

# Swindon Borough Council

## Children's Health, Social Care and Education Overview and Scrutiny Committee

**Wednesday, 14 September 2016**

Committee Room 6, Civic Offices

At 6.00 p.m.

### **Conservative Councillors**

*Gemma McCracken*  
(Chair)  
*Malcolm Davies*  
*Colin Lovell*  
*Barbara Parry*  
*Gary Sumner*

### **Labour Councillors**

*Fay Howard*  
*Teresa Page*  
*Carol Shelley*  
*Nadine Watts*

### **Co-opted Representatives**

Steve Colledge, Swindon Association of Secondary Headteachers  
Gary Evans, Swindon Association of Primary School Headteachers  
Alison Paul, Swindon Association of Special School Headteachers  
Mark Edwards, Healthwatch  
Liz Townend, Church of England Diocese  
Michelle Howard, Equalities Advisory Forum  
TBC, Parent Governor  
TBC, Catholic Church Diocese

**Committee Officer:** Rita Glen Gallo 463611  
email: [RGlen-Gallo@swindon.gov.uk](mailto:RGlen-Gallo@swindon.gov.uk)

Swindon Borough Council can be contacted at the Civic Offices, Euclid Street, Swindon, SN1 2JH (Telephone 01793 445500)

**Access Arrangements** - The venue is wheelchair accessible and an infrared receiver hearing system is provided. If you have any special requirements to enable you to attend the meeting or would like to receive any of the pages contained in this agenda in a larger print size, please contact the Committee Officer as soon as possible prior to the date of the meeting.

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## **AGENDA**

### **1. Apologies for Absence**

### **2. Declarations of Interest**

Members are reminded that at the start of the meeting they should declare any known interests in any matter to be considered, and also during the meeting if it becomes apparent that they have an interest in the matters being discussed.

### 3. Public Question Time

See explanatory note below. Please phone the Committee Officer whose name and number appears at the top of this agenda if you need further guidance.

### 4. Minutes (Pages 5 - 10)

To receive the minutes of the meeting held on 6<sup>th</sup> July 2016.

### 5. Joint Local Area SEND Inspection DCS (Pages 11 - 18)

### 6. Provision at the Salt Way Centre DCS (Pages 19 - 54)

### 7. Education Transport Appeals HES (Pages 55 - 64)

### 8. Work Programme DLDS (Pages 65 - 88)

**Date of Despatch:** 6 September 2016

#### **Key:**

#### **Officers:**

DCS	-	Director of Children's Services
DLDA	-	Director of Law and Democratic Services (Monitoring Officer)
HES	-	Head of Education Services

**Public Question Time** - Swindon Borough Council remains committed to increasing its accountability to the public and to promoting active citizenship. 15 minutes will be allowed at the start of all Council meetings for questions to the Chair from the public about the work of the Committee (except for confidential matters, and matters relating to planning and licensing applications). We will give priority to those who submit questions in writing at least two days before the meeting. Questions must be relevant, clear, and concise. You may not use Public Question Time as an opportunity to make speeches or statements.

Questions in writing should be sent to the Committee Officer whose contact details appear on the agenda above or to the Director of Law and Democratic Services, we will publish it, along with the answer, alongside the Minutes. The process associated with asking a public question is set out in the "Public Question Time at Council Meetings Protocol and Guidance" available on the Council's Website.

(<http://ww5.swindon.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13338&path=0>) or from the Committee Officer named above.

#### **Terms of Reference:**

To fulfil all the functions of an overview and scrutiny committee as they relate to –

- the review, scrutiny and development of policy recommendations,
- the management of performance,
- the monitoring of progress towards delivering relevant strategies and corporate priorities, and
- the formulation of advice for the Cabinet, Council and other partners and stakeholders.

To have specific responsibility for (but not limited to) the scrutiny of:–

- the performance of services for children towards agreed local and national Performance Indicators,
- the quality of provision and effectiveness of Local Authority strategies to raise standards of education within Swindon,
- specialist social services and integrated social services for children and young people in Swindon,
- the delivery of services to children and young people in Swindon generally.

In addition, as these relate to Children and Young People:

- the performance of services seeking to deliver healthy communities towards agreed local and national performance indicators,
- Health, health commissioning and service delivery,
- Public Health, Health promotion and the work of the Health and Wellbeing Board, and
- Health Integration and collaborative working and commissioning with Health agencies and providers and General Practitioners.
- Reducing Domestic Violence and Abuse
- Strategic issues around Licensing.

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**CHILDREN'S HEALTH, SOCIAL CARE AND EDUCATION OVERVIEW AND  
SCRUTINY COMMITTEE**

**WEDNESDAY, 6 JULY 2016**

PRESENT:- Councillors Gemma McCracken (Chair), Malcolm Davies, Fay Howard, Colin Lovell, Carol Shelley, Nadine Watts and Steve Weisinger.

Alison Paul (Swindon Association of Special Schools Headteachers), Steve Colledge (Swindon Association of Secondary Headteachers), Gary Evans (Swindon Association of Primary Headteachers), Paul Dobson (Project Manager, Swindon Ten to Eighteen Project), Chloe Townsend, Miss Dani Wells and Mr Jacob Patterson (Members of the Youth Parliament), Mark Edwards (Healthwatch).

Apologies for absence were received from Councillors Barbara Parry, Teresa Page, and Gary Sumner and from Karen Reeve (Director of Children's Services), Liz Townend (Bristol Diocese), Michelle Howard (Equalities Advisory Forum), Claire Smith (Participation Manager).

Also Present: Councillor Fionuala Foley, Cabinet Member for Children's Services and Sarah Merritt and Kevin McNamara (Great Western Hospital), Peter Nathan (Head of Education), Maria Young (Interim Head of Children, Families and Community Health) and Cherry Jones (Director of Public Health).

**1. Appointment of Vice-Chair**

Resolved – That Councillor Colin Lovell be Vice Chair of the Children's Health, Social Care and Education Overview and Scrutiny Committee for the Municipal Year 2016/17.

**2. Declarations of Interest**

The Chair reminded Members of the need to declare any known interests in any matters to be considered at the meeting.

Councillor Carol Shelley declared personal and non-prejudicial interest in her capacity as governor of Swindon Academy.

**3. Minutes**

Resolved -That the minutes of the meeting held on 13<sup>th</sup> April 2016 be confirmed and signed as a correct record.

**4. Public Question Time**

The following questions were asked in accordance with Standing Order 28 –

Mr Paul Sunners, SACRE (Standing Advisory Council on Religious Education) asked why SACRE would no longer be represented on the Committee.

The Chair thanked Mr Sunners for his questions and comments and responded at the meeting.

Mr Sunners asked supplementary questions relating to (a) the closure of the Borough Council's Children Centre, (b) whether Councillors and Officers were able to qualify what school holiday support was available to children, young people and families, and (c) where this information would be made available for parents.

The Chair thanked Mr Sunners for his questions and comments and advised that a written response would be provided.

## **5. Appointment of Co-optees**

The Director of Law and Democratic Services submitted a report concerning the appointment of co-optees to the Children's Health, Social Care and Education Overview and Scrutiny Committee for the Municipal Year 2016/17. It was noted that the Children's Health, Social Care and Education Overview and Scrutiny Committee is permitted by the Council's Constitution to appoint parent governor and diocese representatives to its membership and may choose to appoint additional co-opted members.

Resolved - (1) That this Committee confirms the appointment of the following voting co-opted representatives:

- (a) Liz Townend as the Church of England Diocese representative.
  - (b) The appointment of a Catholic Church Diocese representative (to be advised).
  - (c) The appointment of 2 Parent Governor representatives (to be advised).
- (2) That the appointment of the following non-voting representatives be confirmed:

- (a) Alison Paul (Swindon Association of Special School Headteachers).
- (b) Gary Evans (Swindon Association of Primary Headteachers).
- (c) Steve Colledge (Swindon Association of Secondary Headteachers).
- (d) Michelle Howard (Equalities Advisory Forum).
- (e) Mark Edwards (Swindon Healthwatch).

## **6. Children's Services Performance Report**

The Director of Children's Services submitted a report providing an update on the performance within all service commissioning for the first quarter to July 2016.

Mrs Maria Young, Interim Head of Children, Families and Community Health, introduced the report and explained that it had been structured to highlight the improvements that had been made and areas where further actions would be required. She referred to the areas covered that included information on the improved recruitment figures for social workers, work being undertaken on the Quality Assurance Framework, better timelines when dealing with child protection cases and the number of Early Help Record Plans completed, reflecting that young people accessed support early.

She highlighted the challenges faced by the department, including the number of young people entering the care system and the processes in place to support them. Mrs Young updated the Committee on work being undertaken to

identify young people who were not in education, employment or training

Mrs Young and Mr Peter Nathan, Head of Education, responded to the Committee members' questions and comments in respect of the following:

- The reasons for the delay in completing statutory assessments and whether this was due to the system used by the department.
- Confirmation that the data cleansing exercise relating to statutory assessments would be complete in the next quarter.
- Whether social workers' long term sickness was stress related and how this was being managed by the department.
- The timeframe to upload all Early Help Record and Plans onto the IT system, ensuring stakeholders involved in supporting young people had easier access to records.
- The reasons for the reduction in the number of Early Help Record and Plans issued and confirmation that the need for special resource provision in Swindon was high.
- An update on the physical and emotional support offered to refugee children and young people arriving in Swindon.
- The reasons for the decrease in the Post 16 in-learning rate. These were due to the number of courses being offered in the Sixth Form, the change in academic accreditation and the number young people changing courses during the year.
- The formatting of the report to reflect comparative data necessary to enable accurate comparisons as not all areas provide national statistics.
- How Early Years Health and Targeted Mental Health for young people data compared to national statistics.
- The transition process following the closure of Children Centres.
- The actions being undertaken to address disabled young people who were not in employment, education or training.
- The reasons why some young people had a second or subsequent Child Protection Plan and if these were being terminated prematurely.
- The reason for an increase in legal costs as reflected in the Financial and Procurement Implications section of the report.
- The reason why only 65.8% of children on Child protections plans were visited within timescales and work being undertaken to address this. Members noted that this figure primarily reflected a delay in recording the data as visits were undertaken in a timely manner.
- The possible impact of the Court of Appeal's decision regarding "in term" holiday absences.

Resolved – (1) That the report be noted.

(2) That the Interim Head of Children, Families and Community Health be requested to circulate an update on the new Family Service Provision coming into effect in September 2016.

## **7. Progress Update of Youth Participation**

The Chair welcomed Mr Paul Dobson, Project Manager, STEP (Swindon Ten to Eighteen Project), Miss Chloe Townsend, Miss Dani Wells and Mr Jacob Patterson, elected Members of the Youth Parliament to the Committee meeting.

Mr Dobson referred to the contents of the report submitted by the Director of Children's Services, highlighting the important work undertaken by the Youth Parliament. These included the Youth Parliament election process, the committed participation by school, the national Youth Parliament campaign, "Don't Hate – Educate", the re-instatement of young inspectors, the additional funding received from the Council, the Youth Parliament's focus on disability and how the new Participation Manager was undertaking outreach work with Councillors. The Committee further noted that a "rap" song was created by Westrop and Nythe Schools, the results from "Tell Us Survey" following the introduction of the SEND (Special Educational Needs and Disability) reforms indicated that young people had felt services and opportunities had improved in the last 12 months and that goals were achievable.

