need to be underpinned with appropriate agreements to capture responsibilities of contract management, decision making and governance of the service contract and ensure economies of scale.

Mannah Begum, Principal Solicitor (Commercial)

Climate Change and Carbon Reduction implications

Whilst there are limited direct climate change implications associated with this report, it should be noted that the council has an important role to play in addressing carbon emissions relating to the delivery of its services, and those of its partners, including through its commissioning activities. Carbon emissions from commissioning and delivery of services should be managed through use of the council's sustainable procurement guidelines, and by encouraging consideration of opportunities for reducing emissions through use of sustainable travel, efficient buildings and other measures where practical.

Aidan Davis, Sustainability Officer

Equalities Implications

When making decisions, the Council must comply with the Public Sector Equality Duty (PSED) (Equality Act 2010) by paying due regard, when carrying out their functions, to the need to eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act, to advance equality of opportunity and foster good relations between people who share a 'protected characteristic' and those who do not.

In doing so, the council must consider the possible impact on those who are likely to be affected by the recommendation and their protected characteristics.

Protected Characteristics under the Equality Act 2010 are age, disability, gender, reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

The outcomes from the engagement exercise have led to the strategy being revised and these being fed into the proposed action plan for year 1, along with further areas being identified for years 2 and 3.

Whilst the SEND Strategy is a high-level overarching document, it is recommended that Equality Impact Assessment (EIAs) are carried out as appropriate on identified areas within the action plan, for example changes in policy/practice or service reviews, to ensure any impacts are identified and addressed, and mitigating actions put in place. Further support and advice can be sought from the Corporate Equalities Team.

Sukhi Biring, Equalities Officer

6. Appendices

Appendix A – Updated Strategy (note the final version will be web based).

Appendix B – Summary of engagement feedback.

Appendix C – Action plan.

Appendix D – Changes made to the strategy as a result of feedback.

Appendix E – Proposed governance structure for joint commissioning.

Appendix A – Updated strategy (all links and images to be added)

Special Educational Needs and Disability (SEND)

Joint Commissioning Strategy 2021 - 2024

For Leicester, Leicestershire and Rutland



Image to be inserted

Introduction

Leicester City, Leicestershire County and Rutland Councils and Leicester City, West Leicestershire and East Leicestershire Clinical Commissioning Groups (CCG's) are working together to commission services for children and young people with Special Educational Needs and/or Disabilities (SEND).

Together, we commission a range of provision to meet need. We are working together because a lot of needs across the area are similar and related, and because a lot of our providers are the same. In addition, for some families, funding for care and support comes from several agencies. By collaborating we will improve our combined offer to children and young people, reduce gaps, provide better coordinated services and achieve value for money and sustainability.

This strategy explains how and why we will do this; spells out our aims and objectives; and sets out the action plan to take us there. We see commissioning as a framework to help us work together to better meet need and improve outcomes.

Although this is a joint commissioning strategy for the Leicester, Leicestershire and Rutland (LLR) area, this doesn't mean we will do everything together. Some services need to be specific to individual agencies. However, this strategy sets out those areas where joint working is intended and planned for because we believe it will add value to do these things together. In addition, our

single agency action plans support us to achieve where actions are specific to one agency only.

Together, these plans set the roadmap for work until 2024 to ensure we achieve our common vision.

Strategic Context

This strategy forms the first Leicester, Leicestershire and Rutland Commissioning Strategy for Children and Young people with Special Educational Needs and/or Disabilities (SEND). It presents a collective vision and priorities to achieve this, with a focus on working together to bring about improvement.

Good commissioning and effective integration between services lie at the heart of our strategy. These aspects of our approach will increasingly be the focus of the inspections that we will undergo. The Code of Practice (COP) 2015 for SEND sets out the commissioning responsibilities across partners and the expectation that joint working and planning occurs, and we will continue to follow this Code in delivering the strategy set out here.

Each Local Authority has its own SEND strategy and local offer. Alongside this, the commissioning strategy sets out the framework and resources to make this happen. The different strategies and documents produced by each agency and their relationship to this Joint SEND Commissioning Strategy are listed here <link>.

As the public sector continues to experience financial challenge, a key objective of this strategy is to ensure that

we use effective commissioning to make sure our services work well for children and families, provide positive impacts and value for money and are sustainable.

By working together as agencies, we will be able to see the cumulative effect of the changes we put in place and this will allow us to assess the impact of our joint approach on the system and services that we all use (shared markets). This is a key approach to managing risk through change.

For children, young people, families and carers, having agencies work together will help them to navigate an often-complex system of support. By aligning and understanding each other's worlds, we can support families holistically and ensure that every child can reach their full potential.

69 What is commissioning?

Commissioning is a way of understanding need, planning a response to meet this need and reviewing the effectiveness of action taken. It is often viewed as a cycle (you keep going around to drive improvement). It is commonly described as having 4 stages which are described in more detail here <link>

Our vision, principles and values

Through our services we want to remove barriers to opportunity, to improve equality of access and to provide care and support to enable children to enjoy and achieve life to the maximum of their potential. We must do this through the best use of our available resources, spending

wisely to achieve greatest impact. We recognise this is best achieved through supporting independence, choice and personalisation.

We will know that we have achieved this when children, young people and families tell us this is the case; when we see improvements in outcomes on a par with other, similar areas; and when we are confident that the mix and quality of provision meets the diverse needs of our children and young people.

Each local area within Leicester, Leicestershire and Rutland has their own vision for children and young people with SEND, commissioning effectively is one of the tools to help achieve these visions.

Our collective vision for Leicester, Leicestershire and Rutland is:

'we will work together across Leicester, Leicestershire and Rutland to improve the outcomes for children and young people with SEND'

Principles

We will make sure that the commissioning decisions we make are based on a sound evidence of what children, young people and families need and on our analysis of what works to best meet those needs, within our available resources. We will analyse the real impact of services before planning any change, and we are committed to

changing services that do not provide the quality of support that we know people want.

To ensure that services are of the quality that we expect, we will monitor, and quality assure them while they are being delivered.

We will work with children, families and young people to evaluate services and to plan change using participative and co-productive methods.

Aims, objectives and priorities

Across the local area we have agreed a common aim, objectives and priorities to support achievement of our vision. These draw on other information contained in our strategy including what we know about local needs and outcomes.

Aim

Across the Leicester, Leicestershire and Rutland area, we aim to use our funds in the best possible way to bring maximum impact to as many eligible children and families within the available resources.

Objectives

We will:

- commission wisely: we will look at quality as well as cost when commissioning, look at what is coming and plan for this in advance

- commission together: examine our priorities for commissioning, look at opportunities to align work or jointly commission, particularly where we're buying the same or similar provision. We will include children, young people and families in commissioning and make sure they have a voice in our reviews of provision.
- target our commissioned activity: We will offer support or services to those who most need it or where there is greatest likelihood of it preventing an escalation of need.

Priorities

Our priorities are broadly formed around the commissioning cycle and will be addressed in partnership across Council's and the CCG's:

1. Build on our understanding of need and demand
2. Plan to meet statutory need within available resource, forecast for the future and prevent escalation
3. Quality assure our provision and contracts
4. Examine how we can provide greater flexibility and tailored packages of support
5. Align our services with those for adults, to prepare young people for adulthood
6. Develop our joint working and governance approaches
7. Jointly review our existing provision to ensure it meets needs and provides good quality support

Measuring our progress

We will use an action plan, prioritising actions according to feedback received through engagement on this strategy. Each action sits alongside a statement of 'where do we want to be' and the steps to get there. The action plan for the year ahead can be found here <link>.

Collectively, these actions will ensure progress is made against our priorities.

Local information

There are around 22,000 children with SEND in the Leicester, Leicestershire and Rutland area with a wide range of needs.

For more information about children and SEND provision in the area, click here <link>

Current joint working

The agencies signed up to this strategy are already working together in a number of areas to bring about positive change through integration and collaboration. Details of current joint work can be found here <link>

Future direction

We know there is more we could do and more we could tackle jointly. Our priorities form the basis for our action planning and broadly follow the commissioning cycle. Many of the changes to provision contained in the 'doing' phase of commissioning will be driven by a deeper

understanding of the issues faced and the success of service responses and from the reviews of specific areas of provision.

We have developed action plans for each priority, these are available here <link>.

Engagement and co-production in commissioning

We will involve children, young people, families and carers to plan and review services, taking a co-production approach where possible. More details can be found here <link>

Governance and accountability

This strategy is owned by the three Councils in Leicester, Leicestershire and Rutland and the Leicester City, West Leicestershire and East Leicestershire CCG's. More details about how it will be governed can be found here <link>

Glossary

CCG

The Clinical Commissioning Group – This public agency is part of the NHS, responsible for commissioning most of the hospital and community health provision.

Local Authority

Local Council for that area with legal responsibility for a range of service provision.

LLR

Leicester, Leicestershire and Rutland – the area covered by this strategy, formed from 3 different local authority footprints.

SEND

Special Educational Needs and/or Disabilities – a term used in many of the legal and policy papers referring to children with additional needs.

Domestic Support

Care and Support in your home, often referring to personal care e.g. washing, dressing, feeding etc.

Universal Services

Services that are offered to all children and young people, regardless of the level of need they have. A good example of this is school places – all children are entitled to access school within certain age brackets.

Targeted Services

Services that are targeted at children that may need additional support to access provision or who may need services specifically designed to meet their needs.

Specialist Services

Services for children with severe or complex needs, usually accessed following an assessment of that need.

Shared Markets

Where more than one agency uses the same provider(s) to deliver a service

Commissioning

A process of analysing, planning, doing and reviewing the support on offer to improve outcomes

Co-production

Working with those in receipt of services to design the provision they need

Local Offer

The services and support on offer to people in that area, including any criteria for access

Linked Pages – these will be pages on the website, the links in the text above will take you to them

What is commissioning?

Commissioning is a way of understanding need, planning a response to meet this need and reviewing the effectiveness of action taken. It is often viewed as a cycle (you keep going around to drive improvement). It is commonly described as having 4 stages:

Analyse

Understand the need, the numbers of people affected, the reasons for this, how we address this now (or identification of a gap if we don't), how we might do this better in the future.

Plan

What changes do we want to bring about, what are the steps to doing this, who needs to be involved, what are the likely impacts and timescales?

Do

The implementation stage; making the plans real. Sometimes this will involve buying new services or ending existing ones. At other times the approach might be to do things differently or to hold different conversations.

Review

This stage is where we look at how we do things or a change that we made and ask whether it is the best way to achieve the results we want. This could include an evaluation of a new service or a review of a whole area of provision.

Fig 1 The IPC Commissioning Framework



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Commissioning is often shown as a cycle like this version from the Institute of Public Care (IPC).

By following this cyclical approach, agencies can gain a deeper understanding of the issues, plan for change that is most likely to have the desired impact, implement effective changes and monitor the impact on the person using a service, the service providers and wider partners.

Each of the partners use commissioning as a technique to improve outcomes currently. This strategy provides an opportunity for agencies to join together and do this collectively with identified areas to work on over the next 3 years.

Joint Commissioning

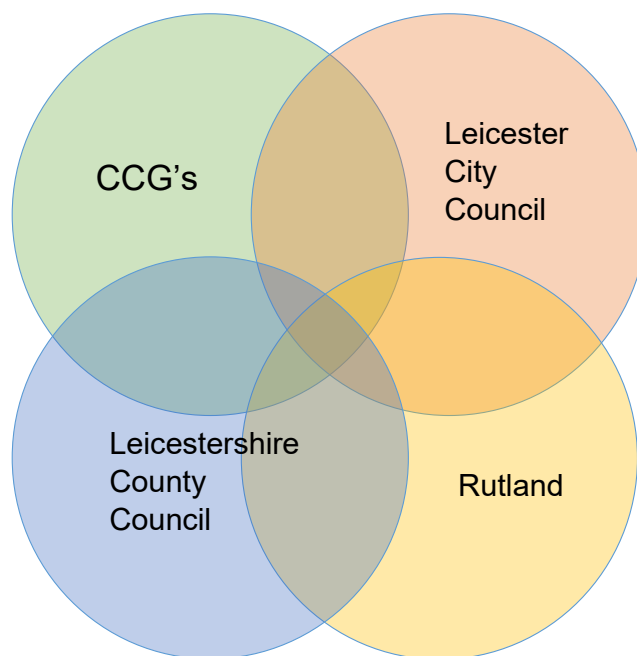
When we talk about joint commissioning, this can cover a range of approaches to working together to analyse, plan, do and review. Joint commissioning can include:

| Approach | Meaning | Example of how this could work |
|--------------------------------|---|--|
| Aligning our services or funds | Working together as agencies to ensure our services create a seamless system. Each agency makes their own arrangements to provide the necessary services, but this will be worked through with partners to ensure it fits with the wider needs of the system and with the strategic plan of all partners. | All agencies identify a growing number of children with SEND. They work together to understand the needs of these additional children and the services across the system that will be required. They make plans together to increase the services they offer or to do things differently to meet this need in a new way. They work together to make it happen. |
| Pooled budgets | A shared fund set up by 2 or more partner agencies. An agreement is in place to define how much each party will put into the fund and what the funding can and can't be used for. | The councils and CCG's decide to create one 'pot' of money to fund placements for children whose needs cannot be met through mainstream services. This pot of money combines some spend from councils on social care and education and Continuing Care funding from the CCG. All the partners agree the level of contribution they will make to the pot at the start of the year. The pot of money is used to fund the needs of children meeting the criteria for the fund throughout that year. |
| Lead agency | One agency takes the lead on delivering or contracting out a service on behalf of another. There will be an agreement in place to set out what the lead agency should do and to cover the funding arrangements. | One council agrees to contract for all the short breaks provision on behalf of all three local authorities. There is an agreement that states how this should be run and how much money will be paid to the council doing this on behalf of the others. |
| Integrated teams | Teams of people that are funded or employed by more than one agency but that work as a single team. They deliver | A team of speech and language therapists (funded by the CCG) are based in the same building and share the same manager as a team of specialist teachers for children with |

| Approach | Meaning | Example of how this could work |
|----------|---|--|
| | services that meet the responsibilities of both agencies. | hearing and/or visual impairment (funded by the council). They work as one team although their jobs are different. |

Some joint commissioning will involve the local authorities working together, some will involve the CCG and local authorities. Some will take place across the whole of Leicester, Leicestershire and Rutland area, others may cover just one locality.

All of the overlapping areas in the diagram below represent areas of joint commissioning.



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Key facts about children with SEND in Leicester, Leicestershire and Rutland

How many children have SEND in Leicester, Leicestershire and Rutland?

In April 2020 there were nearly 22,000 children with SEND in Leicester, Leicestershire and Rutland. This makes up 13.7% of our overall school population which is just under the national average of 14.8%. Children in primary school are most likely

to have support for SEN and we know that nationally the numbers peak at age 10, declining through secondary education. The numbers of children with an Education, Health and Care Plan (EHCP) continues to rise as they journey through school.

What school provision do children access?

Most children receive an education in a mainstream school, with only 2,313 children across the area receiving education in a Special School. There are 12,142 children in primary schools with SEND from the Leicester, Leicestershire and Rutland area and 7,513 children in secondary schools.

What are the main reasons for a child receiving support for SEND?

The primary needs of children with SEND across the area are:

| Primary Need | Number | % of Total | National Average |
|--------------------------|---------------|-------------|------------------|
| Specific LD | 2,477 | 11.3% | 12.5% |
| Moderate LD | 6,547 | 29.8% | 20.4% |
| Severe LD | 836 | 3.8% | 2.7% |
| Profound LD | 175 | 0.8% | 0.9% |
| Social, Emotional and MH | 3,543 | 16.1% | 17.1% |
| SLC needs | 4,087 | 18.6% | 21.7% |
| SEN Hearing | 391 | 1.8% | 1.8% |
| SEN Visual | 355 | 1.6% | 1.1% |
| Multi-Sensory | 55 | 0.3% | 0.3% |
| Physical Disability | 664 | 3.0% | 2.9% |
| Autistic Spectrum | 1,630 | 7.4% | 11.0% |
| Other Difficulty | 732 | 3.3% | 4.4% |
| No specialist assessment | 474 | 2.2% | 3.3% |
| Total | 21,966 | 100% | 100% |

What do children, young people and families tell us about the services they receive?

We know that we are delivering services in the local area that make a huge difference to the lives of children, young people with SEND and their families and carers. We also know that there are areas for improvement in our provision, identified by children, young people and families and highlighted through Joint Ofsted and Care Quality Commission (CQC) SEND inspection findings for Leicester and Leicestershire. Key areas for us to work on include:

- Strategic planning to improve outcomes in Leicester and Leicestershire
- Quality of Education Health Care Plans in Leicester and Leicestershire
- Assessment of Children and Young People's Social care needs in Leicester City
- Joint commissioning to support health needs post 19, the development of a joint commissioning strategy for SEND and a co-ordinated approach to preparing for adulthood in Leicester and Leicestershire

What do we commission to meet this need?

We commission a wide range of universal, targeted and specialist services to meet the needs of children with SEND. Many of the services are commissioned by Council and CCG's individually but they are delivered as integrated pathways to help children, young people and families experience joined up support. Some services are delivered by Councils themselves, and others are commissioned from independent or voluntary and community organisations.

Details of services commissioned by partner agencies and the level of funding committed to each type of provision can be found here <link>

It is important to note that schools and further education facilities are increasingly acting as commissioners of services in order to meet the varied needs of children attending. It is expected that the work included in the delivery of this strategy will start to map this commissioning activity in schools and in further education and, that we will involve them in discussions about future provision.

Parents and carers are also increasingly acting as commissioners through the use of personal budgets. Here the Council or CCG makes funding available to parents and carers so that they can source their own support to meet the child's individual need. This approach can help to increase choice and support families in developing bespoke, personalised packages of care. These personal budgets are agreed by the relevant teams in the Council or CCG in line with each agencies agreed process.

More information about children and young people in Leicester, Leicestershire and Rutland can be found in the Joint Strategic Needs Analysis document that each area produces. Links to the latest versions are can be found in our list of key documents here <link>.

Current joint working

The four agencies commission a range of provision to support children, young people and families with SEND. Details of these services can be found here <link>. These services combine to offer a range of support and to improve outcomes for this group. There are increasing amounts of joint commissioning and partnership working across the agencies, including:

- A Joint Planning and Transformation Group for Children has been established to identify and deliver on joint commissioning opportunities for children's services across Leicester, Leicestershire and Rutland.
- The Joint Solutions Panels between each of the Council's and CCG reviews the complex needs of children and young people where there is a need for joint co-ordination and personalised funding.
- Council and CCG representatives attend the monthly in-patient Mental Health bed management meeting working with case manager from specialised commissioning to plan and support discharge of vulnerable children who often have SEND.
- Joint CCG and Council senior officers have responsibilities across the Transforming Care (TCP) agenda, delivering service improvement for all age learning disability and autistic spectrum disorder services to ensure community care and reduce in-patient admissions
- Leicester, Leicestershire and Rutland Future in Minds (FIM) Board having oversight of delivery of the Mental Health Transformation Plan
- The SEND improvement boards are multi-agency forums for Councils and CCG's to improve provision, activity and outcomes. Two boards cover the Leicestershire and Rutland and Leicester with the Councils and the CCG present on each. Robust plans to oversee change are monitored at the boards and these provide a regular, joint forum to discuss issues and barriers and to collaborate
- Local authorities and the CCG have also collaborated through work on supporting the transition to adulthood with examples of joint plans or governance arrangements to support this.
- The regional commissioning group for children and young people, bringing commissioners from Councils across the region together to discuss issues arising and the common market. The group has recently collaborated on establishing a regional dashboard of placements, giving access to data on where placements have been made and

the cost of these amongst other data sets. The group is currently working on sharing quality assurance information to improve the intelligence held by each Council on the quality of placements made.

Engagement and co-production in commissioning

We will involve children, young people, families and carers in all of our work to plan and review services. Wherever possible, we will take a co-production approach. The way in which we do this will vary for each piece of work but there are some key drivers to achieving this.

We will work with our engagement forums to people that use our services to understand the issues and to seek views on how to commission our services. These include:

- Big Mouth Forum (Leicester City)
- Parent Carers Forum (Leicester City)
- Leicestershire Parent and Carer Forum
- Rutland Voice
- Healthwatch

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₂ We want to work together with children, young people and families to help us understand their experiences of living with SEND and using our services. We will work with them to gain insight into services from their points of view and to work together to plan services for the future that represent the best use of the resources we have. Where solutions cannot be found, for example when finances don't allow or there are legal limitations to what we can do, we will use this engagement to help people understand the situation.

Governance and accountability

This strategy is owned by the three Councils in Leicester, Leicestershire and Rutland and the Leicester, Leicestershire and Rutland CCG's.

It was developed by a working group, reporting into the Children's Planning and Transformation Partnership. The Partnership is a subgroup of the Leicester, Leicestershire and Rutland Children and Young People's Senior Leadership Group, which in turn reports to the Sustainability and Transformation Partnership (STP) for Children and Young People.

It is proposed that a joint commissioning board across Leicester, Leicestershire and Rutland will implement the action plan, tackle any issues or barriers arising and establish task and finish groups as needed.

The work of the board and progress on the delivery plan will be monitored by the Planning and Transformation Partnership and ultimately by the Senior Leadership Group.

Each agency will have its own reporting routes including joint commissioning boards and improvement boards etc. These will also help to assure the work and to keep a check on progress made.

The SEND Code of Practice <link> sets out specific roles and responsibilities for joint commissioning. These are summarised in the table below:

| Agency | Key responsibilities for SEND | Accountability |
|----------------------------------|---|--|
| Local authority | Leading integration arrangements for Children and Young People with SEN or disabilities. | Lead Member for Children’s Services and Director for Children’s Services (DCS) |
| Children’s and adult social care | Children’s and adult social care services must co-operate with those leading the integration arrangements for children and young people with SEN or disabilities to ensure the delivery of care and support is effectively integrated in the new SEN system. | Lead Member for Children and Adult Social Care, and Director for Children’s Services (DCS), Director for Adult Social Services (DASS). |
| Health and Wellbeing Board | The Health and Wellbeing Board must ensure a joint strategic need’s assessment (JSNA) of the current and future needs of the whole local population is developed. The JSNA will form the basis of NHS and local authorities’ own commissioning plans, across health, social care, public health | Membership of the Health and Wellbeing Board must include at least one local elected councillor, as well as a representative of the local Healthwatch organisation. It must also include the local DCS, DASS, and a senior CCG |
| Clinical Commissioning Group | To co-operate with the local authority in jointly commissioning services, ensuring there is sufficient capacity contracted to deliver necessary services, drawing the attention of the local authority to groups and individual children and young people with SEN or disabilities, supporting diagnosis and assessment, and delivering interventions and review. | CCGs will be held to account by NHS England. CCGs are also subject to local accountability, for example, to the Health and Wellbeing Board for how well they contribute to delivering the local Health and Wellbeing Strategy. Each CCG has a governing body and an Accountable Officer who are responsible for ensuring that the CCG fulfils its duties to exercise its functions effectively, efficiently and economically and to improve the quality of services and the health of the local population whilst maintaining value for money. |
| NHS England | NHS England commissions specialist services which need to be reflected in local joint commissioning | Secretary of State for Health |

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| Agency | Key responsibilities for SEND | Accountability |
|--|--|---|
| | arrangements (for example augmentative and alternative communication systems, or provision for detained children and young people in relevant youth accommodation). | |
| Healthwatch | Local Healthwatch organisations are a key mechanism for enabling people to share their views and concerns – to ensure that commissioners have a clear picture of local communities’ needs and that this is represented in the planning and delivery of local services. This can include supporting children and young people with SEN or disabilities. | Local Healthwatch organisations represent the voice of people who use health and social care services and are represented in the planning and delivery of local services. This can include supporting children and young people with SEN or disabilities. They are independent but funded by local authorities. |
| Maintained nurseries and schools (including academies) | Mainstream schools have duties to use best endeavours to make the provision required to meet the SEN of children and young people. All schools must publish details of what SEN provision is available through the information report and co-operate with the local authority in drawing up and reviewing the Local Offer. Schools also have duties to make reasonable adjustments for disabled children and young people, to support medical conditions and to inform parents and young people if SEN provision is made for them. | Accountability is through Ofsted and the annual report that schools have to provide to parents on their children’s progress. |
| Colleges | Mainstream colleges have duties to use best endeavours to make the provision required to meet the SEN of children and young people. Mainstream and special colleges must also co-operate with the local authority in drawing up and reviewing the Local Offer. | Accountable through Ofsted and performance tables such as destination and progress measures. |

Commissioned services across health, education, social care and public health

The list below details the provision that each agency is funding or directly delivering, correct as of August 2020. These are services primarily focused on children with SEND but some reference is also made to universal provision for all children, young people and/or families. It should be noted that this does not include services directly commissioned by schools and colleges or by NHS England.

Table 1: Services commissioned by councils

| Services commissioned by Councils | Spend in the area (approximate) |
|--|---------------------------------|
| Education placements | £116.9 million |
| Education psychology | £2.7 million |
| Short breaks/respite | £2.3 million |
| Specialist nursery provision | £2.4 million |
| Assessment and support teams | £2.3 million |
| Specialist teaching service | £6.6 million |
| Domiciliary support | £444k |
| Social work provision (for disabled children) | £1.1 million |
| 0-19 healthy child provision (health visitors, school nurses etc for all children) | £16.2 million |
| Early help (for all children) | £18.5 million |

85 Table 2: Services commissioned by councils

| Services commissioned by CCG's | Spend in the area (approximate) |
|--|---------------------------------|
| Child and Family Support Service (CAFSS) | £1.8 million |
| Community Paediatric Medical Services | £4.3 million |
| Children's Continuing Care 0-18 | £2.7 million |
| Adult Continuing Health Care (CHC) 18+ | £200k |
| Speech and Language Therapy | £1.5 million |
| Children's Physiotherapy | £1.25 million |
| Children's Occupational Therapy | £1 million |
| Children's Community Nursing | £364k |
| CAMHS Triage and Access | £200k |
| CAMHS Eating Disorders | £868k |
| CAMHS Outpatients City and County | £7.97 million |
| | |

| Services commissioned by CCG's | Spend in the area (approximate) |
|--|---------------------------------|
| CAMHS LD Team | £1.1 million |
| CAMHS Crisis Team | £1.35 million |
| CAMHS PBS | £108k |
| Early Intervention | £380k |
| Community equipment loans across all organisations | £195,000 |

Linked strategies and documents

There are a range of linked strategies and documents held jointly or by individual agencies. These linked documents and their relationship to this commissioning strategy are listed below.

| Strategy/Document | Relationship to this commissioning strategy | Link |
|--|--|---|
| Leicester City All Age Commissioning Strategy | Covers commissioning intentions for all age services in the City only from the Local Authorities position. | https://www.leicester.gov.uk/media/186505/all-age-commissioning-strategy-2020-2025.pdf |
| Leicester City All Age Market Position Statement | A statement for the market (providers of services) on the anticipated direction of travel and key messages | https://www.leicester.gov.uk/media/186504/all-age-market-position-statement-2020.pdf |
| Leicester City SEND Strategy | The city's strategy for SEND services | https://www.leicester.gov.uk/media/186416/strategy-for-supporting-children-and-young-people-with-special-educational-needs-and-disabilities-send-2017-2022.pdf |
| Local Offer Leicester City | Details of services and support available to children with | https://families.leicester.gov.uk/local-offer/ |

| Strategy/Document | Relationship to this commissioning strategy | Link |
|--|---|---|
| | SEND and their families | |
| Leicester City Joint Transitions Strategy | A strategy for the city, looking at how best to improve the journey into adulthood for young people | https://www.leicester.gov.uk/media/185659/the-joint-health-social-care-and-education-transitions-strategy-2019-2022-plain-text.pdf |
| Leicester City Early Help Strategy | The city's strategy for providing early help and support | https://www.leicester.gov.uk/media/186713/leicester-early-help-strategy-2020-2023.pdf |
| Leicester City CYP JSNA | A Joint Strategic Needs Analysis (JSNA) looking at the needs of children in Leicester City | https://www.leicester.gov.uk/your-council/policies-plans-and-strategies/public-health/data-reports-information/jsna/cyp-jsna/ |
| NHS Long-Term Plan (CYP pages 45-54) | The Government's long term plan for NHS provision | https://www.longtermplan.nhs.uk/wp-content/uploads/2019/01/nhs-long-term-plan-june-2019.pdf |
| Leicester City Joint Health and Wellbeing Strategy | A health and wellbeing strategy for all Leicester residents, | https://www.leicester.gov.uk/media/177755/leicester_s_joint_health_and_wellbeing_strategy_2013-2016.pdf |

| Strategy/Document | Relationship to this commissioning strategy | Link |
|--|--|---|
| | including children and young people. | |
| Leicestershire JSNA (CYP Physical Health) | A Joint Strategic Needs Analysis (JSNA) looking at the needs of children in Leicestershire | https://www.lsr-online.org/uploads/children-and-young-peoples-physical-health.pdf?v=1590599655 |
| Leicestershire JSNA for children with SEND | A specific joint strategic needs analysis focusing on children with SEND | Awaiting publish |
| Leicestershire Joint Health and Wellbeing Strategy | A health and wellbeing strategy for all Leicestershire residents, including children and young people. | https://www.leicestershire.gov.uk/sites/default/files/field/pdf/2016/10/11/Leics%20JHWS%202017-22v2.pdf |
| Rutland JSNA | A Joint Strategic Needs Analysis (JSNA) looking at the needs of children in Rutland. | https://www.rutland.gov.uk/my-services/health-and-family/health-and-nhs/joint-strategic-needs-assessment/ |

| Strategy/Document | Relationship to this commissioning strategy | Link |
|---------------------------------------|---|---|
| Rutland JSNA for children with SEND | A specific joint strategic needs analysis focusing on children with SEND | Awaiting publish |
| Rutland Health and Wellbeing Strategy | A health and wellbeing strategy for all Rutland residents, including children and young people. | https://www.rutland.gov.uk/my-services/health-and-family/health-and-nhs/health-and-well-being-strategy/ |
| Rutland SEND and Inclusion Strategy | A strategy for SEND for Rutland Council | https://search3.openobjects.com/mediamanager/rutland/fsd/files/send_and_inclusion_strategy_-_updated_september_2019_-_pdf.pdf |
| Future in Minds Transformation Plan | Plan for delivering a range of emotional, mental health and wellbeing services | https://www.leicestercityccg.nhs.uk/my-health/childrens-health/future-in-mind-plan-mental-health-children-young-people/future-in-mind-transformation-plan-2018-2020/ |
| Maternity Transformation Plan | A plan for transforming maternity services | https://www.leicestermaternity.nhs.uk/betterbirths/ |

| Strategy/Document | Relationship to this commissioning strategy | Link |
|--|---|---|
| Leicester, Leicestershire and Rutland Learning Disability Strategy | A strategy for services and support for people with a learning disability | https://www.leicester.gov.uk/media/186869/joint-health-and-social-care-learning-disability-strategy.pdf |
| Leicestershire Preparing for Adulthood Strategy | A protocol for professionals working with young people with SEND | https://www.leicestershire.gov.uk/sites/default/files/field/pdf/2019/2/1/Preparing-for-adulthood-strategy.pdf |
| Leicestershire Whole Life Disability Strategy | A whole life approach to supporting people with disabilities | https://protect-eu.mimecast.com/s/mKpKC83OVSOQLInuwJsUm?domain=leicestershire.gov.uk |
| Leicestershire SEND and Inclusion Strategy | A strategy for SEND for Leicestershire County Council | Awaiting publish |

Appendix B – summary of engagement feedback

Introduction

A statutory consultation was carried out between 10th December 2020 – 31st January 2021 to gather feedback from stakeholders on the draft Joint SEND strategy.

The 3 Councils in Leicester City, Leicestershire, and Rutland along with the 3 Health Commissioners (Clinical Commissioning Groups) East Leicestershire and Rutland, West Leicestershire and Leicester City are working together on a joint strategy. These partners are working together to commission services for children and young people with Special Educational Needs and/or Disabilities (SEND). These organisations are working together as there are several needs across the area which are similar and related, and many of these services are the same.

The consultation was carried out to seek views on the strategy and action plan to ensure the strategy fully reflects the views of those represented, including service providers and individuals in receipt of services commissioned by the organisations listed above.

This feedback will inform the final version of the strategy and influence which priorities and actions will be concentrated on first. This report details the findings and analysis from the recent survey.

Methodology

Each local authority and CCG area completed their own promotion of the survey. A detailed communication plan was produced by each authority and partners to ensure the survey was promoted to wider stakeholders.