The Youth Parliament representatives referred to their experiences, their reasons for wanting to be elected to the Youth Parliament and explained the work they envisaged undertaking during their time in office.

Following the presentation of the report, the representatives, together with Mr Dobson, responded to members' and representatives' questions and comments on the following issues:

- The review undertaken by the Youth Parliament of the Great Western Hospital website.
- How the Committee could support the Youth Parliament in their work.
- How the Young Inspectors scrutinize and review.
- The continued robust engagement between Youth Parliament members and schools.

Resolved - (1) That the report be noted.

(2) That the Committee expresses its continued support for the work of the Youth Parliament.

(3) That Miss Chloe Townsend, Miss Dani Wells and Mr Jacob Patterson, the elected Members of the Youth Parliament, be thanked for their contributions.

(4) That the elected members of the Youth Parliament meet with the Cabinet Member, Children Services, Chair of the Committee, Cllr Carol Shelley and Mrs Maria Young, Service Manager, Children's Social Work Teams to discuss ways of bringing forward the Youth Parliaments' work programme and how the Committee could support them.

(5) That the Project Manager, STEP liaises with Councillor Weisinger regarding the opportunity of the Youth Parliament Members briefing the Highworth Town Council on their work and to look at ways of how the Town Council could support their work.

(6) That the Project Manager, STEP liaises with Kevin McNamara, Director of Strategy, Great Western Hospital to organise a visit to the Great Western Hospital for the Youth Parliament members.

(7) That members of the Committee be encouraged to engage with School Councils to promote the work being undertaken by the Swindon Ten to Eighteen Project team.

## **8. Work Programme**

The Committee considered a report of the Director of Law and Democratic Services on the results of the 2016/17 Overview and Scrutiny work programme consultation and on details regarding the priorities for Children's Services.



Resolved – (1) That the work programme be noted and further revised to incorporate changes agreed at this meeting.

(2) That Councillors, Members and stakeholders submitting areas for consideration under this Committee's Work Programme for the Municipal Year, 2016/17, be thanked.

## **9. Dates of Future Meetings**

Meetings of the Committee during the Municipal Year 2016/17 be held on:

Wednesday, 14<sup>th</sup> September 2016, 6.00 pm in Committee Room 6.

Wednesday, 9<sup>th</sup> November 2016, 6.00 pm in Committee Room 6.

Wednesday, 18<sup>th</sup> January 2017, at 6.00 pm in Committee Room 6.

Wednesday, 29<sup>th</sup> March 2017, at 6.00 pm in Committee Room 6.

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## Joint Local Area SEND Inspection

### Children's Health, Social Care and Education Overview and Scrutiny

Date: 14<sup>th</sup> September 2016

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Author:	Head of Education
Wards:	All
Locality Affected:	All
Parishes Affected:	All

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#### 1. Purpose and Reasons

- 1.1 This report sets out to inform the committee of the new joint local area SEND inspection.
- 1.2 From May 2016 all local areas in England will be subject to a joint inspection from Ofsted and the Care Quality Commission (CQC) to judge the effectiveness of the area in implementing the disability and special educational needs reforms as set out in the Children and Families Act 2014.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the arrangements for the forthcoming joint local area SEND inspection and monitor progress towards implementing our strategy to deliver better outcomes for children and young people with SEND in Swindon.

#### 3. Detail

Background to the inspection

- 3.1 In April 2016 Ofsted and the Care Quality Commission published the framework for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities.
  - 3.1.1 The inspection will review how local areas support these children and young people to achieve the best possible educational and other outcomes, such as being able to live independently, secure meaningful employment and be well prepared for their adult lives.
  - 3.1.2 It is important to note that these inspections will evaluate how effectively the local area meets its responsibilities, and not just the local authority. This includes clinical commissioning groups (CCGs), public health, NHS England for specialist services, early year's settings, schools and further education providers.

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Further information on the subject of this report can be obtained from Lyn Frith, 01793 463217 [Lfrith@swindon.gov.uk](mailto:Lfrith@swindon.gov.uk).

## **Joint Local Area SEND Inspection**

### **Children's Health, Social Care and Education Overview and Scrutiny**

**Date: 14<sup>th</sup> September 2016**

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- 3.1.3 During the inspection, inspectors will visit a range of providers to gather evidence, including nurseries, schools, colleges and specialist services.
- 3.1.4 If inspectors become aware of concerns of a safeguarding or child protection nature, they will make additional enquiries to satisfy themselves that such matters are being dealt with appropriately. If they remain concerned, this could include inspectors referring individual cases to the local authority or an inspection of the individual service or provider in line with Ofsted or CQC's duties and powers.
- 3.1.5 The starting point for the inspection is the expectation that leaders for the local area should have an understanding of strengths and aspects that require development.
- 3.1.6 To support local areas assess how well arrangements are working and compare delivery across local areas, the Department for Education has produced a local area SEND report which presents the statistics on SEND for Swindon and provides the opportunity to compare our performance with other areas.

[http://lginform.local.gov.uk/reports/view/send-research/local-area-send-report?mod-area=E06000030&mod-group=ADASSRegions\\_SouthWestern&modify-report=Apply](http://lginform.local.gov.uk/reports/view/send-research/local-area-send-report?mod-area=E06000030&mod-group=ADASSRegions_SouthWestern&modify-report=Apply)

#### **Our Self-assessment**

- 3.2 Detailed self-evaluation has been an ongoing process based on the local authority readiness survey of 2014, and is included in our strategic plan to deliver better outcomes for children and young people with SEND in Swindon.
  - 3.2.1 The clinical commissioning group (CCG) governing body oversees the joint arrangements for SEND and the contribution of health. The CCG have undertaken a detailed self-evaluation and will present this to the SEND Strategic Board in September 2016. The improvement plan for the CCG will be overseen by the Joint Commissioning Group (JCG), reporting to the Health and Well-being Board.
  - 3.2.2 The inspection framework and therefore our self-evaluation is evaluated under three headings as identified below. The areas for development are monitored through the Quality Improvement sub-group of the SEND Strategic Board, reporting through JCG to the Health and Wellbeing board. The key strengths and areas for development are as follows under each heading.

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Further information on the subject of this report can be obtained from Lyn Frith, 01793 463217 [Lfrith@swindon.gov.uk](mailto:Lfrith@swindon.gov.uk).

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3.2.3 Our effectiveness in identification of children and young people who have special educational needs and/or disabilities.

#### Strengths

- Effective screening processes are in place to identify need in new-born infants
- Advisory teaching staff and educational psychologists help to ensure that children receive the support they need to be able to gain access to pre-school settings, nursery education and the Reception class in school.
- Practitioners who identify the need for additional support to help children access early-years settings can seek extra funding.
- The Special Education Needs Resource and Assessment Panel (SENRAP) contributes well to identifying and providing for the needs of young people who have special educational needs and/or disabilities.
- Assisted speech and language equipment provided to a child or young person travels with them to ensure access to the most appropriate equipment to support learning during their education and transition into adult life.
- The local area's 'early help' assessment process is a good example of joint working across the education, health and care workforce. Early help records are used effectively as part of the graduated response before a request is made for a statutory assessment of special educational needs.
- Integrated service delivery in early years has ensured timely and effective assessment of need. This helps to identify children who need referral to speech and language support and ensures that children receive in-depth assessment leading to early identification of their needs and health care.

#### Areas for development

- The percentage of pupils with a statement or EHC plan remains high at 3.8% compared to an average of 2.9% in all English unitary authorities. Plans are in place to understand why this figure remains so high and agree our strategic approach to reducing the % of pupils with a statement or EHC plan.
- Despite positive steps and recent improvements, there is still work to do to reduce the time that children and young people have to wait for

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Further information on the subject of this report can be obtained from Lyn Frith, 01793 463217 [Lfrith@swindon.gov.uk](mailto:Lfrith@swindon.gov.uk).

## Joint Local Area SEND Inspection

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their plan to be as short as possible and to meet the deadline for conversion statements to education, health and care plans.

- Despite the clinical commissioning group recognising the need to undertake a review of children's health services, Swindon is struggling to meet the demand for referrals and diagnosis for autistic spectrum disorders (ASD).

#### 3.2.4 Our effectiveness in assessing and meeting the needs of children and young people who have special educational needs and/or disabilities.

##### Strengths

- Parents, carers and children and young people are involved in regular reviews. Co-produced plans mean that children are at the heart of the education, health and care plans.
- Access to high quality health services is well established within specialist resourced provision and special schools.
- Some good examples exist of joined-up working both within health teams and other partners. For example, the multi-agency unit based at Uplands learning campus.
- The existence of joint multi-disciplinary health clinics at the Saltway centre assist families understanding of roles and responsibilities and reduced duplication.

##### Areas for development

- Although the annual review process is sound if a re-referral is required, this can mean that needs are met too slowly. The policy, which outlines what happens when health appointments are missed, requires review to ensure greater flexibility when dealing with vulnerable children and parents.
- Staff changes and illness within teams' means that children and young people's needs are not met quickly enough.
- Parents, carers and young people are not sufficiently aware of the role they could play in helping to shape the local offer and the mechanisms to do so. Providers and parent carer groups have a greater role to play in using the local offer as a medium to share information to access specialist services used by the local area.

## Joint Local Area SEND Inspection

### Children's Health, Social Care and Education Overview and Scrutiny

Date: 14<sup>th</sup> September 2016

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- The local offer is not easy to navigate for some families. Some parents continue to be unaware of its purpose.
- Leaders from education, health and social care do not yet have an agreed strategy for sharing expertise and training staff to benefit children and young people who have special educational needs and/or disabilities. This limits the capacity of leaders to evaluate the impact of this work on pupils' outcomes.
- A single pathway to develop provision, particularly for young people aged 19-25 is still in development.

3.2.5 Our effectiveness in improving outcomes for children and young people who have special educational needs and/or disabilities.

#### Strengths

- The impact and visibility of staff in specially commissioned named roles, in education and health, are having a significant positive effect on the progress of the special educational needs and disability reforms. Formal networking across education, health and social care has increased since 2014.
- The proportion of schools in the area that are good or better has risen in the last three years.
- The proportion of children and young people placed out of area as a result of their special educational needs and/or disability has reduced in the last three years.
- The % of children and young people with special educational needs and/or a disability who are permanently excluded from school remains below the national average.
- Most staff in education, health and social care accessed training on the special educational needs and disability reforms and understand their roles in implementing these reforms.
- Individual providers are aware of their responsibility to monitor children and young people's progress in a range of outcomes. Increasing numbers of children in the early year's foundation stage are meeting their developmental targets.
- Robust checks are in place to monitor the pupils who are home educated, who have medical needs and are educated in hospital.

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Further information on the subject of this report can be obtained from Lyn Frith, 01793 463217 [Lfrith@swindon.gov.uk](mailto:Lfrith@swindon.gov.uk).

# Joint Local Area SEND Inspection

## Children's Health, Social Care and Education Overview and Scrutiny

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### Areas for development

- Pathways for 19-25 year olds, to support young people into adulthood require further development. Transition is a strategic priority for the local authority and plans are in place to improve outcomes for young people as they prepare for adulthood.
- The progress of pupils who have statements or education, health and care plans and for those receiving support for special educational needs and/or disabilities is insufficient. In particular, the progress of pupils from key stage 2 to the end of key stage 4 continues to be below national levels for pupils compared with all pupils in English and mathematics.
- Fixed term exclusions for children and young people with special educational needs and/or disabilities remain unacceptably high.

#### **4. Alternative Options**

- 4.1 There are no alternative options as all local areas will be inspected at least once during a five-year period.

#### **5. Implications, Diversity Impact Assessment and Risk Management**

##### Financial and Procurement Implications

- 5.1 There are no financial or procurement implications arising as a result of this report. Any expenditure arising as a result of an item on the Committee's work programme will be met by the Overview and Scrutiny Support budget, subject to the approval of the Committee.

##### Legal and Human Rights Implications

- 5.2 There are no legal and human rights implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Scrutiny Committee and in any recommendations made by the Scrutiny Committee.

##### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 There are no other direct implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Scrutiny Committee and in any recommendations made by the Scrutiny Committee.



# Joint Local Area SEND Inspection

## Children's Health, Social Care and Education Overview and Scrutiny

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### Diversity Impact Assessment

- 5.4 No Diversity Impact Assessment is required at this stage, any DIA that is required during review of topics included within the work programme will be identified at the appropriate stage.

### Risk Management

- 5.5 No risk management issues have been identified at this stage, any risk management issues will be identified at the appropriate time when a topic is under review by the Scrutiny Committee and if it makes any recommendations.

## **6. Consultees**

- 6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer)

## **7. Background Papers**

- 7.1 The framework for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities.
- 7.2 Department for Education Local Area SEND report.

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## **Provision at the Salt Way Centre**

### **Children's Health, Social Care and Education**

#### **Overview Committee**

**Date: 14 September 2016**

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Author:	Interim Head of Children, Families and Community Health and Director of Children's Services.
Wards:	All
Locality Affected:	All
Parishes Affected:	All

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#### **1. Purpose and Reasons**

- 1.1 This report will update the Committee on the services that are being provided for children and young people with additional needs and disabilities at the Salt Way Centre in West Swindon. The services to which this applies and which are outlined in Appendix 1 are Paediatric Therapy [Physiotherapy, Occupational Therapy], Speech and Language Therapy, Complex Health and Continuing Care Service, Disabled Children's Team [Social Care], Aiming High Short Breaks Service, Portage including Special Tots and Early Bird Services, Koalas [charity part funded by SBC, Swindon CCG] and Swindon Learning Disability CAMHS [provided by Oxford Health NHS Foundation Trust, commissioned by Swindon CCG].
- 1.2 The reports contained in Appendix 1 will give an overview of the type of services being provided and how they are responding to increasing demand.
- 1.3 These are key services funded from six different sources including Swindon Borough Council and Swindon Clinical Commissioning Group and from external sources such as school budgets in the form of traded services and from the Great Western Hospitals NHS Foundation Trust.
- 1.4 We are contributing to the Councils' Corporate strategy 'Make best use of Swindon resources inside and outside the Council'.

#### **2. Recommendations**

The Committee is recommended to:

- 2.1 Comment on the approach and strategy being adopted to manage these services as demand increases.
- 2.2 Identify any areas of development or concern that require further investigation or exploration.

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Further information on the subject of this report can be obtained from Mark Green, 01793 464061, mpgreen@swindon.gov.uk.

# Provision at the Salt Way Centre

## Children's Health, Social Care and Education

### Overview Committee

Date: 14 September 2016

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### 3. Detail

#### Context

- 3.1 Although the focus of this paper is on services specifically provided for children and young people with a disability and their families there are other services based in the Salt Way Centre who provide services specifically to the South Locality. These include the South Area Social Work Team and the Early Help South Locality Service. The former includes Social Workers and the latter Health Visitors, Youth Engagement Workers, Targeted Mental Health Service, Educational Psychology, Education Welfare, Community Nursery Nurses and School Nurses.
- 3.2 There are three charities based within the Centre which includes Koalas whose function is outlined in Appendix 1, Wiltshire Tree House who provide bereavement support for children and young people in Swindon and Wiltshire and Jessie May who deliver and develop quality respite and palliative care services in the home for children and young people with life limiting conditions. Also, the Swindon Parent and Carer Group use the Centre as one of its bases. These services work in partnership with the other services based within the Centre.
- 3.3 The Centre possesses seven specially adapted clinic rooms and 6 meeting rooms. This allows us to undertake a lot of direct work with children and families within the Centre as well as in the community. There are specific clinics for Speech and Language therapy, Physiotherapy, Occupational Therapy, Clinical Psychology, Child Psychiatry, TAMHS and Health Visiting. We have visiting Paediatricians from Great Western Hospital who provide clinics in epilepsy, child development, ADHD and Autistic Spectrum Condition/Disorder. In 2015 we had approximately 12000 children and young attend for appointments at the Centre. This excludes those attending Koalas, Special Tots and the various other groups held at the Centre.
- 3.4 In addition a number local voluntary/parent groups use the Centre to provide a services. These include Child Minder Group, Midwife Clinic, Early Bird courses [see Appendix 1] and Coast [a parent support group for parents who have children with ASD and others. Also, the Centre is used three evenings a week and each Saturday to provide specialist social or activity groups for children and young people with additional needs and disabilities. These are provided and facilitated by the Aiming High Short Break Service
- 3.5 The Salt Way Centre is six day a week facility both for children and young people and their families living within the south locality and for children and young people with a disability and their families.
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Further information on the subject of this report can be obtained from Mark Green, 01793 464061, mpgreen@swindon.gov.uk.

# Provision at the Salt Way Centre

## Children's Health, Social Care and Education

### Overview Committee

Date: 14 September 2016

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#### Detail for specific services for children and young people with a disability

- 3.6 The detail on the individual services is encapsulated in Appendix 1. The following is highlighting some of the main points contained within the reports.

#### Paediatric Speech and Language Therapy

- 3.7 There has been an overall 26.16% increase in referrals in the last 3 years.
- 3.8 The number of referrals seen within 13 weeks [target of 80%] has dropped from 81% in 2014/15 to 68.5% in March 2016. This refers to the overall performance of children seen within 13 weeks.
- 3.9 There has been a 191% increase in the number of children and young people with Autistic Spectrum Disorder on speech and language therapy caseloads from March 2013 to March 2015.
- 3.10 An initial request to the Swindon CCG for additional funding to respond to these pressures was declined pending a joint SBC and Swindon CCG formal review of all Community Health Services.
- 3.11 The impact of an increase in workload due to the Special Educational Needs and Disability Code of Practice [DFE 2014] [SEND Reforms].

#### Paediatric Therapy: Physiotherapy and Occupational Therapy

- 3.12 There has been an overall increase of 21.85% in referrals in the last 3 years. The service has managed this increase in demand and has maintained the target of seeing 80% of children and young people within 13 weeks.
- 3.13 The impact of an increase in workload as a result of the SEND Reforms.

#### Complex Health and Continuing Health Care Service

- 3.14 The service is fully commissioned by the Swindon CCG.
- 3.15 In 2013/14 the service was working with 20 children and young people and their families. This has increased to 37 in 2015/16. This is an overall increase of 85% since 2013/14.

#### Disabled Children's Team

- 3.16 The team now have a greater emphasis on assessment and intervention in relation to child protection and working with families where there is clear evidence of the imminent risk of family breakdown.

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Further information on the subject of this report can be obtained from Mark Green, 01793 464061, mpgreen@swindon.gov.uk.

# Provision at the Salt Way Centre

## Children's Health, Social Care and Education

### Overview Committee

Date: 14 September 2016

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- 3.17 The service is trying to strike a balance between the provision of short breaks and direct intervention and support to families to address the underlying causes of need and remain within a defined budget.

#### Aiming High Short Break Service

- 3.18 The Committee to note the changes in the service following an extensive consultation and report to Cabinet in December 2015. Please refer to appendices 1 and 2.

#### Learning Disability CAMHS

- 3.19 The Swindon LD CAMHS Service is commissioned by Swindon CCG and is part of the Oxford Health NHS Trust.

- 3.20 Although referral rates have remained constant the complexity of the work has increased.

#### Swindon Portage [Home Teaching]

- 3.21 The service has maintained and increased slightly the number of children to whom it provides a service.

- 3.22 The impact on workload of the introduction of the SEND Reforms

#### Special Tots

- 3.23 The positive impact of Special Tots and Koalas [Charity] working in partnership to manage the referrals into the service.

- 3.24 As with the other services the impact of implementing the SEND Reforms.

#### Early Bird Programme

- 3.25 The Committee are asked to note the success of this programme.

#### Koalas Swindon Opportunity Group

- 3.25 To note how a charity can work in partnership with an SBC service to maximise the resources that are available to children in Swindon with additional needs and disabilities.

## 4. Alternative Options

- 4.1 In this report the Council is scrutinising its operational activities.

# Provision at the Salt Way Centre

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#### Financial and Procurement Implications

- 4.2 There are no specific financial implications for the Council arising from this report. Each of the services which are given a focus in this report is required to remain within a prescribed financial envelope.
- 4.3 We are aware that the demand for these services is likely to increase whilst resources will remain finite. This means that our ability to redesign our services to meet changing needs will be key going forward.

#### Legal and Human Rights Implications

- 4.4 All legal and human rights considerations have been fully taken into account in compiling this report. It is considered that the content of this report is compatible with Convention rights.

#### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 4.5 None were identified in the preparation of this report.

#### Diversity Impact Assessment

- 4.6 A recent diversity impact assessment has been carried out on one of the services contained within this report [Aiming High Short Break Service November 2015]. This has highlighted some key areas that could have implications for those services given a focus in this report.
- 4.6.1 Disability: Potential impact identified due to potential new maximum service levels and some potential reductions in service levels.
- 4.6.2 Race, religion/ belief: Potential impact identified. Black and minority ethnic (BME) service user numbers are lower than expected based on the population profile. We believe that the services are, and will continue to be, accessible to people of any race, religion or belief.
- 4.6.3 Sexual orientation: Potential adverse impact identified; further work is required to understand any potential barriers for this group.
- 4.6.4 Age, sex, gender identity, marriage/ civil partnership, maternity, economic status: No adverse impact identified.

#### Risk Management

- 4.7 No additional risks have been identified.

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Further information on the subject of this report can be obtained from Mark Green, 01793 464061, mpgreen@swindon.gov.uk.

# **Provision at the Salt Way Centre**

## **Children's Health, Social Care and Education**

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#### **5. Consultees**

- 5.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

#### **6. Background Papers**

- 6.1 None.

#### **7. Appendices**

- 7.1 Appendix 1: Services being provided for children and young with a disability or additional needs and their families at the Salt Way Centre.

- 7.2 Appendix 2: Short Break Statement.