Emails and newsletters:

Emails were circulated to individuals both internally and externally, including:

- Mainstream schools & colleges
- Special schools
- Early years settings
- Independent school providers
- Short break providers
- Employers of young people with SEND
- Staff from all 3 local authorities and across the CCG

Forums:

Presentations were given to the following groups:

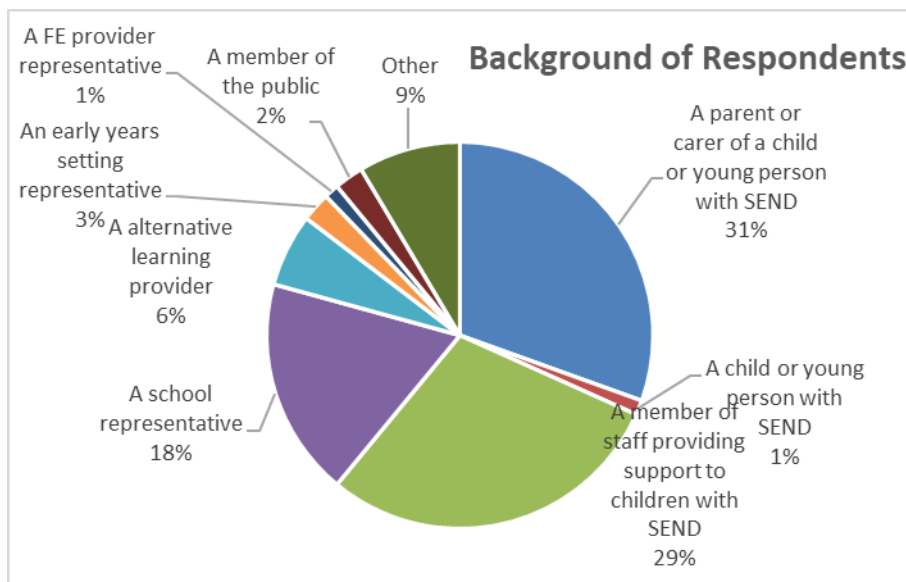
- Parent carer forum
- Big Mouth forum
- FE colleges meeting
- CLASS
- ISP event
- Schools forum

During all phases of promotion individuals were introduced to the strategy, explained the need to consult and provided with the link to the survey.

Survey:

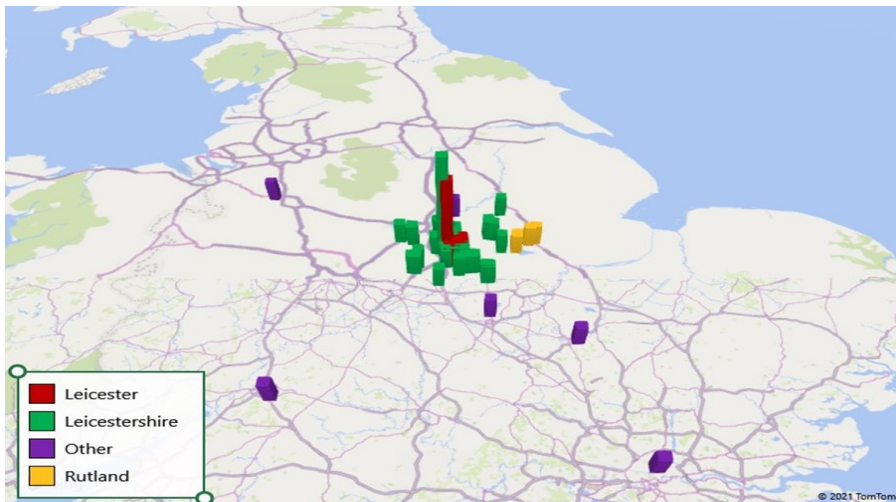
A survey was developed to understand what individuals' views were towards the joint SEND strategy. A total of **82 responses** were received, all of these were via the online platform.

Of those respondents they were asked to identify themselves for example, a member of the public (parent, young person) or professional. Below is a breakdown of response groups:



Respondents were also asked to provide their postcode on an optional basis to provide an understanding of the areas who most took part in this survey. 75 respondents provided a postcode representing which areas across Leicester, Leicestershire & Rutland took part in the survey the most:

- Leicester – 17 respondents
- Leicestershire – 39 respondents
- Rutland – 5 respondents
- Other – 7 respondents



Headline findings

The survey was broken down into several areas:

- Comments on vision and priorities of strategy
- Ranking each priority's actions in order of priority
- Commenting on actions
- Commenting on overall strategy

Comments on vision and priorities of the strategy

Respondents were asked for their feedback on the vision of the strategy and to rank and comment on future priorities.

Vision

There were 49 responses on the vision of the strategy. The majority of respondents agreed with the vision with many stating that *"it is a really good idea to work together to commission services."* Others also stated it

will also help when children transfer within the county and will mean consistency across services.

Ranking of strategy priorities

Although most respondents were pleased with the list of priorities a common theme was that some of the priorities (F, A, B, E) are not as clear as others. Some actions are very general and not specific, as the actions do not give information on what services are being referred to. The strategy should be using SMART objects to measure these actions. It was also stated that priorities should be considered against the full 'as is' status.

The below table provides the most to least ranked priorities:

| Item | Ranking |
|---|---------|
| E (Align our services with those for adults, to prepare young people for adulthood) | 5.78 |
| C (Quality assure our provision and contracts) | 4.15 |
| G (Jointly review our existing provision to ensure it meets needs and provides good quality support) | 3.85 |
| B (Plan to meet needs within available resource, forecast for the future) | 3.49 |
| A (Build on our understanding of need and demand) | 3.43 |
| D (Examine how we can provide greater flexibility and tailored packages of support) | 2.61 |
| F (Develop our joint working and governance approaches) | 2.09 |

The below table details suggestions and questions regarding the overall strategy and priorities:

| Suggestions/questions |
|--|
| Will this reduce CAMHS waiting times, reduce starting the process again if families move from one area to another |
| Joint working approaches and preventing escalation will require that NHS clinicians provide assessments and reports for Tribunal Appeals |
| Support needs for individual children should be clear and detailed and regarding, regardless if they have an EHCP |
| Compatibility of provision across areas so those schools living on boards can access support across borders |

| |
|---|
| Front line staff need to be trained in SEND and Mental Health awareness |
| Strengthen links with schools particularly mainstream settings and use consistent language regarding SEND |
| Ensuring education providers can meet the demands with EHCPs and offer financial support for additional resources |
| Train school SENCO's, so there is a clear & concise pathway to support or request for assessment. |
| More guidance and correct information available to children and parents/carers who use services |
| Commission expertise with a holistic approach in all that sought in supply chain. Follow models that work and work with both neuro typical and SEN that are experienced. Evaluate, learn and change what is not working, before it is too late. |

Ranking and comments of priority actions

Throughout the survey there were a range of common themes as stated below:

- Lack of knowledge and services in autism and FASD there should be more focus on these areas
- More joint working between education and health, need to overcome language divide
- Focus on bespoke models and packages for individuals
- Better provisions in specialist schools, but not in mainstream schools
- Early preparation (14 years onwards) for adulthood is vital for planning outcomes, fear of children leaving education and receive no support, more working between education (especially post 16) and health and social care
- EHCPs need to include section on health, mental health and social care
- Work with parents, carers and young people to understand their views

Priority 1: Build on our understanding of need and demand

There were on average 74 responses to this part of the question. Below are how these actions were ranked:

| Priority 1 | Average Rank |
|---|---------------------|
| E) Engage with children, young people, and families to understand what their priorities are in terms of service provision / improvement. | 1.76 |
| C) Ensure we have projections for service need per year group to support allocation of school places and key health and social care provision. | 3.34 |
| G) Gather information on cases where a standard service response has not met need. Build an evidence base to show where changes are needed. | 3.73 |
| B) Review the information gathered in each agency in relation to outcomes, looking for ways to improve practice and to provide consistent data across the area. | 4.03 |
| A) Ensure that information collated on placement/service access is captured on systems to allow for easy reporting and analysis. This should include placement cost and details of those refused a service because it was full. | 4.20 |
| D) Make use of the regional information gathered on education placements to ensure this feeds into decisions and spend on placements. | 5.07 |
| F) Develop a commissioning dashboard of key information to be reviewed frequently across the area. | 5.72 |

The common theme of priority 1 was that it is extremely important to gather views of children, young people, and families to decide what the focus of commissioning should be. There was also an emphasis on considering the child's educational and emotional needs above all else.

Priority 2: Plan to meet needs within available resource, forecast for the future

There were 75 responses to this part of the question. Below are how these actions were ranked:

| Priority 2 | Average rank |
|--|---------------------|
| A) Jointly plan for education, health, and social care provision to best meet the volume and type of need in coming years. | 1.40 |

| Priority 2 | Average rank |
|--|---------------------|
| B) Plan a series of service reviews where we feel that provision isn't currently meeting need or there are opportunities to join up across the area (proposals are listed under priority 7). | 1.60 |

Although many welcomed this priority, many felt that this might be difficult to scope and needs must be met according to legislation and not what resources are available. Feedback also included it not being possible to meet needs within resources, as stated by the Care Act which states resources should be developed to meet need. Work on gaining an understanding from parents of their wants and needs should be undertaken. Forecasting for the future also depends on the quality of data available which may not be obtainable.

Some were left anxious about this priority and felt it contradicted with further priorities in the strategy *"I think this statement could lead to inflexibility and restrictive options. It seems to contradict priority 4 'examine how we can provide greater flexibility and tailored packages of support'."*

Priority 3: Quality assure our provision and contracts

There were 73 responses to this part of the question. Below are how these actions were ranked:

| Priority 3 | Average rank |
|---|---------------------|
| A) Ensure a robust quality assurance process is in place for all external service provision. Consider how to hold and share this information across agencies and how to share the load of QA. To include an approved approach to QA for joint funded cases. | 1.34 |
| B) Jointly develop a timetabled programme of quality assurance for external provision across the area. | 2.03 |
| C) Continue to develop regional approaches to information sharing in relation to quality of placements out of area. | 2.63 |

Many agreed that there should be a focus on quality assurance, should be devised jointly and be consistent. Respondents felt it was important to streamline this process because it is onerous for providers if they are having to account to a plethora of commissioners. Respondents also welcomed this priority as it will help to reduce the amount of out of area placements and provide better value for money.

Priority 4: Examine how we can provide greater flexibility and tailored packages of support

There were 76 responses to this part of the question. Below are how these actions were ranked:

| Priority 4 | Average Rank |
|---|---------------------|
| C) Jointly develop a pre, diagnostic and post support pathway for children with Neurodevelopmental needs. | 1.97 |
| B) Examine how greater flexibility can be introduced for cases that don't fit with our standard service offer (link to action above). | 2.26 |
| A) Review the personal budget agenda across organisations and how this links to SEND. | 2.72 |
| D) Look at development of the marketplace for services for young people with ASD. | 3.03 |

Many respondents welcomed this priority and feel it will provide more children with better support. Respondents felt reviewing budgets and having greater flexibility is very important as some budgets currently seems illogical and don't always reach those that need it. Respondents also emphasised using a one style fits all agenda doesn't work and there needs to be a focus on bespoke models.

Many felt that ASD is not the only issue and there should be a marketplace of services for all children with SEND. A respondent also felt that describing ASD as a marketplace was a poor way to describe services for autism, which could be changed to the marketplace must be accountable and have accreditation.

Priority 5: Align our services with those for adults, to prepare young people for adulthood

Respondents felt that priority 5 was very important as reflected to begin with in the rankings. There was only one action point within this priority:

Review our transition/preparing for adulthood plans and approaches, looking for opportunities to work together as a system to improve the transition experience for young people.

Most respondents indicated that more work needs to be done on transitions as there is a fear that many will fall through the gaps. Comments focused on this work needing to be done early and more work between education and health.

Priority 6: Develop our joint working and governance approaches

There were 73 responses to this part of the question. Below are how these actions were ranked:

| Priority 6 | Average rank |
|---|---------------------|
| A) Establish an Leicester, Leicestershire and Rutland Joint Commissioning Board for SEND to oversee this action plan | 1.96 |
| B) Carry out an audit of commissioning expectations in the SEND COP, looking at what we do now and where we need to do more. | 2.25 |
| D) Jointly review arrangements for joint funded cases to ensure roles and responsibilities are clear and appropriate documentation is in place. | 2.79 |
| C) Review data sharing arrangements in place to ensure these are fit for purpose. | 2.99 |

Priority 7: Jointly review our existing provision to ensure it meets needs and provides good quality support

There were on average 64 responses to this part of the question. Below are how these actions were ranked:

| Priority 7 | Average rank |
|---|---------------------|
| A) Jointly review our approach to high need children and young people, ensuring we are innovative and cost effective in our responses to need. | 2.89 |
| B) Jointly review provision for children and young people who have behaviours that challenge to ensure we are able to deliver a comprehensive offer of support, including key workers when needed | 3.03 |

| Priority 7 | Average rank |
|--|---------------------|
| C) Examine the health support needed across our educational settings but particularly those with high clinical need children, to ensure our response is effective. | 3.06 |
| E) Ensure those children with LD/ASD who are at risk of admission to a hospital setting have a key worker identified. | 4.72 |
| D) Jointly review personal care offer / domiciliary support to understand how best to purchase, provide and quality assure. | 5.75 |
| F) Jointly review short breaks and respite provision to ensure it best meets need and to clarify who can access. | 5.95 |
| G) Jointly review provision at the hospital school to ensure it reflects demand and meets need. | 6.42 |
| H) Jointly examine the current Assistive Technology offer and the potential gains in expanding this. | 6.87 |
| J) Review services for children with a hearing or visual impairment to look for opportunities for greater collaboration. | 7.37 |
| I) Review system and contractual arrangements for CYP in residential schools to ensure they receive hearing, sight and dental checks. | 8.37 |

Many felt that these actions were clear but might be relevant to some and not others. There were comments on there being far too many actions to order by priority, and that they are all equally important. One respondent also questioned “*what happens to the lower priority. Q? versus Q1 of the first year Delivery Plan, Year 2 of the Delivery Plan, or No Longer a priority as if everything is seen as a priority then nothing actually is*”

Final feedback on overall strategy

Overall respondents were pleased with the strategy and felt it was a positive and clear strategy. Respondents welcomed joint working and emphasised the need for consistency throughout all agencies. Feedback included:

- Ensure to use clear, simple language and ensure no one is left out in processes

- Make sure that local authorities really listen to children, young people, and their families
- The strategy needs to involve an audit and an honest review

As previously discussed, one respondent felt that the strategy wasn't clear. They feel it needs to set out what the strategy is trying to achieve. They stated that it doesn't sound like an action plan as there are too many review actions which won't achieve an outcome or an action. They will only result in recommendations.

Comments on groups not reflected

- Missing point of if the strategy is benefiting children, south of County is lacking a local offer
- Not seeing any impact on children, especially if they are in rural areas
- Not enough focus on individuals
- Not enough emphasis on schools, communities & societies being as inclusive as possible to those with SEND

Appendix C – Action Plan

The following sets out proposals for a year 1 action plan, identifying priority actions using the rank order suggestions from respondents as part of the engagement on the strategy. The proposals for year 2 and 3 rankings are listed in the second table and will be more thoroughly scoped as part of the planning for each year. The group may choose to bring in new actions or to re-prioritise the order if it is felt that a current action is dependent on another taking place.