## Appendix 1:

### Services being provided for children and young people with a disability and additional needs and their families at the Salt Way Centre

#### Introduction:

The following is an outline of all the services based within the Salt Way Centre that provide services for children and young people with a disability or additional needs. The reader will gain an understanding of the type of services being provided, to whom they are being provided and how we are responding to the increasing demands on these services.

#### Paediatric Speech and Language Therapy

The Paediatric Speech and Language Therapy Service has an open access referral system and accepts referrals for children and young people who require specialist support relating to speech, language, feeding and swallowing. The service is delivered in multiple settings in homes, early year's settings, schools and clinics as well as via training to other professionals and parents. Also, to access the core service the child or young person must be registered with a Swindon General Practitioner (GP) or access the service via one of the specialist commissioned services as below.

The service is currently commissioned from six main sources

- Swindon NHS Clinical Commissioning Group (Swindon CCG)
- Schools in Swindon through 28 separate traded service contracts
- Swindon Borough Council's Direct Schools Grant
- Great Western NHS Hospitals Foundation Trust (GWH)
- Swindon Downs Syndrome Group
- Swindon Borough Council Youth Offending Team.

The service was providing assessment, care and therapy to 2392 children and young people in April 2016.

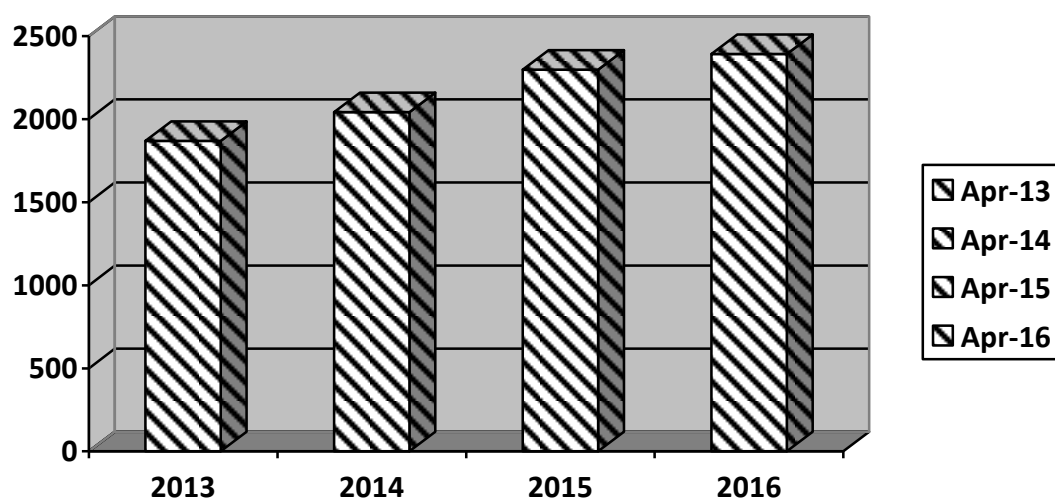
In 2015/16 referrals mainly came from early year's settings (28.5%), schools (15.9%), Health Visitors (14.9%) and Paediatricians (11.5%). Small numbers of referrals came from a range of other therapists and professionals including the early years support pathway (2.9%) and the Restorative Youth Services (0.9%).

In the team for 2016/17 there will be 14.9 whole time equivalent staff including increased posts for traded service contracts – the staffing group includes speech and language therapy assistants and speech and language therapists whose specialities include feeding and swallowing and dysphagia work, phonology and fluency skills and specialist work with children and young people with ASD.

We have had a consistent year on year increase in accepted referrals for children requiring speech and language therapy intervention. In April 2013 the service had 1896 children who required the

speech and language therapy service compared with 2392 in April 2016, this is an overall increase of 26.00% in the last three years. This is an upward trend that is continuing and continues to exacerbate pressure on service capacity.

**The table outlines the increase in children and young people requiring speech and language therapy year on year.**



The increasing referrals and workload have been absorbed by the service until now and the target of offering an initial assessment to 80% of cases within 13 weeks was achieved in 2014/2015 with an overall rate of 81% of cases seen within 13 weeks. However, as this referral rate continues to steadily increase the number of referrals seen within 13 weeks has dropped to 74.7% in 2015/2016 overall. In March 2016 68.5% of referrals were seen within 13 weeks.

We are currently reviewing the clinic and school service and considering moving to a centralised referral management system to ensure an equitable waiting time across Swindon. This is made more challenging to achieve by the limited capacity of the existing administrative and clinical staff time to support this new approach and the need to remain within the current financial envelope.

Other key areas of increased pressure in the service are the increase in children with Autistic Spectrum Disorders (ASD) who are awaiting assessment or therapy. There has been a 191% increase in the number of children and young people on the three ASD speech and language therapy caseloads from March 2013 to March 2015 (from 72 to 210 children and young people). This level of need is consistent in 2016.

We have requested additional funding from Swindon CCG to manage the increased need for the service and specifically for funding to increase the specialised therapy resources for children and young people with ASD. This funding request has been declined subject to a formal review of all community health services so the pressure on ASD services and waiting times will remain.

In addition the changes to the statutory requirements for support for children and young people laid out in the special educational needs and disability code of practice: 0-25 years (DFE, DH 2014) also present a number of challenges for the service.

These challenges include

- Meeting the requirements to provide an Education Health Care Plans [EHCP] assessment within six weeks
- Ensuring the early identification of additional needs because of the waiting time for assessment
- Ensuring access to enough treatment and care – some therapy is limited due to the level of demand.

There has been no additional funding to respond to this new requirement. We will struggle to meet these targets within the currently commissioned service. This matter will be discussed at the next SEND Board Meeting in September 2016.

As a service we are continuing to manage service redesign to maximise use of therapy resources whilst remaining in financial balance and meeting financial savings if required.

## **Paediatric Therapy [Physiotherapy and Occupational Therapy]**

The Paediatric Therapy Service is made up of the Physiotherapy and Health and Social Care Occupational Therapy Teams. The service provides a range of physical therapy and specialist equipment, aids and adaptations to enable children and young people to achieve maximum functional independence. The service also provides the specialist paediatric orthopaedic and orthotics support to clinics as well as specialist dynamic movement orthoses clinics on behalf of the Great Western NHS Hospitals Foundation Trust (GWH).

The service is currently commissioned from three main sources

- Swindon NHS Clinical Commissioning Group
- Schools in Swindon through 10 separate traded service contracts
- Great Western NHS Hospitals Foundation Trust (GWH)

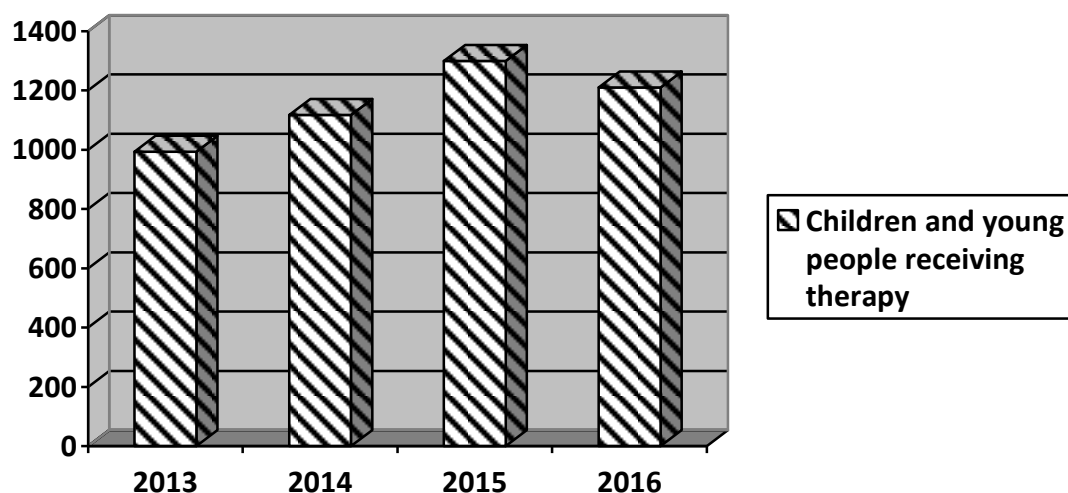
The service was providing assessment, care and therapy to 1210 children and young people in April 2016.

In 2015/16 referrals mainly came from Community Paediatricians (22.7%), GPs (15.6%) and Acute Consultants (13.8%). Other referrals came from the Early Years Support Pathway (6.6%), schools (5.8%) other therapists (5.8%) and from self-referral of those seen by the service in the last year (5.8%) and a number of other health professionals. Children and young people must be registered with a Swindon GP unless they are accessing certain specialist commissioned services.

In the team for 2016/17 there will be 13.7 whole time equivalent staff including increased posts for traded service contracts – the staffing group includes therapy assistants, assistant practitioners and physiotherapist and occupational therapists. Therapists have specialist skills in orthopaedics, orthotics, dynamic movement orthoses, respiratory physiotherapy, provision of specialist equipment, aids and adaptations and specialist work with children and young people with ASD.

There has been an overall increase in accepted referrals for children paediatric therapy intervention since April 2013. In April 2013 the service had 993 children who required the paediatric therapy service compared with 1210 in April 2016, this is an overall increase of 21.85% in the last three years. This rise in demand does seem to have stabilised and has fallen by 6.85% in the last year.

**The table outlines the trend in children and young people requiring paediatric therapy year on year.**



The service has successfully managed the demand and achieved the target to see 80% of children and young people within 13 weeks of an accepted referral through 2013/14 to 2015/16.

Whilst managing the demand overall there are clear pockets of pressure that reflect those seen in the speech and language therapy service. These are increased demand and waiting times for assessments and therapy for children with ASD and the ability to meet the statutory requirements for support for children and young people laid out in the special educational needs and disability code of practice: 0-25 years (DFE, DH 2014).

We have also requested additional funding from Swindon CCG to increase the specialised paediatric therapy resources for children and young people with ASD. This funding request was declined so the pressure on ASD services and waiting times will remain.

## Children's Complex and Continuing Health Care Service

This service provides care to a small cohort of children and young people who have the highest level of complex health and nursing needs. The service aims to support and facilitate children and young people to remain at home and to attend school as far as possible.

Referrals are accepted from health professionals for children and young people who have at least two areas of high dependency need. These might be in difficulties with breathing or feeding or life limiting conditions. All children and young people must be registered with a Swindon GP.

In 2015/16 75% of referrals came from the secondary care consultants with the remaining 25% of

the referrals coming from tertiary specialists and other health professionals.

The service is fully commissioned by Swindon CCG. The 2016/17 team is made up of 4.9 whole time equivalent registered nurses and carers with a team of staff who are available to work additional hours to meet changes in children and young peoples' needs.