The Joint Commissioning Delivery Group will hold a more detailed action plan with clear steps to be taken, milestones, leads and timescales to enable the Group to monitor progress.

| | Action | Where do we want to be? | How will we get there? |
|---|---|---|--|
| 1 | Ensure we have projections for service need per year group to support allocation of school places and key health and social care provision. | All Councils have data and projections to show the volume of provision needed for their area, but this is also viewed on a Leicester, Leicestershire and Rutland footprint to look at overall trends and shared with health colleagues to inform whole system planning. | We will each share our data on projections for the level of need for future years. This data will collectively form a picture of the changing need and demand on services we anticipate in future years. |
| 2 | Jointly plan for education, health, and social care provision to best meet the volume and type of need in coming years. | This data is shared across health partners as well as Council's and informs whole system planning e.g. social care, health and areas other than educational placements. Consideration is given to the sharing of resource, particularly for small cohorts (e.g. developing a specialist service for small numbers across the area) or where there is capacity in one area and demand in another. | Using the data from action 1, we will collectively look at the impact this will have on services across education, social care and health and develop plans to ensure we are ready. We will work with our provider markets (internal and external) to ensure plans involve those delivering services. |

| | Action | Where do we want to be? | How will we get there? |
|---|--|--|---|
| 3 | Ensure a robust quality assurance process is in place for all external service provision. Consider how to hold and share this information across agencies and how to share the load of QA. To include an approved approach to QA for joint funded cases. | A system exists for sharing quality concerns or outcomes of quality visits across the Leicester, Leicestershire and Rutland area. An agreed protocol is in place between Council's and CCG's re quality assurance of joint funded placements and the responsibilities/involvement of both parties. | Engage with children, young people and families to ask their views on our QA approach and whether there are additional things they would like us to explore We will share details of how quality checks are carried out currently. We will look at ways to make this more efficient/reduce duplication. We will agree a protocol setting out how we will look at quality collectively in the future, rather than separately. |
| 4 | Jointly develop a timetabled programme of quality assurance for external provision across the area. | All agencies have one overall timetable for quality assurance focus, regularly reviewing and updating this as it changes. All agencies to consider whether there are opportunities for joint visits or agreed leads where timescales are similar. | Linked to action 3 above, we will co-ordinate timetables for quality visits or focus that reduces duplication |
| 5 | Jointly develop a pre, diagnostic and post support pathway for children with Neurodevelopmental needs. | A proposed pathway model to be proposed following multi-agency involvement by May 2021. Final proposed pathway to then follow engagement process for feedback at system wide groups. | Parent and Carer Forums continue to be involved at all stages of the pathway development CYP and Family engagement of proposed model will take place in line with system wide engagement. |
| 6 | Examine how greater flexibility can be introduced for cases that don't fit | To enhance current provision through Joint Assessment Panel / Joint Solutions Panel. | Review current provision with system leads from Health, Local Authority and Personalisation Teams. |

| | Action | Where do we want to be? | How will we get there? |
|---|--|--|--|
| | with our standard service offer (link to action above). | | |
| 7 | Review our transition/preparing for adulthood plans and approaches, creating opportunities to work together as a system to improve the transition experience for young people. | Leicester, Leicestershire and Rutland joint system to take this forward as the next joint piece of work, getting to grips with what is needed to improve transition and planning for actions required to make this happen. | <p>We will establish a steering group for transitions</p> <p>We will draft strategy/plan of action for the area</p> <p>We will seek the views of parents/carers/children and young people and other interested stakeholders</p> <p>We will identify what needs doing to improve the transitions experience and the actions needed to ensure this happens</p> <p>Publish strategy and related action plan and governance structure for taking actions forward</p> |
| 8 | Establish a Leicester, Leicestershire and Rutland Joint Commissioning Delivery Group for SEND to oversee this action plan | A permanent delivery group is established to ensure delivery of the actions contained in this strategy over the next 3 years. | <p>We will approve terms of reference</p> <p>We will arrange regular meetings to take the work forward</p> <p>We will agree an action plan to ensure work is delivered</p> |
| 9 | Jointly review our approach to high need children and young people, ensuring we are innovative and cost effective in our responses to need. | <p>Partners have a collective understanding on a definition of 'high need'.</p> <p>Partners understand the needs of these children and young people and have plans</p> | <p>We will agree on a definition of 'high need' for this piece of work</p> <p>We will take steps to understand the need of these children and young people</p> |

| | Action | Where do we want to be? | How will we get there? |
|----|--|--|---|
| | | <p>to meet these needs where it falls within the remit of their agency.</p> <p>Strategic co-ordination is in place across the system to set out the plan for these children and to monitor effectiveness</p> <p>Clear arrangements for funding are available and understood.</p> | <p>We will understand the support offer available in the area to meet this need</p> <p>We will examine whether there is unmet need, how this could be met and the duties to ensure provision is offered to these children, including funding responsibilities.</p> |
| 10 | <p>Jointly review provision for children and young people who have behaviours that challenge to ensure we are able to deliver a comprehensive offer of support, including key workers when needed.</p> | <p>Partners have an understanding of the main impacts of behaviour that challenges e.g. family breakdown, school exclusion etc.</p> <p>Partners have an understanding of what might support in preventing or managing these challenges and what support services already exist for access.</p> <p>Agencies and families are supported with training and understanding around how to prevent and manage these challenges and/or signposted to support agencies.</p> <p>Where necessary, there is a mechanism for escalating concerning cases for additional support to prevent breakdown.</p> | <p>We will look at the impact behavioural challenge can have on children young people, families and the services provided.</p> <p>We will understand the current support offer in the area and best practice from across the country</p> <p>We will identify any gaps in provision or ways in which the system could be strengthened to ensure support is accessed where needed</p> |
| 11 | <p>Examine the health support needed across our educational settings but particularly those with high clinical need children, to ensure our response is effective.</p> | <p>CCG funded provision in schools where there is a statutory responsibility to meet the needs of children at that school.</p> | <p>We will discuss with schools and others working in the system to understand current practice and provision</p> |

| | Action | Where do we want to be? | How will we get there? |
|----|--|--|--|
| | | <p>Support to schools wishing to purchase additional support to add to the statutory offer, especially around clinical governance.</p> <p>A good understanding in mainstream schools, likely through SENCO's, of provision and thresholds.</p> | <p>We will identify arrangements that schools are making directly for provision of health support and the funding arrangements for this</p> <p>We will identify areas for improvement e.g. through protocols or guidance, through changes to funding arrangements etc.</p> |
| 12 | Collectively review our information, advice and guidance offer to children, young people and families with SEND to examine whether joint approaches would be beneficial. | Partners make an informed decision on whether to jointly commission (with jointly commissioned services in place if required) | <p>We will look at each of our current offers/service provision</p> <p>We will look at the risks and opportunities of commissioning this together rather than separately</p> <p>We will secure joint provision if this is agreed as the best way forward.</p> |
| 13 | Raise awareness of the Local Offer amongst families and professionals. All partners are contributing relevant, comprehensive and accessible information coproduced with families and young people. | <p>Professionals are aware and signpost families to use the Local Offer website.</p> <p>The Local Offer is used to access information and is valued by young people and families. It is responsive to their needs and aspirations.</p> <p>The Local Offer provides clear, comprehensive, accessible and up to date information about the available provision and how to access it.</p> | <p>We will work on a joint promotional / communications campaign across Leicester, Leicestershire and Rutland to raise awareness amongst families and professionals</p> <p>We will use platforms and social media channels that are relevant for today's families to support engagement and be responsive to their needs.</p> <p>We will carry out a mapping exercise of current Health content across Leicester, Leicestershire and Rutland to ensure relevant,</p> |

| | Action | Where do we want to be? | How will we get there? |
|--|--------|---|--|
| | | <p>The Local Offer is coproduced with professionals and families to ensure information reflects needs</p> <p>LO is accessible and reflects the current ways children and families access information and support online</p> | <p>up to date and consistent information is shared across the 3 areas. Information produced and shared is accessible for young people and remains person centred</p> <p>We will work to ensure the Local Offer provides clear comprehensive accessible and up to date information about the available provision and how to access it.</p> <p>Utilise existing engagement groups and new mechanisms to inform and develop the Local Offer website.</p> <p>We will use the gaps identified to inform commissioning priorities We will work together to identify a LO champion in Health and LA</p> |

Cross cutting themes that we should consider when working on each action:

| Theme |
|--|
| How do we involve children, young people and families in this action? |
| How do we explain this system or these changes to children, young people and families? |
| How do we approach this action together, as a whole system, including wider partners? |
| Have we approached this across education, social care and health? |
| How do we engage, inform and train the workforce on this process or these changes? |
| How do we ensure early identification and intervention takes place? |

Future actions and proposed year order (as per ranking at engagement):

| Action | Suggested Year |
|--|----------------|
| Gather information on cases where a standard service response has not met need. Build an evidence base to show where changes are needed. | Year 2 |
| Review the information gathered in each agency in relation to outcomes, looking for ways to improve practice and to provide consistent data across the area. | Year 2 |
| Plan a series of service reviews where we feel that provision isn't currently meeting need or there are opportunities to join up across the area (proposals are listed under priority 7). | Year 2 |
| Continue to develop regional approaches to information sharing in relation to quality of placements out of area. | Year 2 |
| Review the personal budget agenda across organisations and how this links to SEND. | Year 2 |
| Carry out an audit of commissioning expectations in the SEND COP, looking at what we do now and where we need to do more. | Year 2 |
| Jointly review arrangements for joint funded cases to ensure roles and responsibilities are clear and appropriate documentation is in place. | Year 2 |
| Ensure those children with LD/ASD who are at risk of admission to a hospital setting have a key worker identified. | Year 2 |
| Jointly review personal care offer / domiciliary support to understand how best to purchase, provide and quality assure. | Year 2 |
| Jointly review short breaks and respite provision to ensure it best meets need and to clarify who can access. | Year 2 |
| Ensure that information collated on placement/service access is captured on systems to allow for easy reporting and analysis. This should include placement cost and details of those refused a service because it was full. | Year 3 |
| Make use of the regional information gathered on education placements to ensure this feeds into decisions and spend on placements. | Year 3 |
| Develop a commissioning dashboard of key information to be reviewed frequently across the area. | Year 3 |
| Look at development of the marketplace for services for young people with SEND, starting with where we are seeing the greatest need or most pressing changes occurring. | Year 3 |
| Review data sharing arrangements in place to ensure these are fit for purpose. | Year 3 |
| Jointly review provision at the hospital school to ensure it reflects demand and meets need. | Year 3 |
| Jointly examine the current Assistive Technology offer and the potential gains in expanding this. | Year 3 |
| Review services for children with a hearing or visual impairment to look for opportunities for greater collaboration. | Year 3 |
| Review system and contractual arrangements for CYP in residential schools to ensure they receive hearing, sight and dental checks. | Year 3 |

Appendix D – changes made to the strategy as a result of feedback

| Change requested | Where can this be seen? |
|--|--|
| One of our actions was to 'Look at development of the marketplace for services for young people with ASD'. It was felt that development was needed across the whole market, not just for those with ASD. | The action is now listed as 'Look at development of the marketplace for services for young people with SEND, starting with where we are seeing the greatest need or most pressing changes occurring' |
| Suggestion that the strategy was not specific, not SMART and didn't contain enough information on the 'as is' position. | The action plan developed from engagement feedback contains a set of specific actions, states where we want to get to, where we are now and gives timescales for the work. |
| A strong message throughout the engagement was about the need to ensure early identification and intervention to try to prevent the escalation of need which will require more intervention further down the line. This would include work with mainstream school settings in particular. As this can apply across many of the actions, this has been proposed as a cross cutting theme. | Cross cutting commitment to ask, 'How do we ensure early identification and intervention takes place?' |
| Priority 2 during the engagement was 'plan to meet need within available resource, forecast for the future'. Concern was expressed that resource shouldn't be a limiting factor, it should be legislation i.e. statutory responsibility. | The priority has been changed to state 'plan to meet statutory need within available resource, forecast for the future'. |
| Text during the engagement read 'Review our transition/preparing for adulthood plans and approaches, looking for opportunities to work together as a system to improve the transition experience for young people'. One respondent suggested we should be making these opportunities, rather than looking for them. | Text now reads as 'Review our transition/preparing for adulthood plans and approaches, creating opportunities to work together as a system to improve the transition experience for young people' |
| A request was received from all partners to include an action looking at the IAG provision collectively. | This has been added as a new action to year 1. |

| Change requested | Where can this be seen? |
|---|--|
| <p>One of our actions was to 'Engage with children, young people, and families to understand what their priorities are in terms of service provision / improvement'. Whilst this was obviously very important and formed part of the engagement on the strategy where views were sought on the ranking of actions, it also forms a cross cutting action that should be considered in all pieces of work we do. This has therefore been removed as a specific action and included as part of the cross-cutting commitment.</p> | <p>Cross cutting commitment to ask during each piece of work 'How do we involve children, young people and families in this action?'</p> |

General cross cutting themes to be taken away and woven through the work

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| Theme |
|--|
| <p>The need to work with and listen to children, young people, parents and carers and to support them in understanding the systems, services and changes. This includes provision of guidance and information about what is available and who can access services and support.</p> |
| <p>The need to work with all partners, including schools, and with each other to ensure we are a joint system, working together</p> |
| <p>The need to consider the holistic needs of children across education, health and social care</p> |
| <p>The need to engage, inform and train the workforce on these processes and any changes made</p> |
| <p>The need to ensure early identification and intervention to prevent the escalation of need.</p> |

Appendix E – proposed governance structure for joint commissioning

| Meeting | Purpose | Who attends? | Reporting to |
|---|--|--|--|
| SEND joint commissioning delivery group | Delivery of SEND Joint Commission action plan | Commissioning leads, operational SEND leads (Local Authorities, CCG's) | <ul style="list-style-type: none"> SEND local Improvement boards/management arrangements Leicester, Leicestershire and Rutland Children Design Group |
| Local SEND boards/management structures | Delivery of SEND improvement agendas for local areas | Heads of Service and Directorate level officers from Local Authorities and CCG's | Each agencies directorate/senior management |
| Leicester, Leicestershire and Rutland Children Design Group | To provide system leadership for children and young people services | Local Authorities and CCG Directorate level leads | Linking in with each agencies individual governance arrangements |
| Joint integrated Commissioning Board | Delivery of Joint Commissioning Agenda for Leicester, Leicestershire and Rutland | Directorate level commissioning leads for Local Authorities and CCG's | Leicester, Leicestershire and Rutland Children and Families Strategic Leadership Group |



Special Education Needs & Disabilities (SEND) Inspection Revisit Outcome

For consideration by:
Children, Young people and Education Scrutiny Commission
Date: 2 September 2021
Lead director: Martin Samuels

Useful information

- Ward(s) affected: All
- Report author: Jane Pierce
- Author contact details: jane.pierce@leicester.gov.uk
- Report version number: 1

1. Summary

This report sets out the findings of the May 2021 Special Educational Needs and Disabilities (SEND) inspection revisit. It outlines what is required of the local area to continue to make improvements to support children and young people with special educational needs and/or disabilities.

In 2018, the Local Area (partners across Leicester: Local Authority, Health, Education and the Parent Carer Forum) received an inspection of the SEND local offer. The local offer sets out the support and services provided by the partners to children and young people with SEND in Leicester.

The 2018 inspection found that there were five areas of weakness:

- Area 1 - The lack of strategic planning to improve the outcomes for children and young people who have SEN and/or disabilities
- Area 2 - The poor quality of EHC Plans
- Area 3 - The assessment of children and young people's social care needs
- Area 4 - The lack of joint commissioning of services to support young people's health needs post 19
- Area 5 - The disjointed approach to the preparation for adulthood

The Local Area partners were required to produce a plan called the Written Statement of Action (WSOA) to set out how we intended to address those areas of weakness. The Department for Education (DfE) and NHS England also assigned advisors to support and challenge improvements.

During 2020, inspections were suspended due to the pandemic and resumed in April 2021. Our Local Area was subject to a SEND revisit between 4 and 7 May 2021. The inspection was carried out remotely.

During the SEND revisit, Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, as well as local authority and National Health Service (NHS) officers. They spoke to leaders, managers and staff from Leicester for education, health and social care about implementing the disability and special educational needs reforms.

Inspectors looked at a wide range of information about the performance of the local area partnership, including Leicester's self-evaluation of actions in relation to the WSoA. They reviewed quality and performance data, evidence about the local offer, joint commissioning and dip sampled 80 Education, Health and Care plans (EHCP's). The EHCPs detail the support requirements for individual children and young people.

Inspectors fed back to the local area that throughout their conversations and meetings with lots of different stakeholders, that there is a tangible pride and enthusiasm to work in Leicester city and that there is a shared ethos and vision for SEND by schools and education.

Inspectors commented that since the 2018 inspection, there have been significant changes to leadership of the local area. Leadership is now stable, with leaders across

education, health and social care services working well together. They now have a shared and ambitious vision for children and young people with SEND in Leicester. See appendix 1 for a visual overview of the SEND improvement journey since 2018.

As a result of the SEND revisit, Her Majesty's Chief Inspector (HMCI) and Care Quality Care (CQC) inspectors found **4 of the 5 areas** of weakness **had made sufficient** progress. Area 4 has not made sufficient progress. See appendix 2 for their published findings.

Following their findings, the local area was required to produce a plan to address the insufficient progress made in Joint Commissioning of Health needs post 19. The plan, called the Accelerated Progress Plan (APP) sets out the actions, evidence and impact expected to be achieved in 3-month milestones. See appendix 3 for the Accelerated Progress Plan approved by the DfE. See appendix 4 for the DfE approval of the Accelerated Progress Plan. It should be noted that NHS colleagues are leading on the APP, as the majority of improvements relate to health improvements.

The DfE and NHS England will call a six month review formal meeting in January 2022 in order to gain assurance that the actions undertaken have had the expected positive impact on outcomes for young people with SEND and their families.

The Local area continues to make wider improvements in Transforming SEND in Leicester City and these are set out in the Local Area SEND Transformation plan and the SEND Division's 3-year Strategy.

The SEND review will also be taken into consideration as part of the evidence base for the Ofsted Inspection of Local Authority Children's Services (ILACS), which is anticipated in the Autumn for the City.

2. Recommended actions/decision

The Children, Young People & Education Scrutiny Commission are asked to note the following and to provide feedback/comment

- a) The outcome of the revisit as detailed at Appendix 2.
- b) The approved Accelerated Action Plan, which sets out the improvements required for Area 4 - joint commissioning of services to support health needs post 19 as detailed at Appendix 3.
- c) The Regional DfE and NHS SEND advisors will monitor and challenge progress of the APP. They will report to the DfE on our progress at the end of December 2021 and again in June 2022.

Scrutiny Commission to note the outcome of this revisit has an impact on the Ofsted Inspection of Local Authority Children's Services (ILACS):

- In 2017, Leicester City Council Children's Services received an overall "Requires Improvement" judgement from Ofsted and we are overdue a re-inspection under the ILACS framework. Ofsted would generally bring forward inspections of the local authority if they had concerns about the area. The outcome of the SEND revisit has likely had a positive impact on the timing and focus of the inspection.
- Although the next Leicester City ILACS inspection is an un-announced inspection and therefore the inspection date cannot be predicted, we anticipate re-inspection in autumn 2021.

3. Scrutiny / stakeholder engagement

During the SEND revisit, Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, as well as local authority and National Health Service (NHS) officers and the SEND Improvement Board members.

An online survey was made available to parents and carers in the week before the revisit and 209 responses were received and this informed the inspectors' revisit evaluation.

They spoke to leaders, managers and staff in Leicester from education, health, public health and social care about implementing the disability and special educational needs reforms.

Inspectors looked at a wide range of information about the performance of the local area partnership, including Leicester's self-evaluation of actions in relation to the WSoA. They reviewed quality and performance data, evidence about the local offer, joint commissioning and dip sampled 80 Education, Health and Care plans.

4. Background

As a result of the findings of the **June 2018** Special Educational Needs and Disabilities (SEND) **inspection** and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector (HMCI) determined that a Written Statement of Action (WSoA) was required to address significant areas of weakness in the our local area practice.

The WSoA, submitted by the local area partners, was the plan to address the five areas of weaknesses identified at the inspection. The local authority and the clinical commissioning group (CCG) were jointly responsible for submitting the written statement of action to Ofsted. It was declared fit for purpose on 25 September 2018.

Since 2018:

- the SEND Improvement Board (SENDIB) has been responsible for driving improvement and overseeing progress in relation to the WSoA, with strategic leads connected to Health and Wellbeing and Joint Commissioning Boards.
- The SENDIB was reviewed in early 2020. With new membership and chaired by the Deputy Director of Nursing from the CCG, the SENDIB robustly challenged progress and was a key driver in increasing the pace of improvement. A summary of the SEND improvement journey can be found in appendix 1.
- The vision is owned by partners and is a significant improvement from 2018. There is a shared SEND local area strategy and plan to transform the SEND agenda in Leicester City. A Leicester City, Leicestershire and Rutland joint commissioning strategy will also drive forward commissioning to meet the needs of children and young people.
- The pace of improvement accelerated in the 2020, despite Covid disruption with for example:
 - A significant investment in the SEND service and across health partners
 - The inclusion agenda and the expansion of the Dedicated Special Provision across mainstream schools.
 - Personal transport budgets promoted to support parent carer choices.
- The rise in demand for Education, Health, Care Plan's (EHCP's) assessments has continued from the latter half of 2019 and in 2020 this had an impact on the timeliness and improvement in quality of EHCP's and their annual reviews. An investment in capacity in the SEND Special Education Service enabled the service to address the backlog of assessments and to reconfigure the service to better meet increasing demand. The continued rise in the demand for EHCP's in 2021

means that further investment is being considered to process assessments and annual reviews.

The local area partnership has had and continues to have frequent meetings with the Regional DfE SEND and NHS SEND advisors who challenge progress, impact and sustainability of actions. They have supported and continue to support the improvement journey.

5. Financial, legal, equalities, climate emergency and other implications

5.1 Financial implications

There are no direct financial implications arising from this report.

The majority of SEN related expenditure is funded from the High Needs Block (HNB) of the Dedicated Schools Grant (DSG). Areas which by statute have to be funded by the local authority's general fund include home to school transport for SEN, Education Psychology service and the costs of assessing children and young people for EHCPs. In addition, primary schools de-delegate back to the local authority a proportion of their school budget to pay for the Behaviour Support service. These non HNB funded items amount to £11.9m (budget for 2021/22).

Those items funded by the HNB are split into direct placement costs, for example a place in a special school, together with indirect costs for support services. Details of these costs are included in Appendix 5 together with the HNB funding allocation from the DfE. Total forecast costs for the HNB in 2021/22 are £65.7m compared to a funding allocation of £60.1m, leaving a forecast deficit of £5.6m. HNB deficits are a national issue, with 2019/20 published data reporting total local authority net in-year overspends on HNB budgets of 10.8% of the funding allocations, or £593m. 138 out of 152 (91%) local authorities had an in-year overspend.

The LA has incurred in-year deficits in the HNB since 2015/16 as a result of continued growth in numbers of pupils with SEND. The incurring of deficits also coincided broadly with the replacement of statements of special educational need with EHCPs. Numbers of pupils with EHCPs has grown by 84% since 2016 (compared to a national increase of 68%). The DfE increased the overall national HNB funding in 2020/21 and 2021/22. This was part of a commitment to increase funding over a 3-year period, with the final increase in 2022/23. We have no information on the funding levels beyond 2022/23. The funding increases whilst welcome, have not kept pace with the ongoing increase in demand and therefore we have continued (and will continue) to incur deficits.

The DfE are looking at reviewing the national funding formula for the HNB but have stated that '*Numbers of EHC plans are not to be used as a robust indicator of underlying need because the way they are used varies considerably across local areas, and the number of plans is therefore not necessarily directly associated with the local authority's need to spend.*' It seems unlikely therefore that the DfE will alter their funding formula to reflect the main cost driver for the HNB, the number of EHCPs together with ensuring that EHCPs are consistent and of high quality.

The service continues working to manage the HNB expenditure – we have reviewed special school funding rates, will be consulting upon funding support for SEN within mainstream settings and we have expanded our dedicated specialist provision to provide cost effective placements. Nevertheless, the demand for SEN will remain a significant cost pressure for both the DSG and the general fund.

Martin Judson, Head of Finance.

5.2 Legal implications

There are no direct legal implications arising from the contents of this report.
Pretty Patel, Head of Law, Social Care & Safeguarding Tel. 0116 454 1457

5.3 Equalities implications

5.4 Climate Emergency implications

Following the city council's declaration of a Climate Emergency in 2019, and its aim to achieve carbon neutrality, addressing emissions from all areas of the city council's operations, including SEND, is vital. All areas of the council need to consider the carbon emissions relating to their operations and consider opportunities to reduce this impact. For example this could include promoting or encouraging the use of more sustainable and active travel by staff and service users, considering the energy efficiency of buildings and equipment and investigating opportunities to reduce emissions through commissioning, procurement and partnership activities.

Aidan Davis, Sustainability Officer, Ext 37 2284

5.5 Other implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

6. Background information and other papers:

- Briefing to LMB and CMB leading up to the SEND revisit
- Link to SEND [Local Offer webpage](#)

7. Summary of appendices:

Appendix 1: Visual of SEND journey of improvement since 2018

Appendix 2: SEND revisit outcome letter from Ofsted and CQC

Appendix 3: Accelerated Progress Plan (APP) approved by DfE

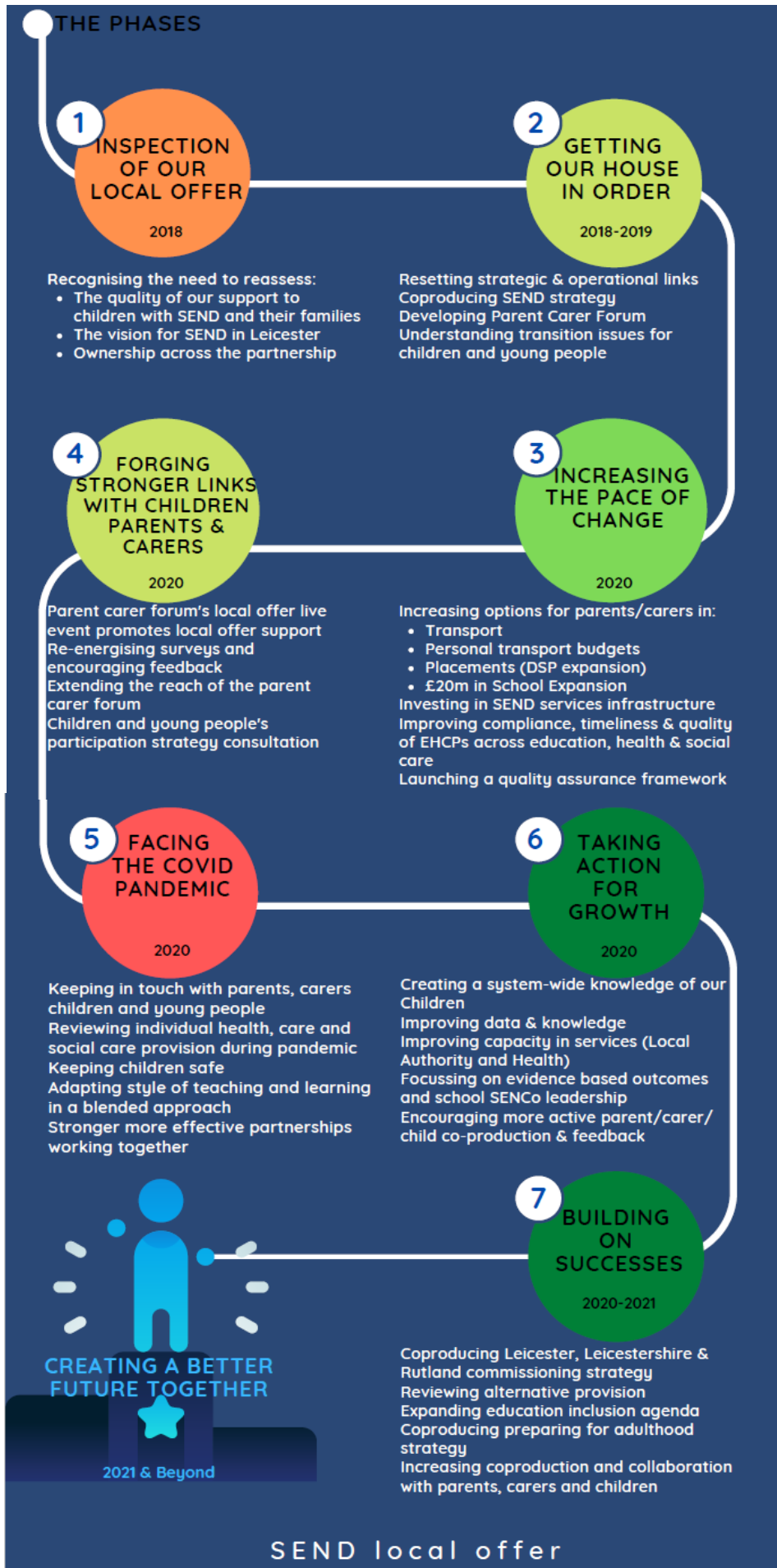
Appendix 4: DfE letter approving the Accelerated Progress Plan

Appendix 5: SEND and High Needs Block Expenditure

8. Is this a private report (If so, please indicate the reasons and state why it is not in the public interest to be dealt with publicly)? No, this is not a private report

10. Is this a "key decision"? If so, why? No

Appendix 1 - Visual of SEND journey of improvement since 2018



15 June 2021

Martin Samuels

Strategic Director of Social Care and Education, Leicester City Council Leicester City Hall
Rutland Wing
Floor 3, 115 Charles Street Leicester
LE1 1F

Chris West, Deputy Director of Nursing, Quality and Performance,
Leicester, Leicestershire and Rutland (LLR) Clinical Commissioning
Groups

Jane Pierce, Acting Head of Children's Performance, Planning and
Transformation, Local Area Nominated Officer

Dear Mr Samuels and Ms West

Joint area SEND revisit in Leicester

Between 5 and 7 May 2021, Ofsted and the Care Quality Commission (CQC) revisited the area of Leicester to decide whether sufficient progress has been made in addressing each of the significant weaknesses detailed in the written statement of action (WSOA) issued on 18 June 2018.

As a result of the findings of the initial inspection in 2018 and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector (HMCI) determined that a written statement of action was required because of significant areas of weakness in the area's practice. HMCI determined that the local authority and the area's clinical commissioning group(s) (CCG) were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 25 September 2018.

The area has made sufficient progress in addressing four of the five significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing one significant weakness. This letter outlines the findings from the revisit.

The inspection was led by one of Her Majesty's Inspectors from Ofsted and a Children's Services Inspector from CQC.

The inspection was carried out remotely. Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, as well as local authority and National Health Service (NHS) officers. They spoke to

leaders, managers and staff from Leicester for education, health and social care about how they are implementing the disability and special educational needs reforms. Inspectors looked at a range of information about the performance of the area, including the area's self-evaluation of their actions in relation to the WSOA. They reviewed performance data and evidence about the local offer and joint commissioning. 209 parents responded to our online survey.

Main findings

- The initial inspection found that there was:

'a lack of strategic planning to improve the outcomes for children and young people with SEND'.

Since the initial inspection, there have been significant changes to leadership of the local area. Leadership is now stable, with leaders across education, health and social care services working well together. They now have a shared and ambitious vision for children and young people with SEND in Leicester.

Leaders have put in place an improvement plan that they have co-produced and developed with parents, children and young people, and professionals from education, health and social care. The plan focuses on what leaders need to do to improve the outcomes for children and young people with SEND. A 'SEND improvement board' is in place to check how well leaders are bringing about these improvements. Leaders have increased the pace of improvement in the last 18 months.

Leaders have reviewed their plans for improvement to take into account the impact of the COVID-19 (coronavirus) pandemic on the different services available to children and young people with SEND. This has ensured that leaders have kept their focus on improving the provision at this time.

Education outcomes for all children and young people in Leicester remain low. Improvement work carried out in schools before the start of the pandemic helped to raise outcomes for children and young people with SEND. Leaders have ensured that staff have continued to receive training during the pandemic, so that they can continue to build on these early improvements. Leaders have acted to provide more places for children and young people with SEND in special and mainstream schools and colleges. They expect there to be new provision and more places available from September 2021.

Area leaders are not yet able to show how they have improved the health and social care outcomes of children and young people with SEND. However, leaders are now in a better place to focus on checking on their work to improve services and provision in the future.

Parents, children and young people with SEND who spoke with inspectors explained how they are beginning to experience the benefit of some of the actions taken by leaders to improve outcomes, including in relation to the improved education, health and care (EHC) plan assessment process. However, not all parents who responded to Ofsted's online survey shared this

view. A large majority of those who responded to the survey are not yet seeing improvements in the provision for their children. There is still a need to promote the local offer more widely with parents and for leaders to build the trust and confidence of the local community as they move forward with their co-produced plans to improve outcomes for children and young people with SEND.

The local area has made sufficient progress to improve this area of significant weakness.

- The initial inspection found that there were:

'poor quality EHC plans'.

Leaders have improved the quality of EHC plans. They have worked with professionals from education, health and social care to improve the way plans are set out and completed. Suggestions for improvements have been discussed and agreed with parents, children and young people. Members of the Leicester City parent and carer forum (LCPCF) act as 'critical friends' to give leaders support and challenge. They help leaders to improve the efficiency of the statutory assessment process and the quality of EHC plans.

There is a rigorous procedure in place to make sure that EHC plans are of good quality. Appropriate training is provided to professionals who contribute to the plans. The proportion of plans with health and social care assessments has increased. Contributions from health and social care professionals are now more evident in EHC plans. They receive draft copies of plans to check before the plans are completed. Electronic systems have been introduced to make sharing of assessments and EHC plans more efficient and ensure that annual reviews are timely.

EHC plans clearly capture the views, interests and aspirations of children and young people. Suggested support and strategies are clearly stated. The plans inspectors sampled contained appropriate details about children and young people. Most plans were appropriately focused on ambitious but achievable outcomes.

Parents, children and young people inspectors spoke with said that EHC plans provide an accurate reflection of the child or young person. A typical comment was, 'My EHC plan helps people to know who I am and what I need.' Professionals for education, health and social care told us that they are positive about the improved quality of EHC plans. The recent appointment of a review co-ordinator ensures that area leaders have good oversight of when each plan needs to be reviewed. However, some parents who responded to our online survey remain unconvinced about the quality of EHC plans. Leaders realise that there is still further work to do to ensure that all plans are of consistently high quality.