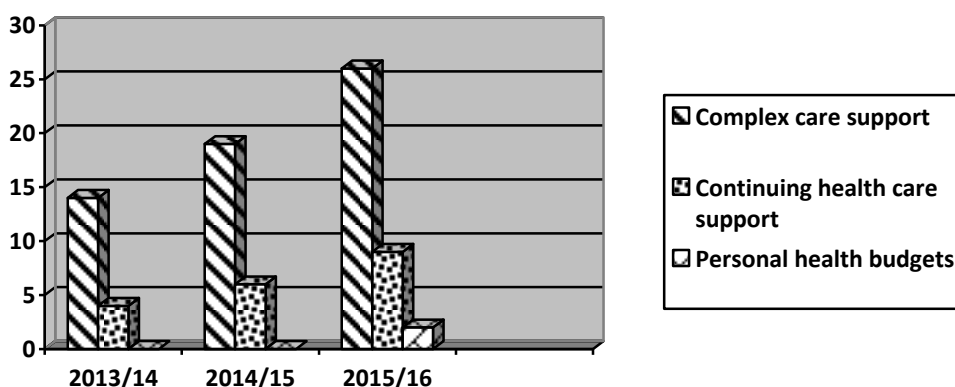
The team of staff has specialised skills in the care of tracheostomies, gastrostomy feeding and NG feeding, use of specialist equipment including ventilators and cough assist machines to allow children to remain at home and to participate as fully as possible in family, school and social activities.

Each child or young person on the caseload receives personalised specialised care that may support their attendance at school or college and on transport each day; it may support their parents or carers to have a break sometimes to allow them to sleep with night respite support. Other services the team provides include training for parents and carers and for schools to allow them to meet children and young people's health needs in school minimising disruption to their learning.

The demand and need for the service has steadily increased over the last three years with a national move to encourage the use of personal health budgets and with the introduction of the new framework for continuing healthcare for children and young people in 2015.

The service has moved from an overall caseload of 20 children and young people in 2013/14 to 37 children and young people in 2015/16 ( 2 of whom access personal health budgets for their care in 2015/16). This is an overall increase of 85% since 2013/14.

**The table outlines the trend in children and young people requiring complex and/or continuing health care year on year.**



The service is funded on the basis of need and so we have been able to access funding to allow us to increase staffing and to further develop specialist support skills to allow us to meet more children and young peoples' complex needs at home and in school.

Moving forward as more children live for longer and need more complex support at home and in order to be able to attend school there is likely to be a growing need for full time support in school. As part of the service's response to this a joint teaching assistant and health care support worker posts have been developed that can be jointly funded by health and education to better support

children and young people with complex and health and SEN needs in school.

We currently have one post that is a joint appointment between the service and a Swindon school to meet specific child's needs.

### **Challenges ahead for all three services**

Moving forward we will be participating in the forthcoming joint Swindon CCG and SBC Children's Community Health Services review. This review will be looking at all children's health services in the community and is prioritising a review of services to children and young people with ASD.

We will also be working with our commissioners to agree how we will redesign our services to meet the requirements of the special educational needs and disability code of practice: 0-25 years (DFE, DH 2014).

We will be working to maintain successful levels of traded service contracting work with the special schools, SRP's and schools in Swindon.

## **Disabled Childrens Team (DCT)**

The Disabled Children's Team [DCT] is a specialist Social Care Team providing Social Work support and intervention to disabled children and young people and their families.

The team is staffed by 5 whole time equivalent qualified Social Workers and 3 whole time equivalent Social Care Workers. All the workers have a professional interest in working with disabled children.

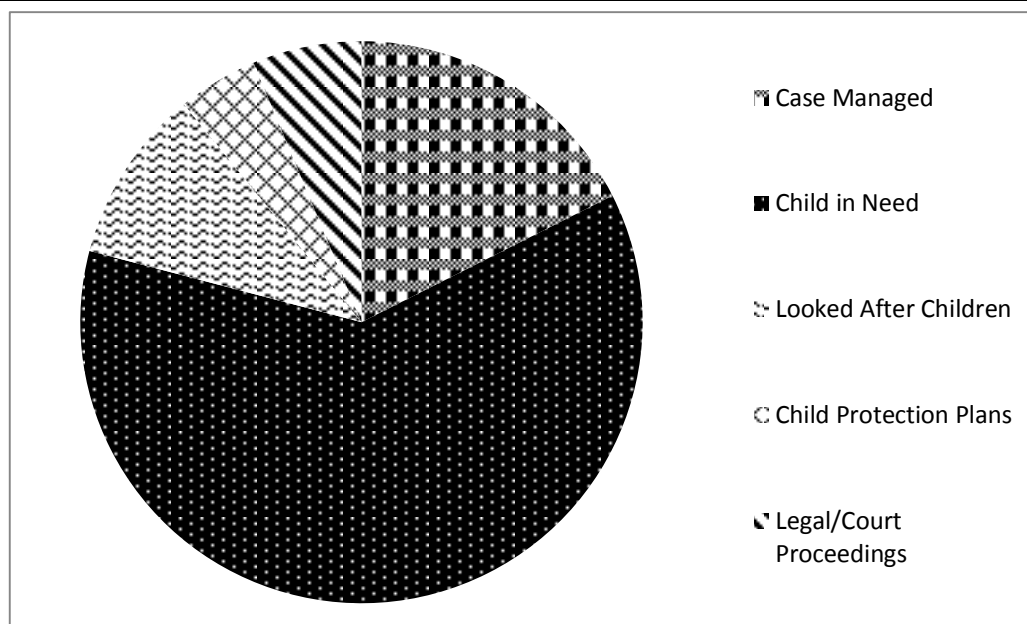
Historically, a high proportion of the teams work was assessing need in relation to the provision of short breaks. This is still undertaken but there is a greater emphasis on assessment and intervention in relation to child protection and safeguarding. The Aiming High Short Break Service now commission and deliver a higher proportion of short break services.

A referral is required to receive a service from the DCT. This can be received from a parent, carer, professional or member of the public. This is triaged by the Family Contact Point to ensure it meets social care criteria for an assessment before being referred to the DCT.

A new criteria for accessing a service from either the DCT or Aiming High was approved by Cabinet as part of the Aiming High Short Break consultation process in December 2015. The purpose of the criteria is to ensure that services are being provided at the right level in response to the presenting need.

The criteria can be read in the Short Break Statement in Appendix 2

Currently, there are 224 children open to the DCT.



Of these, 42 fall into a case managed system (explained later), 147 are Children in Need (Section 17 of the Children Act 1989 defines a child as being in need if:

- He or she is unlikely to achieve or maintain or to have the opportunity to achieve or maintain a reasonable standard of health or development without provision of services from the LA;
- His or her health or development is likely to be significantly impaired, or further impaired, without the provision of services from the LA;
- He or she has a disability.)

24 are Children Looked After, 11 are the subject of Child Protection Plans and 15 are the subject of legal or Court Proceedings.

Cases open to DCT have remained fairly constant over the period July 2013 [188] to July 2016 [225]. The average caseload per worker has fluctuated over this period but is now within agreed parameters. Due to management diligence and oversight a high percentage of statutory assessments, statutory reviews and visits to children on child protection plans have been completed within the statutory timeframe and is closely monitored to maintain and improve performance.

The breakdown of the cases in the DCT has changed in the past two years with the number of safeguarding cases having increased. A higher proportion of all referrals have a child protection or safeguarding concern (concerns fit fairly evenly into the four categories of abuse (neglect, emotional abuse, sexual abuse and physical abuse)] with neglect having a slightly more elevated figure. Referrals predominantly come from parents/carers and education. Also, a small percentage are received from the police and health professionals and a very small number are either anonymous or from the NSPCC.

### **Changes in service provision, and future challenges for the Disabled Childrens Team**

As stated above the majority of the work undertaken by the DCT is increasingly related to child protection and safeguarding or where the family require ongoing Social Work intervention to avoid a family breakdown and where a child is at risk of having to be looked after by the Local Authority. This focus is reflected in the service criteria. However, we still do provide short breaks

in response to an assessed need. These are provided in a variety of forms:

Residential Short Breaks

Enhanced Foster Care scheme

Home and Away Short Break Foster Care scheme

Direct Payments

Domiciliary Care/Agency support/Play schemes/ Hop, Skip, Jump, After School and Saturday group.

There is a challenge is to remain within budget in these areas.

Historically, some families have relied on large short break packages. In reshaping the service, we have tried to assist families in other ways, rather than always defaulting to a short break option. Short breaks do not always resolve the difficulties in the family so we are looking to provide other forms of direct intervention and support. This is through the use of our own Social Care Workers and in partnership with other services and providers. When completing statutory assessments, Social Workers are expected to create SMART outcome focused plans that include “future proofing” to ensure packages of care will not need to be increased as children get older. All requests for short break services that have been subject to a statutory assessment are now considered by a Multi-Agency Resource Panel for a decision. This is to ensure parity and to make sure all agencies are working together to support the children and their families.

The role of the Social Care Workers has been changed and their caseloads reduced. This has been achieved by creating a new case managed system (children who receive a very small package of care who do not require a named worker but the services they are receiving require a review every six months]. Social Care Workers now have the time to undertake more direct work and intervention with families to help them to develop effective and long lasting change.

The DCT tries to avoid the use of expensive residential short break provision. A new Enhanced Foster Carer Scheme has been created to meet the needs of children with high care needs.

The DCT management team is working with the Fostering and Adoption Service to try and increase capacity in the Home and Away Short Break Scheme by starting a recruitment campaign to make sure we have more carers. This is a cost effective service where children and young people spend time in a foster carer’s home. These carers are trained and supported to meet the needs of children with disabilities and additional needs. At the moment demand for placements far outstrips supply, which means we have to rely on more expensive alternatives until a carer can be found.

## **Aiming High Short Break Service**

The purpose of the Aiming High Short Breaks Service is to enable children and young people with a disability to access social and leisure activities and to enable their parents and carers to have a break from their caring responsibilities.

Short breaks can include day, evening, weekend or holiday activities. We work with families to identify and agree the activities that would be most suitable for them, and provide:

- General information and advice about the range of activities available
- Advice and guidance about specific activities for disabled children, helping to match them to



the needs of the individual child or young person

- Information about specialist support services that facilitate access to a wider range of activities.
- We provide up to 80 hours of short break activity per year for children who meet the Aiming High criteria (the 80hrs can be made up of either a: direct payment, group, inclusion funding or 1:1 activities in the community).

The Aiming High Short Break Service was reviewed in 2015. Changes were necessary to make the service financially sustainable. Following an extensive consultation with the users of the service the proposed changes to the service were agreed by the Swindon Borough Council Cabinet in December 2015.

The changes included introducing a charge for services, reducing the number of hours of service offered from 104 to 80 hours per year, introducing a new criteria for accessing services and slightly reducing the number and length of the activity schemes we provide. The services we provide and the criteria for accessing them are contained within the Short Break Statement in Appendix 2.

## Referral data

The Aiming High team keeps accurate referral and information records. This enables them to predict future need and plan ahead to ensure services will be available if demand increases.