The local area has made sufficient progress to improve this area of significant weakness.

- The initial inspection found that:

'there was a lack of effective assessment of children and young people's social care needs'.

At the time of the initial inspection, there was a high turnover of social care staff. There is now a comprehensive strategy to support staff recruitment and retention. This includes links with a local university and a social care apprenticeship offer. Social care teams have been restructured to work more effectively together. Staff told us that there is a renewed sense of purpose and culture of learning. They say that the service is now focused on driving forward improvements for children and young people with SEND.

Strong partnerships have been developed between social care, education and health services. Leaders for social care are engaging more widely with working groups across all sectors to support families in the local area. For example, the principal educational psychologist is working closely with Connexions to support young people in the youth justice system. The 'corporate parenting board' for children looked after is working with health services and colleges to support young people with SEND to move into further education.

Social care professionals often attend LCPCF meetings and are engaging more effectively with parents, children and young people. These activities are helping to shape and drive improvements to the wider early help and social care offer for children and young people with SEND.

The implementation of 'strength based' assessments has improved the social care and early help offer within Leicester. Extra training and resources have been supplied for lead professionals working in schools to carry out joint meetings to assess early help and EHC plans.

Social care assessments are now routinely offered to all children and young people with an EHC plan. If this offer is not taken up, plans include a link to the social care section on the local offer website where families can find information about wider social care support in the future, should they change their mind. Social care assessments are reoffered at every annual review.

There is a robust procedure to check the quality of social care assessments and contributions to EHC plans. This process helps leaders to keep track of the number of children and young people with SEND who contact social care for advice and support. There is an effective system to identify and support children and young people who contact social care and have an EHC plan.

Despite improvements, some parents do not understand the purpose of a social care assessment. Leaders are aware that social care assessments can be concerning and misunderstood by some parents. Social care staff are working with the LCPCF and members of the Special Education Service to help parents understand the purpose of this offer and how it can help their children.

The local area has made sufficient progress to improve this area of significant weakness.

- The initial inspection found that there was:

'a lack of joint commissioning of services to support young people's health needs post-19'.

Leaders recognise that their work to remedy this weakness has not been rapid enough until more recently. Leaders have now developed a joint commissioning strategy which sets out a clear direction for the local area. It identifies appropriate actions to support young people to move into adulthood in the future. However, the joint commissioning strategy is in draft format and has not been implemented. There is little evidence of effective progress with arrangements for joint commissioning to support young people with SEND to move from children's services to adult services. Leaders have plans in place to implement the joint commissioning strategy in the near future.

Health leaders have strengthened partnerships across the local area. Partners are now in a good position to bring about improvements for children and young people with SEND through the joint commissioning of resources and services.

There are some measures to support young people to transfer from children's services to adult services which are having a positive impact. For example, care navigators help young people to find the right support, resources and provision to prepare them for education, employment or training. There is a digital mental health resource to support young people attending university. This offer is to be expanded more widely. Leaders are also expanding the current mental health offer for schools and colleges to meet the increasing needs of young people, particularly those with SEND.

The local area has not made sufficient progress to improve this area of significant weakness.

- The initial inspection found that there was:

'a disjointed approach to the preparation for adulthood'.

There is now a coordinated and collaborative approach to this area. Education, health and social care professionals help children with SEND to start preparing for adulthood from 13 years of age. Leaders aim for all EHC plans to include outcomes which are focused on preparing children for adulthood from Year 9.

The 'Preparation for Adulthood' strategy has been co-produced. It is linked to the economic regeneration in Leicester to ensure that there is a strong offer for young people with SEND, when they leave school. There is a focus on creating opportunities for employment for young people. Local authority leaders have supported schools and colleges to set up effective links with training providers and potential employers.

The proportion of young people with SEND who are not in education, employment or training has decreased since the initial inspection. Area leaders

closely check the destinations of young people when they leave school. They offer young people support with education, health, social care, employment, housing, and inclusion within the community.

School and college leaders work closely with the local authority to ensure that young people with SEND are supported into education, employment or training. Despite the negative consequences of the pandemic, leaders are confident in their strategy. They are working flexibly to help young people make the right choices for their future careers. Leaders believe that the right process is in place to help young people to lead fulfilling lives.

The local area has made sufficient progress to improve this area of significant weakness.

The area has made sufficient progress in addressing four of the five significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing one significant weakness. As not all the significant weaknesses have improved it is for the Department for Education and NHS England to determine the next steps. Ofsted and CQC will not carry out any further revisit unless directed to do so by the Secretary of State.

Yours sincerely

Stephanie Innes-Taylor
Her Majesty’s Inspector

| Ofsted | Care Quality Commission |
|--|---|
| Katrina Gueli Regional Director | Victoria Watkins Deputy Chief Inspector, Primary Medical Services, Children Health and Justice |
| Stephanie Innes- Taylor HMI Lead Inspector | Rebecca Hogan CQC Inspector |

cc: Department for Education
 Clinical commissioning group(s)
 Director Public Health for the area
 Department of Health
 NHS England

Appendix 3: Accelerated Progress Plan (APP) approved by DfE

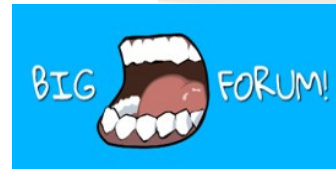
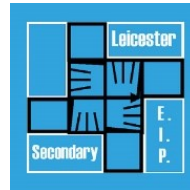
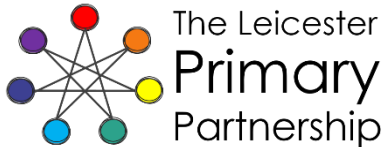
Leicester City Special Educational Needs and Disabilities (SEND)

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Accelerated Progress Plan July 2021



CLASS
City of Leicester Association
of Special Schools



Introduction

Pupils with SEND frequently have more limited life chances than their peers. Good commissioning and effective integration between services lie at the heart of improving health and wellbeing outcomes for children and young people with SEND. The Code of Practice (COP) 2015 for SEND sets out the commissioning responsibilities across partners and the expectation that joint working and planning occurs, and we follow this Code in delivering the Leicester Leicestershire and Rutland (LLR) Joint Commissioning strategy for Children and Young people with Special Educational Needs and/or Disabilities (SEND).

The impact of the Covid pandemic has had a detrimental effect for many children and young people's mental health and wellbeing. There are likely to be long-term effects and setbacks for children with SEND in their learning from readiness for school right through to adulthood which may also have an impact on their health needs. Through this plan we intend to make an impact on their outcomes for the future. For children, young people, families and carers, having agencies work together will help them to navigate an often-complex system of support. By aligning and understanding each other's worlds, we can support families holistically and ensure that every child can reach their full potential.

We want our schools and educational settings to deliver the best education possible and for children and young people with SEND to **learn, thrive and achieve** their potential, to improve their life opportunities through access to high quality services which are effective, efficient, responsive and inclusive.

We want to improve early identification of health and learning needs and to be a community that gives children and young people with SEND in Leicester City the support and opportunities to have better lives. Better lives mean more than just meeting special educational needs in schools, it is a lifelong commitment that goes beyond education and includes broader health and wellbeing so that children with special needs can live and learn in their local communities.

Purpose of this progress plan

Ofsted and Care Quality Commission (CQC) revisited Leicester in May 2021 to assess whether the local area had made sufficient progress in addressing the five areas of significant weakness detailed in the Written Statement of Action (WSOA) issued in 2018.

Despite the impact and duration of the Covid-19 pandemic in Leicester, the redeployment of Local Area resources to related to closure of schools, restrictions on movement and support to vulnerable children and young people, the Local Area has maintained a clear focus on Transforming SEND.

As a result of the SEND revisit, inspectors judged that significant progress had been made in four of the five areas but there was more work to be done to see the impact of actions taken to deliver the improvements in area 4.

Area 4: The lack of joint commissioning of services to support young people's health needs post 19

1. Lack of Joint Commissioning

2. Young people experience delays in accessing services when they become a young adult

3. There are no clear pathways for young people to access support, which delays their treatment during this transition
4. Colleges do not get appropriate support from health or social care to support the transition process

This progress plan sets out how we will make accelerated progress in this area. The Local Area Lead for this plan is Jane Young, Designated Clinical Officer (CCG) who will drive a working group of people responsible for key actions to be completed in 3-month milestones (September, end of December 2021) and continuing from January 2022.

Our Governance Structure

We have close partnership working which fosters a culture of Inclusion where SEND is everybody's responsibility in meeting the needs of Children and young people with SEND. This involves many aspects of cross-agency and cross-system working at locality with partners and families to support better access to services for families, support with medical needs in schools, access to therapies and transition to adulthood pathways. The SEND IMPROVEMENT BOARD (SENDIB) includes representatives from the Leicester City Parent Carer Forum (LCPCF), Health, Social Care & Education Services, SENDIASS and representatives from education settings.

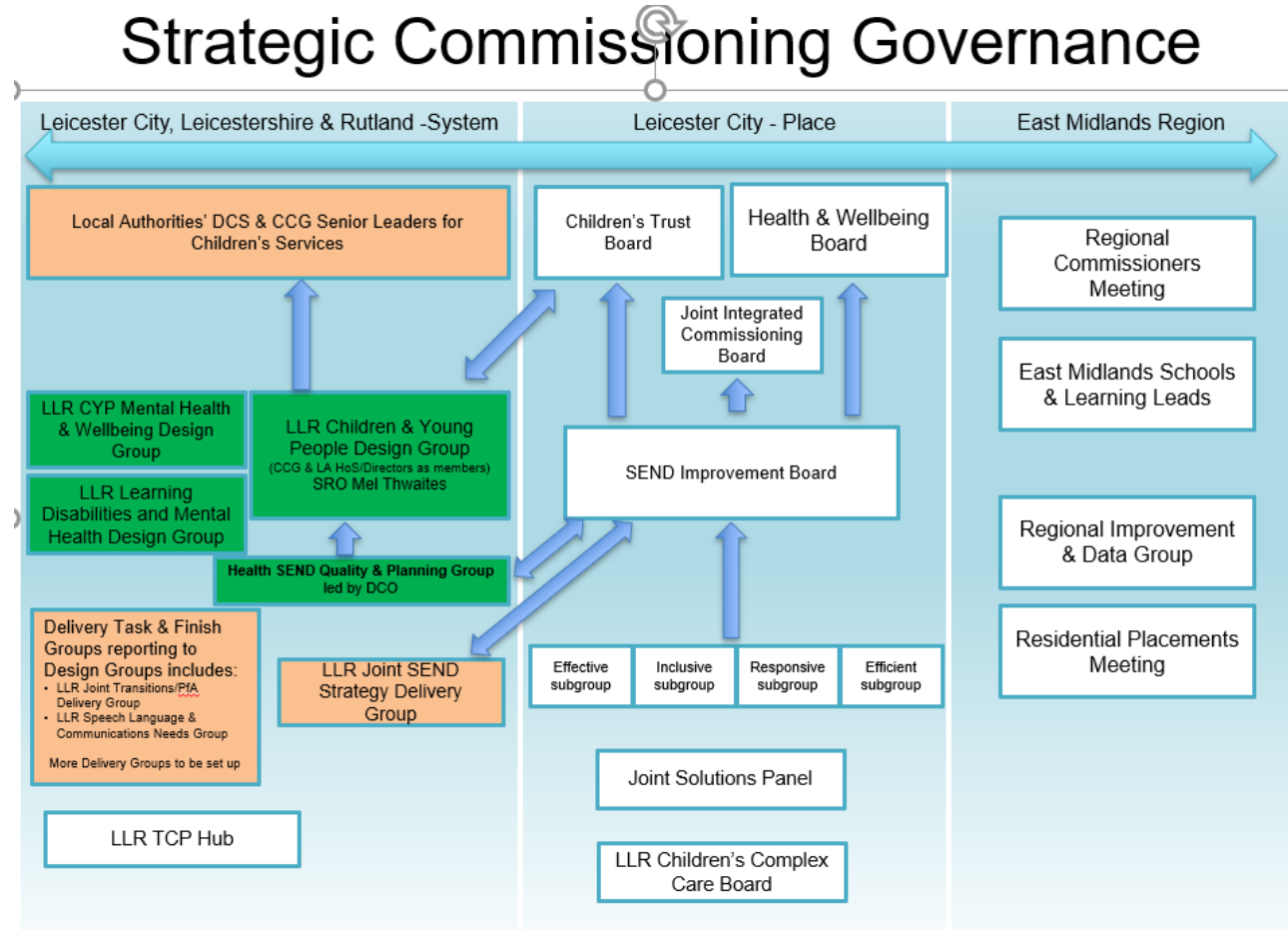
The Leicester City Parent Carer Forum (LCPCF) has over 500 members made up of parents and carers of children who have a variety of special needs, ranging from challenging behaviour to complex medical needs, learning or physical difficulties and more.

The LCPCF chair has a positive and active role in supporting and advising parent carer peers and in the development of services that affect children with special educational needs and/or disabilities. Parent/carers are represented on the Resource Access Panel, the SEND Improvement Board (SENDIB) and various other delivery groups. The LCPCF's approach is a balance of both challenge and support to the local area partners.

The SENDIB was reconfigured in early 2020 and a chair appointed to inject pace into the response to the SEND Written Statement of Action. The SENDIB is chaired by the Health Clinical Commissioning Group, supported by the Strategic Director of Social Care & Education in the local authority.

Our improved governance arrangements will ensure our joint Transformation plans continue to progress with rigour and pace to enable our schools and educational settings to deliver the best education possible and for children and young people with SEND to **learn, thrive and achieve** their potential.

The diagram below sets out our SEND governance arrangements and, the role and relationships of our strategic partnership.



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Tracking, challenging and checking progress

The action plan will be delivered across the partnership and supported by lead officers including service heads and project management support. Progress, including risks or issues, will be reported to the SENDIB which meets monthly. The LA has also engaged Peter Foster Chief Executive of Northamptonshire Children's Trust as a peer critical friend.

The revisit highlighted that the local area had made insufficient progress in area four around Commissioning Health needs post 19. This action plan sets out how the local area partnership will make significant progress in not just the actions, but the impact and outcomes to improve area 4. This

action plan is a standalone plan which links to the overall SEND Transformation plan and more widely at a system level including that of the LLR Joint SEND Commissioning Strategy and the developing LLR Transitions/ Preparing for Adulthood Collaborative Commissioning Strategy. The SEND Transformation plan therefore continues to focus on:

1. A single system working together across education, health and social care for joint outcomes.
2. Getting it right first time: appropriate, effective and timely joint assessment, planning and review of need that is personalised to the child or young person with SEND.
3. Talking to, listening to and involving children, young people and parents and carers.
4. Use effective monitoring and quality assurance procedures to challenge, support and develop provision.

BRAG summary, risk register & mitigation plans

The SENDIB will oversee the checks and balances documentation to assess and evidence progress of the plan. This includes a BRAG summary, exception reporting and a risk register to be published alongside this report as an Appendix.

Collecting & analysing impact of actions

There are three main ways that the Local Area collects and analyses impact:

1. **Quality Assurance Performance Framework:** The framework is reviewed and updated on an annual basis as necessary.
2. **SEND Improvement Board Dashboard:** The Dashboard is updated monthly/quarterly/yearly depending on frequency that local, comparator and national measures are updated. This set of measures enables the SENDIB to have oversight, check and challenge on performance and progress.
3. **Engagement, Feedback & Surveys:** We continue to improve the ways in which we engage with and receive feedback from parents, carers and young people, alongside the views of professionals. The SEND 2021 survey to be launched in Autumn 2021 will provide baseline information from feedback and views across a range of stakeholders. This will provide us with a better understanding of the impact of our activity and will inform the new SEND Transformation strategic documentation.

Stakeholder engagement and feedback

The ways in which we communicate and exchange views with stakeholders, parents and carers makes a big difference to how effectively plans and services are shaped. We are committed to continuing the development of SEND improvement in partnership with families and young people and to make sure developments are communicated effectively. We have a clear focus on embedding robust quality assurance processes within our SEND statutory work and in conjunction with partner services and parents.

In early 2021, the Council worked with children, young people with SEND and their families, Social Care, Health and other partners to co-produce our Local Area SEND Transformation plan. We continue to encourage views from parents and carers in many different ways to help shape and keep plans current and active. Some examples of our engagement activity with stakeholders, children and parent carers:

- Our annual Local Offer Live event which also seeks to extend our reach to parent carers in the city who may not be part of formal networks or unfamiliar with what the SEND local area offers
 - At the May Local Offer live event, we held an interactive session with parents and carers about plans and progress to hear their views and remind us of what is important for parents and carers
- Our SEND newsletter responds to current themes, issues and concerns whilst also offering us a mechanism for sharing important information and updating families on events and work
- The Local Area Education and Local Authority partnership is strengthened through daily/weekly e-briefings, SEND newsletters, SENCo and education network and our education and social care cells
- Across Children's services, an approach to participation and engagement based on the Lundy Model of participation has been introduced. This model provides a way of seeing children's and young people's rights to participation, as laid down in Article 12 of the UN Convention on the Rights of the Child.
- The Children's Rights and Participation Service supports children and young people aged between 5 and 25 to express their opinions, concerns and views and have them listened to. The service aims to ensure that what children and young people say informs how their needs are met and the way services are provided.
 - Our Participation Strategy encompasses all children
 - Coproduction also through The Big Mouth Forum and other children and young people's participation groups guides progress
 - Young people with SEND are involved in recruitment to strategic roles in the SEND system.
- An increasing number of our strategies are created as easy read versions for those with learning disabilities
- Leicester City Parent Carer Forum (LCPCF) meetings are regularly attended by practitioners and leaders from education health and social care and these are valuable sessions which provide an opportunity to talk through emerging themes and address concerns from parents.

The pace at which we work in partnership, galvanised during the pandemic, has given us a number of real positives to take forward:

- As professionals we were receiving a routine understanding of the reality of life for children and young people with SEND which enforced our strong partnership

- Parent Carers from LCPCF say that they have more insight into how the local area “system” works and have been able to make new relationships that will be of benefit
- We will continue the work to improve our local offer to reflect the emerging needs of children, young people and their families and ensure that the support they need is easily signposted.

Training and development

This accelerated progress plan makes reference to the training and development of professionals across the local area and the system to increase awareness and enable professionals to appropriately help children and young people with SEND, and their parents to make use of the opportunities and support available.

Action plan progress

The following provides a brief summary of progress against each item of the action plan:

| Status | RAG rating |
|-------------|------------|
| Complete | Grey |
| On track | Green |
| Minor delay | Yellow |
| Major delay | Red |

Accelerated Progress Plan - Improvement Actions Summary

The lack of joint commissioning of services to support young people's health needs post 19

| Ref | Area of remaining weakness | Action | Lead (Governance) | Progress Indicate if Complete & signed off by the SENDIB | Evidence – Output (completion of actions) | Action Milestone | Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced. | Impact Milestone | SENDIB | |
|-----|---|--|---|--|---|------------------|---|--------------------------------|--------|------------|
| | | | | | | | | | Status | RAG rating |
| 1 | Lack of Joint Commissioning | 1. Review local area joint commissioning strategy and action plan ensuring links to SEND and transition strategies | Clare Nagle/ James Hickman | <p>The All-age commissioning strategy commits to support the implementation of the Leicester City transitions strategy. The LLR SEND Joint Commissioning Strategy presented to SENDIB in November 2020 was approved at SENDIB in June 2021. It is due for approval by the CCG in July. System sign off will be complete in August 2021.</p> <p>CCG: Investment in the system</p> <ul style="list-style-type: none"> core health services to meet the needs of children with SEND and their families. e.g. AHPs, Paediatricians, CAMHS, Transition, Care Navigators Designated Clinical Officer non-statutory role. SEND Senior Officer to lead operational aspects of the role, to allow the DCO more time to support joint commissioning initiatives at a strategic level. e.g. EOI in evidence folder Children's Personalisation Commissioner to implement the health contribution for joint funding of support for C and YP. <p>Joint Solutions Panel: co-ordinates support for YP who have very high-level complex needs who required support from all partners.</p> <p>SEND Data Group established to report to Health Quality & Planning Group and to SENDIB.</p> | 1. LLR SEND Joint Commissioning Strategy is published. | Dec 21 | 1. Professionals, parents, carers and children demonstrate awareness the strategy is in place and understand its key priorities for the first two years. 2. Survey of multi-agency professionals demonstrates positive impact of the DCO offer, which in their view will impact on improvements for CYP. | Dec 21 Mar 22 Mar 22 | | |
| 1 | Lack of Joint Commissioning | 2. Establish a task and finish group to identify mechanism for delivering the strategy through JICB | Nicola Cawley/ Clare Nagle/ Sara Bailey | <p>The JICB has taken the lead oversight of joint commissioning for children services. This is the agreed mechanism for delivering the Joint Commissioning Framework and joint commissioning opportunities. The Task and Finish Group is called LLR Joint SEND Strategy Delivery Group is in place to deliver the strategy. The action plan in place and is active. Strategy for SLC is in development. The first phase - SLC for early years - is in place in Leicester. Personalised Joint Commissioning is in place, the health aspect implemented on behalf of the CCG by Midlands and Lancashire Joint Commissioning Unit.</p> | 1. Minutes and RAG rating of Action Plan of LLR Joint SEND Strategy Delivery Group available. | Dec 21 | 1. Case studies and quantitative data to demonstrate Personalised Joint Commissioning for 19-25 yr olds (from Midlands and Lancashire Commissioning Support Unit (MLCSU)). 2. The evaluation of the LLR Joint SEND Strategy Delivery Group Action Plan, using the impact measures outlined in the header, demonstrates impact on professional knowledge, skills and practice. Where possible within the timeframe, it will also demonstrate impact on parent and CYP experience. | Dec 21 Mar 22 | | |
| 2 | Young people experience delays in accessing | 1. Implement the transition strategy | Tracie Rees/ Chris West/ | <p>The Leicester City Transitions strategy has been implemented:</p> <ul style="list-style-type: none"> Established the complex transition case panel with better joint working of children's and adults' teams to problem solve outcomes for young people with complex issues | 1. City Transition Strategy 2. LPT NHSE benchmarking progress. | Dec 21 Dec 21 | 1. Using the evaluation tools outlined in the header parent/carers, young people, college staff and Health | Dec 21 Mar 22 | | |

| Ref | Area of remaining weakness | Action | Lead (Governance) | Progress Indicate if Complete & signed off by the SENDIB | Evidence – Output (completion of actions) | Action Milestone | Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced. | Impact Milestone | SENDIB | |
|-----|---|--------|-------------------|---|--|---------------------|---|---------------------|--------|------------|
| | | | | | | | | | Status | RAG rating |
| | services when they become a young adult | | Janet Harrison | <ul style="list-style-type: none"> The established joint solutions panel (receives escalated issues from the complex case panel) uses Health and Local Authority partners to co-fund/co-work solutions Development of information sheets/website information for parents and professionals to access appropriate and accurate details about key areas relating to transition and sits as part of an engagement programme with schools <p><u>Ongoing Implementation of the developing ICS Transitions Strategy</u></p> <p>LPT SEND Transition Lead: Information for parents and YP:</p> <ul style="list-style-type: none"> This lead is working with Nathan Samuels from NHSE to look at developing benchmarking standards for transition to health services for YP with SEND. A stakeholder group is being established, including YP and their families. The developing work towards the national benchmark will be coproduced. A map of transfer to adult services is now on LO website which will be further refined through co-production A video is being developed for parents and YP explaining what to expect on transition. To be shared with parents and YP at key points and added to the LO by 1st week in September 2021 In April 2021, a survey of 40 LPT staff (Baseline survey) surveyed their knowledge and confidence in implementing the transition process for YP. Their responses are informing the development towards the national benchmarking standard for transition to adult health services. The updated LPT Transition Policy directs practitioners to signpost to the LO. LPT SEND Transitions Lead will include pathways for each service in the LPT Transition Policy which clarifies exactly what each practitioner needs to do when a young person is transitioning to adult health services. <p>LPT SEND Transitions Practitioner LPT have a Transitions Practitioner for those with City GPs. City schools refer anyone with complex health needs to the LPT SEND Transitions Practitioner. An extension of the LPT SEND Transition lead and the SEND Transition practitioner post may form part of their recommendations</p> <p>ASD and Mental Health There is significant CCG investment in this area in 21/22, including, Transitions MH team. The aim is CAMHS practitioners will have a caseload of young people (16-25) and will continue to work with them until they are ready to be discharged rather than holding them whilst a service can be identified. Using the additional funding, the Youth Advisory Board will work with young people to co-produce a system-wide service</p> | | | staff tell us that their voice has been heard as part of the benchmarking work, and they have a good experience of pathways for YP moving into adult health services. | | | |

| Ref | Area of remaining weakness | Action | Lead (Governance) | Progress Indicate if Complete & signed off by the SENDIB | Evidence – Output (completion of actions) | Action Milestone | Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced. | Impact Milestone | SENDIB | |
|-----|---|---|--|---|---|---------------------|--|--|--------|------------|
| | | | | | | | | | Status | RAG rating |
| | | | | DCO: offer to meet College staff to problem-solve if they experience any difficulties in relation to supporting YP's health needs when they transfer to college. | | | | | | |
| 2 | Young people experience delays in accessing services when they become a young adult | 2. Identify executive leads in each organisation to champion transition | Chris West/ Martin Samuels | Executive leads at senior levels champion transition: <ul style="list-style-type: none"> • Martin Samuels (Strategic Director) • Tracie Rees and Caroline Tote. • CCG: Chris West/ Sara Bailey • UHL: Dr Anne Wilmott(children) and Dr Laura Clipsham (adult) • LPT: Helen Thompson/Janet Harrison • Elected members: Cllr Russell, Cllr Cutkelvin and Cllr Dempster (as H&WB) | 1. Minutes available | Dec 21 | 1. Case studies will demonstrate that YP entering supported independent living (Case Study – IDs Story of Hope) have a positive experience 2. Using the evaluation tools outlined in the header parent/carer, young people, college staff and Health staff tell us that their voice has been heard, and they have a good experience of pathways for YP moving into adult health services. | Dec 21 Dec 21 Mar 22 | | |
| 2 | Young people experience delays in accessing services when they become a young adult | 3. Streamline the pathway for young people with EHC plans who will require adult health services to reduce the delay in accessing appropriate provision | Jane Young/ Janet Harrison/ Pauline Killoran | <ul style="list-style-type: none"> • See 2.1 <p>UHL and LPT Transitions liaison</p> <ul style="list-style-type: none"> • Pre-empt the transitions of young people and make consultants aware of continuing need re: acute adult services/SEND. • Work with Primary Care Liaison nurses to ensure that YP transferred back to primary care have a transitions plan / summary of care. <p>Liaison with Primary Care:</p> <ul style="list-style-type: none"> • A GP lead for LD is in place in each practice. • Paediatricians provide a summary of YP's needs to the receiving GP. • GP links with the Primary Care Liaison nurse to promote the Annual Health check to young people with defined Learning Disability (Exemplar Project). This may be extended to include ASD in the next year (national government initiative) • LPT SEND Transition Lead and DCO discussions with Primary Care Liaison Nurses, to more fully understand their role and remit, including links with Care Navigator and SEND Transition Practitioner. • Health is promoting take-up and awareness of LD annual review at Year 9 EHCP Annual Review. • DCO is part of NHSE Benchmarking Stakeholder Group and will supporting the representation of YP and parent/carer voices to inform work with GPs. <p>Developing awareness across the local area:</p> <ul style="list-style-type: none"> • Continuing Health Care training available to understand Continuing Care and Personal Health budgets to support referrers (Midlands & Lancs Commissioning Support Unit | 1. Exemplar Project – YP with LD annual health checks – project outputs 2. LPT NHSE benchmarking progress. | Dec 21 Mar 22 | 1. GP's survey/focus group identifies their understanding of their role in supporting YP with SEND reflecting progress in column 5 (to be developed) 2. Using the evaluation tools outlined in the header Parent/Carer/YP feedback demonstrates understanding of the pathways and good experiences in accessing appropriate health support. | Dec 21 Mar 22 Dec 21 Mar 22 | | |

| Ref | Area of remaining weakness | Action | Lead (Governance) | Progress Indicate if Complete & signed off by the SENDIB | Evidence – Output (completion of actions) | Action Milestone | Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced. | Impact Milestone | SENDIB | |
|-----|---|---|--|---|--|---------------------|--|--|-----------|------------|
| | | | | | | | | | Status | RAG rating |
| | | | | <p>administer Continuing Care Funding on behalf of the CCG).</p> <ul style="list-style-type: none"> • Earlier identification of potential need, based on information already held. Eg special school curriculum pathways have mapped outcomes. Tools are being developed to further support • A referral pathway with clear actions for young people from age 14 to best support a well-planned transition from children's services and into adulthood. | | | | | | |
| 2 | Young people experience delays in accessing services when they become a young adult | 4. Each organisation to review and implement internal processes for supporting transition to adult and link to partners | Janet Harrison /Ann Willmott/ /Pauline Killoran/ Sharon Charles-Cockrill | See 2.1 and 2.3 above | See 2.1 and 2.3 above | See above | See 2.1 and 2.3 above | See above | See above | |
| 2 | Young people experience delays in accessing services when they become a young adult | 5. Establish a clear procedure which enables health professionals to forward plan the provision to respond to and meet the developing and changing needs of young people as they transition into adulthood. | Sara Bailey/ Janet Harrison/ Michelle Larke | <p>See 2.1</p> <p>The Transforming Care Programme for any young people with LD or Autism who may be at risk of admission and a 3-year (2021–2024) Road Map, led by Senior TCP Programme Manager has been based on the LLR vision.</p> <p>The 3-year delivery plan is based on the stages of a patient's journey with a total of twenty-nine different projects within the plan. The priorities identified for 2021/22 are:</p> <ol style="list-style-type: none"> 1. Increased focus on co-production with people with LD and Autism 2. Admission avoidance for CYP and adults 3. Integrated team working – development of a TCP Hub – joint working across LLR 4. Continue to improve AHC completion rates – and reduce overmedication (STOMP) 5. Provide community and inpatient support for people with Autism without LD 6. Ensure learning from LeDeR – making real service changes 7. Provide better support for our LDA forensic cohort <p>Separate project plans are being developed to take forward initiatives to address these 7 priority areas. Progress updates, issues for escalation and evaluation reports from the LD/ND Design Board throughout the year will be reported to the SENDIB</p> <p>A new Autism service for YP14+ has been established in LPT. The Specialist Autism Team (SAT) will work in partnership with young people and adults (14 yrs+) who are autistic and (where</p> | <ol style="list-style-type: none"> 1. TCP 3 year road map 2. Data dashboard spotlights Post 19 | Sep 21 Dec 21 | <ol style="list-style-type: none"> 1. Case studies to evidence jointly funded personal commissioning 2. Evaluation and case studies of Rix Wikki project evidencing the benefits of the tool 3. Using the evaluation tools outlined in the header parent/carer, young people, college staff and Health staff tell us that their voice has been heard, and they have a good experience of pathways for YP moving into adult health services. | Dec 21 Mar 22 Mar 22 Dec 21 Mar 22 | | |

| Ref | Area of remaining weakness | Action | Lead (Governance) | Progress Indicate if Complete & signed off by the SENDIB | Evidence – Output (completion of actions) | Action Milestone | Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced. | Impact Milestone | SENDIB | |
|-----|---|---|----------------------------------|--|--|---------------------|--|---------------------|--------|------------|
| | | | | | | | | | Status | RAG rating |
| | | | | <p>appropriate) with their families, partners and/or carers to offer support and care respectfully.</p> <p>CYP Respite and Unplanned Care Learning and development sessions led by Lead Commissioner, Learning Disabilities, Autism and Care Homes for Leicester City Council and the Children’s Personalisation Manager, LLR CCGs on CYP respite and unplanned care in LLR. The Local Area plans to commission two separate services:</p> <ul style="list-style-type: none"> • Develop an (all age) rapid response wrap-around service to maintain C&YP and individuals in the community (24/7) – a highly skilled team to be deployed within 24 hours’ notice to support the individual and their family/carers in their own home or in a community placement • Develop crisis accommodation/emergency respite to prevent admission – to provide urgent access to a non-hospital bed. <p>Individual commissioning – over and above core NHS commissioned services CYP who are eligible for continuing care under the CCC framework are considered at the Children’s Complex Care panel. In addition, children who are not eligible for CCC but who have health needs over and above those that can be met by core commissioned services can be taken to agree on further measures to support these children</p> <p>A one-off personal budget offer, available in 2021, has been reoffered in March 2022 to support mental health and well-being to facilitate hospital discharge and to prevent admission. These are available to adults and children to provide a personalised service to help the individual maintain their mental health and wellbeing in the community with measurable outcomes</p> <p>Leicester’s Rix Wiki pilot project offers CYP with Autism or Learning Disabilities their own simple accessible secure and easy to build website. Wiki’s can be shared with people so they can learn more and better understand how they can support individuals to reach their goals and aspirations.</p> | | | | | | |
| 2 | Young people experience delays in accessing services when they become a young adult | 6. Update health transition policies and associated Procedures. | Janet Harrison/ Anne Willmott | See 2.1 and 2.3 above | See 2.1 and 2.3 above | | See 2.1 and 2.3 above | | | |
| 3 | There are no clear pathways for young people to | 1. NHS commissioners and providers to agree and | Sara Bailey | See 2.1, 2.3 and 2.4 above Transition statement is in service specifications and SEND contract to ensure this is recognised and understood as a | 1. Examples of Training/advice packages for schools and FE colleges around CYP | Dec 21 | 1. Parent/carers, young people, College staff and Health staff feedback demonstrates confidence and effectiveness | Dec 21 March 22 | | |