Source of Referral	2015/16	2014/15	2013/14	Total	%
Parent / Carer	228	249	180	657	45.5%
Cons Paediatrician	20	71	73	164	11.4%
LDS	16	25	20	61	4.2%
PSA	20	28	18	66	4.6%
Soc Care - DCT	24	30	18	72	5.0%
Soc Care - Other	23	18	14	55	3.8%
School	25	19	10	54	3.7%
Review	38	2	1	41	2.8%
Other	27	12	3	42	2.9%
Paed Therapy	4	13	9	26	1.8%
Koalas / Portage / ST	15	10	4	29	2.0%
IF Venue / Worker	26	8	4	38	2.6%
CAMHS / TAMHS / PMH	19	10	5	34	2.4%
Parent Partnership	11	12	7	30	2.1%
Children's Centre	2	12	7	21	1.5%
Swindon Carers Centre	0	8	1	9	0.6%
S & L	6	3	3	12	0.8%
YEW	0	1	9	10	0.7%
Pre-school	2	3	2	7	0.5%
Family Friend	2	6	1	9	0.6%
ESS	1	0	0	1	0.1%
YOT	0	0	5	5	0.3%
Not recorded	0	0	0	0	0.0%
<b>Total</b>	<b>509</b>	<b>540</b>	<b>394</b>	<b>1443</b>	

As illustrated above over half the referrals to the team come from parents and carers requesting a service. Other referral sources are spread evenly amongst a number of professional groups. The service is well known amongst professionals in Swindon and is well utilised by them to provide support for children with whom they are working.

The following data illustrates that not all referrals or contacts result in the provision of a service. The majority result in the provision of advice and information.

<b>Service Identified</b>	<b>2015/16</b>	<b>%</b>
ASC Groups	50	<b>9.0%</b>
Carers Project Groups	12	<b>2.2%</b>
Positive Activities Groups	9	<b>1.6%</b>
1:1 Support	3	<b>0.5%</b>
Inclusion Funding	78	<b>14.1%</b>
Direct Payments	81	<b>14.6%</b>
Transport	6	<b>1.1%</b>
Advice & Information	297	<b>53.7%</b>
STEP	3	<b>0.5%</b>
Community Resource	6	<b>1.1%</b>
Awaiting SBQ/Decision	8	<b>1.4%</b>

### **Changes in service provision and future challenges for the Aiming High team**

As stated above the most recent changes to service have been made as a result of a consultation and report to Cabinet.

The users of the service have been broadly supportive of the changes.

The following table shows the number of children and young people receiving services for the period 2013/14 to 2015/16.

<b>No. of Ref.</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Total</b>
<b>2015/16</b>	<b>56</b>	<b>36</b>	<b>38</b>	<b>47</b>	<b>31</b>	<b>42</b>	<b>43</b>	<b>45</b>	<b>29</b>	<b>34</b>	<b>55</b>	<b>53</b>	<b>509</b>
<b>New</b>	11	12	25	16	16	15	15	18	6	10	23	24	<b>191</b>
<b>Repeat</b>	45	24	13	31	15	27	28	27	23	24	32	29	<b>318</b>
<b>2014/15</b>	<b>43</b>	<b>50</b>	<b>51</b>	<b>50</b>	<b>37</b>	<b>34</b>	<b>71</b>	<b>46</b>	<b>17</b>	<b>44</b>	<b>30</b>	<b>67</b>	<b>540</b>
<b>New</b>	27	30	26	29	20	14	41	29	13	24	11	25	<b>289</b>
<b>Repeat</b>	16	20	25	21	17	20	30	17	4	20	19	42	<b>251</b>
<b>2013/14</b>	<b>37</b>	<b>35</b>	<b>31</b>	<b>46</b>	<b>28</b>	<b>34</b>	<b>30</b>	<b>20</b>	<b>18</b>	<b>37</b>	<b>36</b>	<b>42</b>	<b>394</b>
<b>New</b>	24	22	20	24	11	19	19	12	14	26	18	29	<b>238</b>
<b>Repeat</b>	13	13	11	22	17	15	11	8	4	11	18	13	<b>156</b>

The challenge is for the Aiming High Service to remain within its agreed fixed budget until March 2020.

## Swindon Learning Disability CAMHS

Swindon Learning Disability Child & Adolescent Mental Health Service (LD CAMHS) is part of Oxford Health NHS Foundation Trust. They provide a specialist mental health service to children and young people up to the age of 18 years who have a learning disability. Children with an LD often present with mental health difficulties differently from other children. Their needs may be complex and enduring and mainstream services may struggle to effect meaningful change to improve outcomes for this group. They also have a Clinical Nurse Specialist who provides a nursing service to two local special needs schools.

They offer specialist assessment and interventions around a range of difficulties that may be experienced by the child or young person with learning disability, for example Behaviour difficulties, Anxiety, Anger difficulties, Sleep management. They may work with parents, or directly with the young person. They work within the principles of Positive Behaviour Support adopting interventions that are the least intrusive and least restrictive.

Referrals can be made by any professional who supports the child. They will need to complete a Comprehensive CAMHS referral form which should then be sent via the Targeted Mental Health Service or directly to the Clinical Team Manager in the LD team. If the child has received a service from LD CAMHS before and the episode of care was closed less than 12 months ago, the family can contact the team directly to discuss any further support required. They aim to respond to emergency referrals within 24 hours, urgent referrals within 7 days and routine referrals within 4 weeks.

LD CAMHS will work with young people up until their 18th birthday, who have a learning disability and

- A mental health or emotional difficulties
- Complex behavioural difficulties that are disrupting everyday life
- Longstanding difficulties that are not getting any better despite mainstream services having offered the appropriate advice and support

### **What is the main source of referrals by percentage?**

The majority of referrals received into the team come in equal proportion from social care (the DCT) education (mainly the special need schools) and Health (Paediatricians and GP's). We have a few referrals directly from mainstream schools, Special Tots, OT or Speech and Language Therapy.

### **The number and types of roles within the staff group with particular reference to the specialisms or skills within these roles.**

They are a small specialist learning disability mental health service. They have a Consultant Psychiatrist (0.5), Clinical Psychologists ((0.8), Learning Disability Nurses (3.66 including Clinical Team Manager) and Clinical Nurse Specialist (0.86). A young person may be seen by a single member of the team, however should their needs present as more complex, then they may need to be seen by more than one professional. The team is based within the Salt Way Centre multi-agency team and they work closely with the other professionals to fully understand and support the child or young person.

**A comparison of performance and management information for the three years leading up to April 2016. The changes and demands that have occurred over this period and what they have done or are doing to mitigate them.**

The past three years has seen no significant changes in contracting requirements. The main challenge continues to be around meeting capacity, increasing complexity of need and increasing expectations and governance requirements. The team performance is closely monitored by the Oxford Health Performance Team and reviewed with the senior management team bi-monthly. Performance data is fed back directly to the commissioners and action plans put in place and reviewed regularly to ensure targets are met in a timely manner.

**The impact or influence of any internal or external policy changes on the service**

The LD CAMHS contract is currently being reviewed. As they work very closely with services at the Salt Way Centre they are affected by changes that generally apply to working with children with a disability.

The whole team have recently undergone advanced Positive Behaviour Support Training which has enabled us to develop a framework for our work as outlined in the NICE Guidance 'Challenging behaviour and learning disabilities: prevention and interventions for people with learning disabilities whose behaviour challenges' 2015

**An outline of the broader challenges the service is experiencing and the plans to meet them.**

As with all services they are very aware of the need to work within shrinking budgets with ever increasing demand for a service alongside rising expectations. Although referral rates have remained fairly constant the level of complexity of the work has increased. The team need to keep very focused on setting goals and outcomes to allow for timely discharge from the service to ensure capacity to pick up new work can be maintained within required waiting times.

## Swindon Portage

The Portage services based within the Salt Way Centre include

- Swindon Portage Home Teaching
- Special Tots Pre-School Group for children with identified needs
- Early Bird and Early Bird Plus programmes

These services provide support to children and young people who have specific additional needs and or disabilities which range from moderate to profound. The services work closely with a wide range of services and agencies to deliver an integrated service focused on maximising each child's independence, educational attainment and engagement with their families and communities.

**Swindon Portage Home teaching**

A child may be referred to Swindon Portage for the home visiting programme if; the child has identified complex needs and is either receiving multi professional input or is likely to require it

before they start school. This may also include children who have significant medical conditions.

A child is defined as having complex needs if he or she has been identified as needing intervention from universal services [services available to all children] and at least 2 specialist services.

Children can be visited weekly or fortnightly depending on their circumstances. The child must be living in the Swindon Borough Council area.

When a child is in receipt of Nursery Education Grant they will be required to use 2.5 hrs of their 15 hour allocation for Portage home visits.

The service is currently funded through

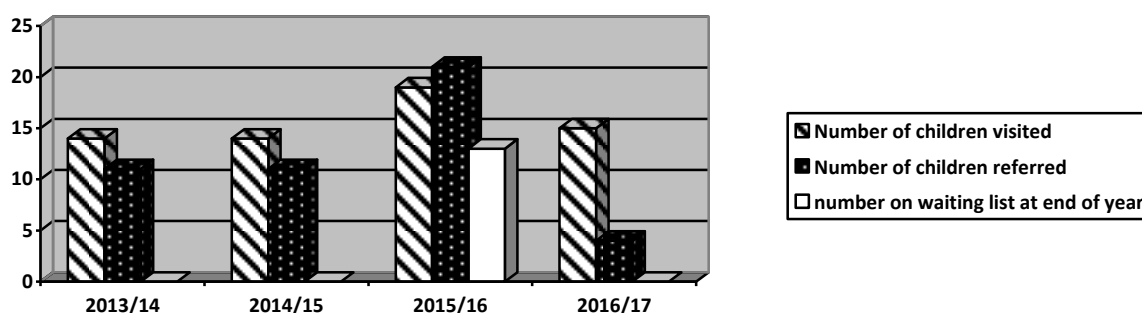
- Swindon Designated Schools Grant
- 3 and 4 year old Nursery Education Grant
- Schools traded service for Inclusion/transition into school

In the team for 2015/16 and 2016/17 there is a Manager [16 hours], Administrator [24 hours] 3 staff [1.75 whole time equivalent ]– the staffing group includes:-

- Qualified Teacher (15hrs) with 30+ years of teaching experience in schools and early years.
- Early Years Professional Status (18hrs) with a degree in Social work, experience working with disabled children in a range of settings and Specialist knowledge of ASD.
- Early Years Professional Status,(24hrs) degree in Early Years and Childcare with many years' experience working in early years settings .

All Portage staff possess a Portage Basic Workshop qualification.

Between April 2015 and March 2016 the service was providing home teaching for an hour a week to 19 different children. In the previous 2 years 14 children received a service. Until a reduction in funding in 2011/12 the service used to home teach 29 children. This is an average reduction of 21%. Those who remain on the waiting list receive advice and some home working activity programmes.



In 2015/16 referrals mainly came from the Swindon Early Support Pathway with a few coming directly from the Health Visitors or Paediatricians. On average 23% of the children have global developmental delay, 41.17% downs syndrome, 17.6% a complex medical condition, 5.8% ASD, 5.8% physical impairment and 5.8% with visual impairment.

## Outputs

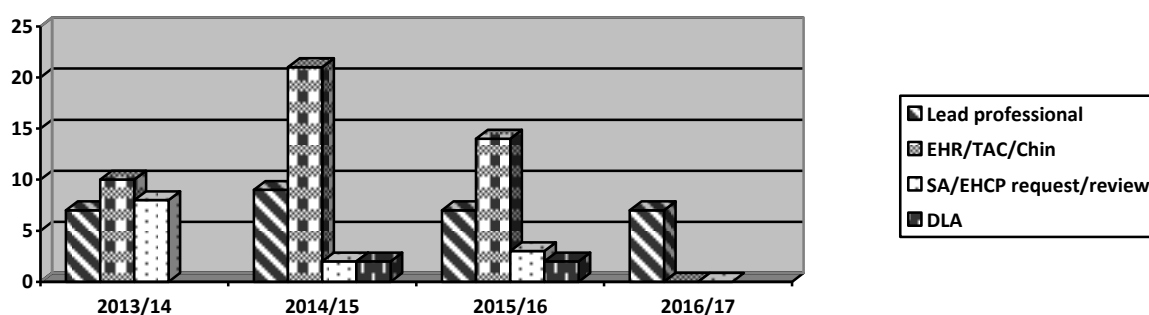
As part of the service we deliver we act as Lead Professional for the children open to us.

We will complete Early Help Records and arrange Team Around the Child Meetings to support the family to support their child.

Parents will be supported to access benefits when appropriate e.g. Disability Living Allowance and Carers Allowance.

As an educational service we have always assessed children's needs and requested, where appropriate, for consideration to be given to the completion of a statutory assessment of their educational needs. The introduction of the new SEND Code of Practice has increased the work load as not only do we have to apply for the assessment and write a report within a 6 week timescale we are also required to attend what is called a co-production meeting. This is where we discuss the content of the Education and Health Care Plan and in particular the outcomes we are trying to achieve for the child. In all this can take a full day to complete.

The graph below shows the approximate time spent working in the various areas of responsibility excluding direct work with the child.



## Evaluations

Each year the parents are asked to comment on the service they have received. Feedback is always good or very good.

## Special Tots

Children with specific identified needs can be referred to Special Tots without meeting the Portage criteria. This includes children with social interaction and communication difficulties and those who have a diagnosis of Autistic Spectrum Disorder.

Special Tots is for any child with an identified special need to support their successful inclusion into a mainstream early years or school setting.

When a child is in receipt of Nursery Education Grant they will be required to use 2.5 hrs of their 15 hour allocation at Special Tots.

Children can be referred by any professional and must be living in the Swindon Borough Council area.

The service is currently commissioned from three main sources

- Swindon Designated Schools Grant

- 2 and 3/ 4 year old Nursery Education Grant
- Fees from parents

### The Team

There are 1.25 whole time equivalents in the staffing group.

- Qualified Teacher (22.75hrs) with many years' experience of work in early years in primary schools. She possesses a specific knowledge of autism and is an Early Bird trainer.
- Play leader (17hrs), Early Years foundation degree, with many years' experience working in CAMHS, Special Schools and Koalas.
- The service is supported by volunteers who are present at half of the sessions provided.

### Referrals

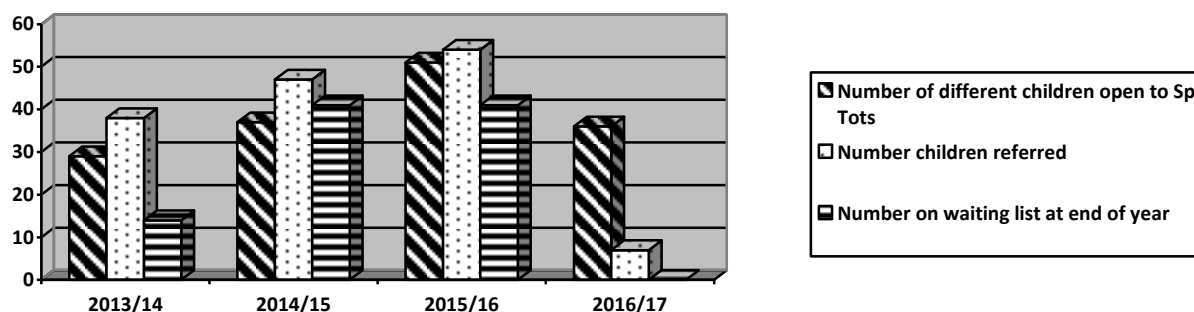
In the past 2-3 years referrals have mainly come from the Swindon Early Support Pathway with some direct referrals from Health Visitors or Paediatricians.

There has been an overall increase in referrals to Special Tots since April 2013. In 2013/14 the service had 38 children referred to the service; compared with 54 in 2015/16. This has is an overall increase of 42% in the last three years.

In 2011/12 the service was required to make a reduction in funding and to address this we increased the maximum number of children we could have in any one session from 8-10 including siblings. However, this is dependent on the individual needs of the children.

We work closely with Koalas Opportunity Group [managed by the same manager) to address the waiting lists for both groups. Often, children will be added to both waiting lists and children will be offered the first space that becomes available. This is working well and we will be able to provide places for all the children on the waiting list for September 2016. There are currently 53 children on the waiting list. However, this does mean that if a child is referred and offered a place in September 2016 they could wait until September 2017 until a place becomes available unless a vacancy becomes available in year.

### The table outlines the trend in referrals



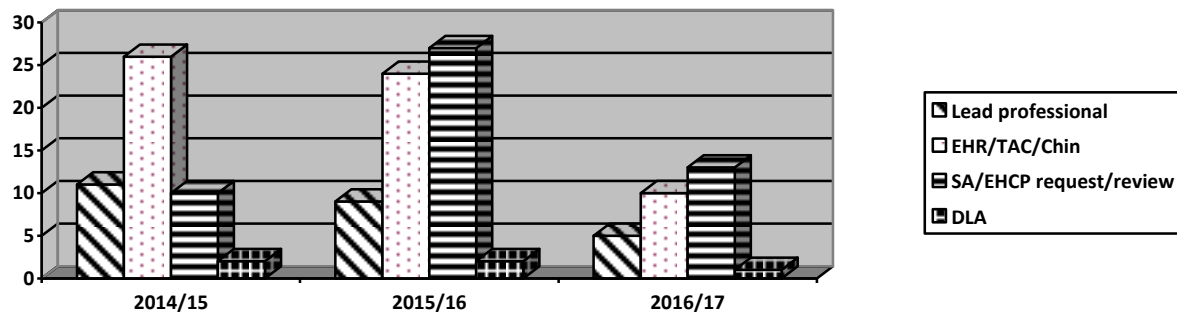
In 15/16 33% of the referrals were for children with global developmental delay, 18.5% for children with downs syndrome, 7.4% for those with complex medical needs and 4% autism.

### Outputs

The outputs for Special Tots are the same as for Portage in page 13 above.

The graph below shows the approximate time spent working in the various areas of responsibility but

not including their direct work with children.



## Challenges for Portage and Special Tots

### Waiting lists

The biggest challenge is the increased demand for places and a 12 month waiting time for some children referred to the service. In order to free up places we do make sure that those children who no longer require a specialist service are supported to access a mainstream setting.

### SEND Reforms

The changes to the statutory requirements for support for children and young people laid out in the Special Educational Needs and Disability Code of Practice: 0-25 years (DfE, DH 2014) also present a number of challenges.

- Completing requests for assessment and meeting the requirements to provide an assessment report within six weeks and attendance at co production meetings.

### Special Tots staffing

The importance of attending co-production meetings as part of the SEND/EHCP process and of acting as lead professional for children and/or attending /arranging TAC meetings has resulted in one of the two Special tots staff regularly being absent from the playroom. The manager has to cover to ensure a continuity of service.

As a service we are continuing to maximise use of teaching resources whilst remaining in financial balance.

## Early Bird Programme

The Early Bird programme is for parents of pre-school children with a diagnosis of autism spectrum disorder. It is a three month programme involving group sessions, home visits and the use of video. Two places are allocated to each family.

The eight group sessions are held currently at the Salt Way Centre. Each session lasts 2.5 hours.

### Aims:-

- to empower parents /carers
- to support families in the period between diagnosis and school placement



Parents will learn to :-

- understand their child's autism.
- structure interactions to develop better communication
- develop strategies to pre-empt problem behaviours and or manage those that do occur

**The Early Bird plus** is a three month training programme involving eight group sessions and 2 home visits. This programme provides support to families who have had a later diagnosis.

Families of children between ages of 4 and 8 years with a diagnosis of ASD can attend the programme. Three places are allocated to each family 2 for parent/carers and one for a professional who is currently working with their child e.g. school teacher or teaching assistant.

The eight group sessions are held either at the Salt Way Centre or at Butterflies Family Centre.  
Aims

- to empower parents/carers
- to encourage a consistent approach between home and school by training parents and professionals together.

Parents and staff learn

- to understand the child's autism
- improve communication with the child
- develop strategies to pre-empt problem behaviours and or manage those which do occur.

Referrals are accepted from parents following a diagnosis of autism. They are informed about the program by the diagnosing Paediatrician. It is important that a self-referral is made as the course is 3 months long and requires considerable commitment.

Staff

The programme is run by local professionals who have all been trained at the National Autistic Centre in South Yorkshire and are licenced to deliver the course.

The Early Bird programme is staffed by

Portage staff:	1 EB and BE+ licenced trainer(7hrs) 1EB+ licenced trainer (7hrs)	(Portage teacher) (Special Tots teacher)
West Swindon Family Centre:	2 EB licenced trainers	( family support workers)
Butterflies family Centre:	3 EB licenced trainers	( family support worker)

The service is managed by the Portage Manager within her existing hours and by the Portage Administrator who is funded an additional 10 hours per month.

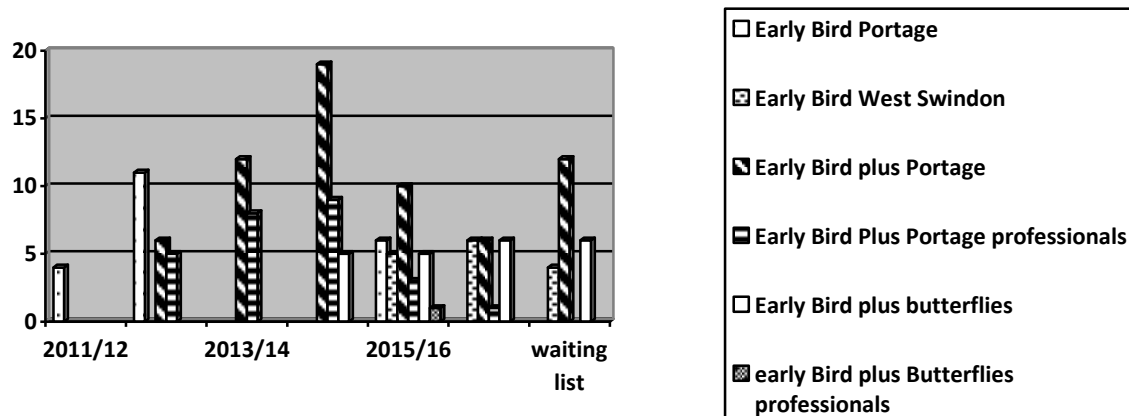
Current provision.