| Ref | Area of remaining weakness | Action | Lead (Governance) | Progress Indicate if Complete & signed off by the SENDIB | Evidence – Output (completion of actions) | Action Milestone | Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced. | Impact Milestone | SENDIB | |
|-----|---|--|--|---|--|------------------|---|------------------|--------|------------|
| | | | | | | | | | Status | RAG rating |
| | access support, which delays their treatment during this transition | clarify the transitions processes in treatment services | | <p>statutory responsibility for Health providers contracts and places the emphasis on transition planning from aged 14 for CYP with long term conditions and disabilities.</p> <p>A SEND statement is within standard operating contracts around Health statutory responsibilities towards CYP with SEND.</p> <p>LPT contributing Health advice for annual reviews when requested by placement and settings.</p> <p>Care navigators based in localities support settings to identify key health professional who can update health advice.</p> <p>The City Health Transitions Practitioner updates health care summary plans from year 9 onwards for YP with complex medical needs and smooths the transition process for those CYP</p> | <p>transitioning with medical needs</p> <p>2. Audit process developed to track the success of transition for YP.</p> | Mar 22 | <p>of transitions into adult services</p> <p>2. Audit outcomes evaluated and demonstrate clear pathways for YP to access support and minimal delays in access on transition.</p> | Jun 22 | | |
| 3 | There are no clear pathways for young people to access support, which delays their treatment during this transition | 2. Engage young people and families to understand what support and information they require as they prepare to move from children services to adult services | Janet Harrison /Jane Young / Pauline Killoran/ | <p>LPT SEND Transition Lead Consulted with parents/carers at LO live.</p> <p>NHSE Benchmarking will include CYP and their parents/carers in their Stakeholder group and LPT Governance Manager – Patient Involvement and Experience will be working with CYP and their families to support confidence in sharing their voice.</p> <p>Health SEND Planning and Quality Group established work will include consideration of complaints and Tribunal information to inform future commissioning.</p> <p>Engagement with parents, carers children and young people in SEND Transformation plan in early 2021 identified some support and information which would be useful as they prepare to move to adult services</p> | <p>1. Regular attendance at LCPCF and SENDIASS by health and LA officers. Minutes available.</p> | Dec 21 | Surveys and focus groups with young people and their families demonstrate evidence of the support and information they accessed to enable their transition from children to adult services. | Dec 21 Mar 22 | | |
| 3 | There are no clear pathways for young people to access support, which delays their treatment during this transition | 3. Develop and implement a joint plan to improve support and information available to support transition | Janet Harrison/ Pauline Killoran | <p>See 2.1 and 3.2 above</p> <p>Transitions map summary on LO. Video in progress to explain transition to health services. Example video about transition from YP perspective in process of being put on LO LD Annual Health Check information leaflet posted on Local Offer and disseminated to practitioners to support parents/carers. Transition material has been co-produced with families and young people to ensure it meets their needs Continued involvement through NHSE Transitions Benchmarking Stakeholder Engagement</p> | See 2.1 and 3.2 above | See above | See 2.1 above | See above | | |
| 4 | Colleges do not get appropriate support from health or social care to support | 1. Health and social care senior lead officers to engage with colleges and | Pauline Killoran / Jane Young / Janet Harrison | <p>SEND service to provide information to SENDIB about young people requiring and receiving updated EHCP in year prior to college (Head of SEND Integrated Services 0-25).</p> <p>Care navigators signpost schools and colleges to community health to access updated health advice for EHC plans</p> | 1.FE College network minutes. | Dec 21 | 1. Outcomes of regional project funding demonstrate improved support from health or social care during the transition process | Dec 21 Mar 22 | | |

| Ref | Area of remaining weakness | Action | Lead (Governance) | Progress Indicate if Complete & signed off by the SENDIB | Evidence – Output (completion of actions) | Action Milestone | Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced. | Impact Milestone | SENDIB | |
|-----|----------------------------|--|-------------------|--|--|---------------------|--|---------------------|--------|------------|
| | | | | | | | | | Status | RAG rating |
| | the transition process | schools via the Tertiary Federation to understand what support and information they require to prepare young people with identified health needs for transition, at the EHC plan review in the year prior to a move to college | | <p>LPT Transitions Practitioner smooths transition for children with complex health care needs.</p> <p>DCO offer for colleges to contact if they are experiencing difficulties. DCO will support joint problem solving.</p> <p>A network group across LLR meet 6-weekly (City, county and all colleges plus health) to address any on-going issues</p> <p>Additional Regional SEND funding awarded to colleges to map health transition needs.</p> | | | <p>2. Using evaluation tools highlighted in the header, college staff and Health staff demonstrate confidence and effectiveness in support they receive from health as YP move into college.</p> | | | |

BRAG on a page

| | | | Actions | Action | Evidence | Completed | Impact | Sustained | | |
|---|---|---|---------|--------|----------|-----------|--------|-----------|---|----|
| AREA 4 – Commissioning health needs post 19 | 1 | Joint Commissioning of health needs post 19 | 1 | | | | | | 1 | |
| | | | 2 | | | | | | 2 | |
| | 2 | Accessing services on becoming a young adult | 1 | | | | | | | 3 |
| | | | 2 | | | | | | | 4 |
| | | | 3 | | | | | | | 5 |
| | | | 4 | | | | | | | 6 |
| | | | 5 | | | | | | | 7 |
| | | | 6 | | | | | | | 8 |
| | 3 | Clear pathways to access support | 1 | | | | | | | 9 |
| | | | 2 | | | | | | | 10 |
| | | | 3 | | | | | | | 11 |
| | 4 | College support by Health and Social Care for transitions | 1 | | | | | | | 12 |
| | | | 2 | | | | | | | 13 |
| | | | 3 | | | | | | | 14 |
| | | | | 1 | | | | | | 15 |



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Martin Samuels, Director of Children's Services
Chris West, Chief Officer, CCG

30th July 2021

ACCELERATED PROGRESS PLAN FOLLOWING OFSTED AND CQC'S LOCAL AREA SEND REVISIT

Dear Martin & Chris

We would like to thank you and your partners for your Accelerated Progress Plan (APP). We have reviewed the APP with the SEND and NHS England Advisers and have concluded that it sets out how you will tackle the remaining areas of weakness identified during your revisit and has been deemed fit for purpose.

As set out in the revised Ofsted framework, we expect your plan to be published locally so that children, young people and families can understand the actions you are taking.

Your six-month review meeting to assess progress against the action plan will take place in January 2021. Kully Chahal, your DfE Case Lead, will be in touch to finalise arrangements. For the six-month review, we will need to see documentary evidence two weeks in advance of the meeting and will email nearer the time to set out what you should provide.

I am copying this letter to your SEND and NHSE Advisers, and to your DfE Case Lead & Pauline Killoran Head of SEND. I pleased to learn that you have already set-up monthly monitoring review meetings for September, October, November and December 2021.

Yours sincerely

Jason Bennett
Head of SEND Improvement and Operations Unit, Central England
Department for Education (DfE)

CC:

Pauline Killoran, Head of SEND
Jane Young, DCO LLR
Andre Imich, SEN and Disability Professional Adviser
Deborah Ward, NHSE Adviser
Kevin Rowland, DfE SEND Adviser
Kully Chahal, DfE Case Lead

Appendix 5: High Needs Block Expenditure

| HIGH NEEDS BLOCK | Forecast 2022/23 £'000 | Actuals 2020/21 £'000 | Actuals 2019/20 £'000 | Actuals 2018/19 £'000 | Actuals 2017/18 £'000 | Actuals 2016/17 £'000 | Actuals 2015/16 £'000 |
|--|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Direct placement costs | | | | | | | |
| Special School Places & Top Ups | 32,717 | 28,218 | 26,830 | 25,738 | 24,701 | 22,006 | 20,054 |
| Mainstream top ups | 12,202 | 11,785 | 9,870 | 8,249 | 6,177 | 4,965 | 3,792 |
| DSP Places & Top ups | 1,543 | 802 | 351 | 431 | 536 | 719 | 851 |
| Primary PRU | 1,157 | 1,060 | 1,060 | 1,045 | 3,221 | 3,421 | 3,433 |
| Secondary PRU | 2,343 | 2,300 | 2,195 | 2,199 | | | |
| Independent / Non-Maintained placements | 7,389 | 7,093 | 5,991 | 5,620 | 4,453 | 4,782 | 4,992 |
| FE Colleges | 837 | 846 | 884 | 806 | 575 | 715 | 614 |
| Independent specialist provision post 16 | 1,616 | 1165 | 885 | 728 | 570 | 539 | 436 |
| SEN Transport (allowable charge to DSG only) | 360 | 360 | 360 | 360 | 360 | 360 | 360 |
| | 60,164 | 53,629 | 48,426 | 45,176 | 40,593 | 37,507 | 34,532 |
| <i>Year on Year increase</i> | 12.2% | 10.7% | 7.2% | 11.6% | 11.6% | 11.6% | 11.6% |
| Indirect costs | | | | | | | |
| SEND support service | 3,690 | 3,208 | 3,204 | 3,411 | 3,483 | 3,379 | 3,224 |
| Virtual School | 410 | 380 | 408 | 407 | 319 | 320 | 377 |
| Non statutory Psychology Service | 528 | 528 | 528 | 528 | 528 | 566 | 566 |
| Anti-Bullying service | 30 | 26 | 29 | 30 | 29 | 29 | 29 |
| Parent partnership advice service | 115 | 115 | 115 | 118 | 105 | 195 | 167 |
| Specialist equipment | 85 | 71 | 84 | 82 | 57 | | |
| Support for young carers | 40 | 40 | 40 | 40 | 30 | 40 | 40 |
| Other | 25 | 53 | 148 | 25 | 25 | 25 | 203 |
| Overheads | 627 | 949 | 965 | 946 | 925 | 925 | 925 |
| | 5,550 | 5,370 | 5,521 | 5,587 | 5,501 | 5,479 | 5,531 |
| Total direct and indirect costs | 65,714 | 58,999 | 53,947 | 50,763 | 46,094 | 42,986 | 40,063 |
| Less Allocation | (60,153) | (54,065) | (47,321) | (45,808) | (44,385) | (38,491) | (38,228) |
| Overspend | 5,561 | 4,934 | 6,626 | 4,955 | 1,709 | 4,495 | 1,835 |

Children, Young People and Education (CYPE) Scrutiny Commission

WORK PROGRAMME 2021 - 22

| Meeting Date | Meeting Items | Actions Arising | Progress |
|------------------------|---|---|----------|
| 22 June 2021 | <ol style="list-style-type: none"> 1) Review of the Scope of the Commission 2) The Underachievement of 'Black Caribbean' and 'White British Working-Class' Pupils of Secondary School Age in Leicester 3) Provision of Taxi Framework for Vulnerable People 4) Review of High Needs Block – SEN Support for Pupils in Mainstream | <ol style="list-style-type: none"> 1) Separate training sessions being arranged for Commission Members 2) Update from Working Group in Oct. 3) Further update on transport policy expected when developed 4) Updates to be given following the consultation | |
| 31 August 2021 | <ol style="list-style-type: none"> 1) Ofsted Reports 2) Social Care and Leadership Report on Mainstream school Funding for SEN 3) National Review of Children's Social Care 4) Update on Improvement Progress (Annual engagement meeting) 5) Joint Special Education Needs and Disabilities Commissioning Strategy 6) Update on SEND local area re-visit 7) Verbal update on COVID and vaccinations in Leicester Schools | <p>Item 1 is a report following the verbal update in June.</p> <p>Remaining items were deferred from the June 2021 meeting due to time constraints.</p> | |
| 19 October 2021 | <ol style="list-style-type: none"> 1) Report on Multisystemic Therapy-Child Abuse and Neglect (MST-CAN) & Functional Family Therapy (FFT) intervention programmes 2) Report on government school support programme (including latest 'catch up funding') 3) SEND and Education 3-Year Strategies 4) SEND Joint Commissioning Strategy | | |

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Appendix H

| Meeting Date | Meeting Items | Actions Arising | Progress |
|---|--|-----------------|----------|
| | 5) HNB Element 3 consultation 6) Dyslexia Support in Schools | | |
| Tuesday 7th December 2021 | 1) Update from Working Group on The Underachievement of 'Black Caribbean' and 'White British Working-Class' Pupils of Secondary School Age in Leicester 2) Local Plan | | |
| Tuesday 18th January 2022 | 1) High Needs Block Element 3 decisions 2) Special School banding moderation process 3) Draft Revenue Budget Report | | |

DRAFT

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| Meeting Date | Meeting Items | Actions Arising | Progress |
|--|---------------|-----------------|----------|
| Tuesday 8 th March 2022 | | | |

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DRAFT

| Meeting Date | Meeting Items | Actions Arising | Progress |
|---|--|-----------------|----------------------|
| Draft Forward Plan / Suggested Items for 2021/22 | | | |
| Topic | Details / Progress | | Proposed Date |
| Performance Reporting and data monitoring, including Quarterly and Qualitative Reports | The commission to receive regular 'Quarterly Quality Assurance & Performance' Reports - (<i>'Performance Book' and 'Dashboard' is sent to members as background information</i>). | | STANDING ITEM |
| Ofsted Improvement Plan | Commission members agreed to have this item as a standing item to monitor progress (<i>following Ofsted re-inspection of children's services in June 2017 and report published 4th September 2017</i>). | | STANDING ITEM |
| Safeguarding Partnership Annual report | To receive a report for members consideration. | | Tbc |
| School Attendance Annual Report (incorporating update on Children Missing Education and Elective Home Education) | To receive report on progress for members consideration | | Tbc |
| MST-FFT Annual Report | | | tbc |
| Virtual school head teacher | A report on the impact of COVID on the service and its users (deferred from February 2021 meeting). | | tbc |
| SCE Social Work Progression Framework | | | tbc |
| Adventure playgrounds | | | tbc |
| CMS MI system procurement | Mentioned in the June Scrutiny meeting as an item of consideration. | | |
| Success of the Lundy model of child participation / engagement | Mentioned in the June Scrutiny meeting as an item of consideration. | | |
| Connexions funding for NEETS | Mentioned in the June Scrutiny meeting as an item of consideration. | | |

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| Meeting Date | Meeting Items | Actions Arising | Progress |
|--------------|--|--|--------------|
| | Commissioning of contracts for racial literacy education in schools | Mentioned in the June Scrutiny meeting as an item of consideration. | |
| | Provision of Taxi Framework & Travel Policy (engagement process report) | Mentioned in the June Scrutiny meeting as an item of consideration. | |
| | Review of High Needs Block - SEN Support for Pupils in Mainstream | Presentation completed in June prior to the consultation going live. | Jun 21 |
| | SEND and Education 3-Year Strategies | | Oct 21 |
| | SEND Joint Commissioning Strategy | | Oct 21 |
| | HNB Element 3 consultation | | Oct 21 |
| | HNB Element 3 decisions | | Mar 22 |
| | Special School banding moderation process | | Mar 22 |
| | OFSTED engagement | Commission aware of potential updates that may be given during this municipal year. | TBC |
| | How schools have coped with national exams and pressures | further detail at a future meeting, once data relating to the pattern of grades is collated in February 2022 (requested by Cllr Cole in June's Agenda Meeting) | TBC |
| | Update from Working Group on The Underachievement of 'Black Caribbean' and 'White British Working-Class' Pupils of Secondary School Age in Leicester | Update requested at June 2021 meeting | Dec 21 |
| | Dyslexia Support in Schools | Requested by Chair in the August agenda planning meeting. | October 2021 |
| | Draft Revenue Budget Report | | Jan 22 |

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