The Portage Service is commissioned by Swindon CCG to deliver 3 Early Bird programmes a year. West Swindon Family Centre are commissioned by SBC to deliver 2 Early Bird courses per year until March 2017.

Butterflies Family Centre are commissioned by SBC to deliver 2/3 Early Bird plus courses per year until March 2017.

#### Delivery

The graph below shows the number of families and professionals who have attended Early Bird programmes.



To date we have provided the following courses

Early Bird :- 6 programmes, 32 families with 4 on the waiting list for a course in autumn 2016.

Early Bird plus:- 11 programmes, 64 families and 27 professionals with 18 families on waiting list for planned courses in Sept 2016 and 2 courses in January 2017.

It is well received by all families and professionals who attend the programme. From a parent perspective it helps them understand the individual nature of their child's condition and for school staff it increases their skills in working with children with ASD that they are they able to share their knowledge with their colleagues in school.

#### Challenges

Butterflies and West Swindon Family Centre's were commissioned to deliver EB and EB+ as part of their current 2 year contract. The contract finishes in March 2017 when they will be required to be self- funding. If this is not successful there is the potential to lose 5 qualified licenced trainers who still have 2 years remaining on their licences. This will have an impact on waiting times. We are currently actively seeking solutions to this potential scenario.

## Koalas Swindon Opportunity Group

Koalas Swindon Opportunity Group is a charity based within the Salt Way Centre providing an early years school group for children under 5 with special educational needs or disabilities.

The service provides support to children who have specific additional needs and or disabilities which range from moderate to profound and have differing impacts on them and their lives. The service works closely with a wide range of services and agencies to deliver an integrated service focused on maximising each child independence, educational attainment and engagement in their families and communities.

The service is currently commissioned through a service level agreement with

- Swindon Borough Council

- Swindon CCG

Additional funding is received through

- Early Years nursery Education Grant for 2, 3 and 4 year olds.
- Fees from parents when not in receipt of nursery education grants
- Fundraising [amounting to approximately 40% of the cost of providing the service].

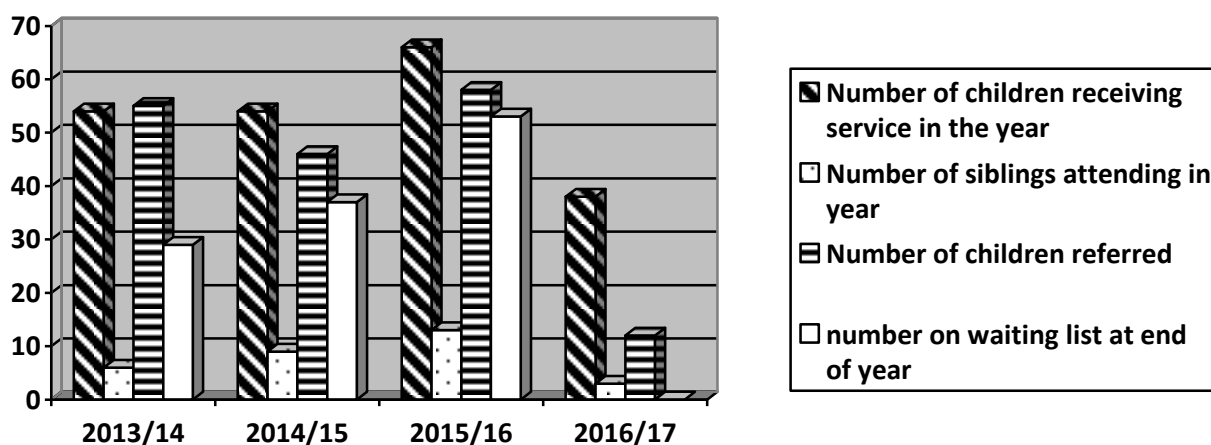
The team includes 5 members of staff [2.25 whole time equivalents]. the staffing group includes

- Senior play leader (22hrs) Early Years Foundation degree.
- Play leader (16.5hrs) BA Early Years and Education.
- Play Leader (16.5hrs) BA Psychology/Health and Social Care.
- Play Leader, (16.5hrs) Early Years foundation degree, 4 years' experience of SEND.
- Play leader (15 hrs term time) Level 3 Early Years
- Manager [20hrs] EYPS/BSc, Managing Health and Social Care.
- Administrator [8 hrs].

#### Referrals

Koalas provides a service for children with social interaction and communication difficulties and those who have a diagnosis of Autistic Spectrum Disorder as well as other recognised conditions and those with global developmental delay.

Children can be referred by any professional and children must be living in Swindon Borough Council to receive a service. Those who receive a service who live outside of the Swindon area are required to pay a fee of £50 per session.



In the past 2-3 years referrals have mainly come from Swindon Early Support pathway with some direct referrals from HV or Paediatricians.

There has been a small increase in referrals since April 2013. In 2013/14 the service had 55 children referred to the service compared with 58 in 2015/16. This is an overall increase of 5% in the last three

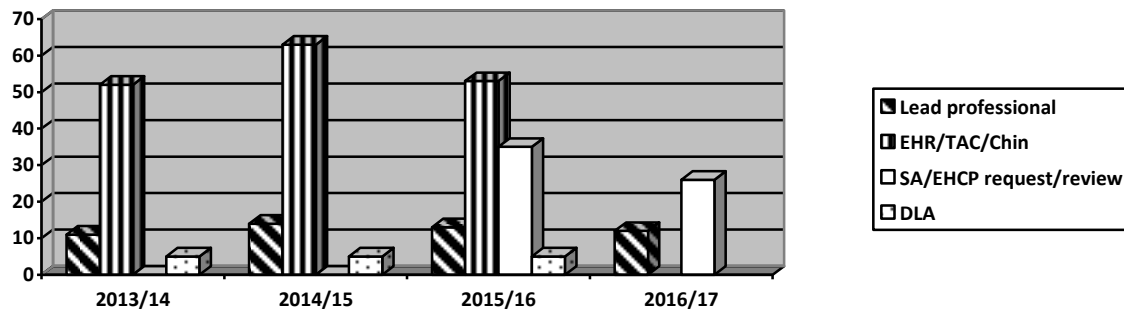
years.

As noted above Koalas work closely with Special Tots to address the waiting lists for both groups. The presenting conditions of the children referred to the service are broadly similar to those for Portage and Special Tots as stated above.

### Outputs

The outputs for Koalas are the same as stated above for Portage and Special Tots.

The graph below shows the approximate time spent working in the various areas of responsibility but not including the direct work with the children.



### Challenges for Koalas

These are the same as for Portage and Special Tots; waiting lists and the impact on work load of the introduction of the new SEND reforms.

#### Koalas staffing

The Management Committee have agreed that we will increase the staffing levels by one member of staff to free up the manager from having to be in the playroom. Unfortunately, we have not been able to recruit a suitable candidate.

As from 1<sup>st</sup> April 2016 Koalas will not provide a service in the school holidays. This is in response to the increase in the availability of activities from other providers during these time periods. However, there will not be a reduction in staff hours. They will work longer hours in term time which will go some way to compensate for the extra time spent completing documentation associated with the SEND reforms.

# Swindon Borough Council

## Short Breaks Statement 2016/17

### Information about short breaks for children and young people with disabilities in Swindon



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# Introduction

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This document is about short breaks and positive activities for families of children and young people with disabilities aged from 0 to 18th birthday, who are residents of the Borough of Swindon. This document also provides useful information for services and professionals who work with families of disabled children and young people in Swindon.

## What are short breaks?

Short breaks provide opportunities for parents and carers of children and young people with disabilities to have a break from their caring responsibilities. Short breaks also enable children and young people with disabilities to enjoy social and leisure activities. Short breaks can include day, evening, overnight\*, weekend or holiday activities. This could range from a mainstream activity for all children to a specialist service for those with more complex needs. For example, an evening group, a holiday play scheme, a sports activity or an overnight\* break in a carer's home.

*\* Overnight short breaks are **only** available if assessed as a need via a Social Care Assessment*

## Background

Under the **Breaks for Carers of Disabled Children Regulations 2011**, Local Authorities must provide a range of short breaks for children with disabilities. The regulations say that Local Authorities must provide, as part of the range of services they provide for families, breaks from caring for carers of disabled children to support them to continue to care for their children and to allow them to do so more effectively. (*Ref: paragraph 6(1)(c) of Schedule 2 to the 1989 Children Act*)

Each local authority must publish a Short Breaks Statement so that families know what short break services are available, any eligibility criteria, and how the range of services is designed to meet the needs of local families with disabled children. You can see the Regulations at: [www.legislation.gov.uk/ukxi/2011/707/contents/made](http://www.legislation.gov.uk/ukxi/2011/707/contents/made) or you can contact the Aiming High Short Breaks Team.

## Definitions of disability

There are different definitions of disability. The Breaks for Carers of Disabled Children Regulations 2011 refer to the definition in the 1989 Children's Act: that a child is disabled "if he is blind, deaf or dumb or suffers from mental disorder of any kind or is substantially and permanently handicapped by illness, injury or congenital deformity or such other disability as may be prescribed".

The more widely accepted definition of disability is in the Equality Act 2010: "a person has a disability if he/she has a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities".

We accept that it can be difficult to interpret a definition and relate it to your own child or young person. If you are unsure please contact the Aiming High Short Breaks Team.

## Local needs assessment

During 2014/15 approximately 520 children and young people with disabilities received a short break service in Swindon through Aiming High or the Disabled Children Social Care Team. Demand for short breaks services continues to grow. The Aiming High Team received 535 referrals in 2014/15, an average of 45 per month. This was a significant increase on previous years (422 referrals in 2012/13, 393 in 2013/14) and demand is not expected to reduce.

During 2014/15, about 54% of referrals were 'new' children who had no previous involvement or service from Aiming High. About 46% were children who had previous involvement from Aiming High, where there had been a change in need or circumstance. Many families just required information, advice and signposting (40%).

There is a particular pressure on the service in relation to children who have autistic spectrum condition / social communication and interaction difficulties (ASC / SCID). ASC / SCID is an area of significant and growing need in Swindon and approximately 60% of referrals to the Aiming High service identify ASC / SCID as the primary need.

## Changes to short break services for 2016/17: How this Statement has been prepared

This Short Breaks Statement 2016/17 has been prepared by the Integrated Service for Disabled Children and includes a number of changes to short breaks support in Swindon from April 2016. The changes follow a public consultation, undertaken during August to October 2015. There is more information about the consultation on page 8.

This Short Breaks Statement and more information about short break services in Swindon will be available online: [www.swindon.gov.uk/aiminghighshortbreaks](http://www.swindon.gov.uk/aiminghighshortbreaks) and via the Aiming High Short Breaks Team.

### Contact the Aiming High Short Breaks Team:

The Aiming High Short Breaks Team is part of the Integrated Service for Disabled Children, within Swindon Borough Council Children Services.

Telephone: 01793 464080

Email: [aiminghigh@swindon.gov.uk](mailto:aiminghigh@swindon.gov.uk)

Web: [www.swindon.gov.uk/aiminghighshortbreaks](http://www.swindon.gov.uk/aiminghighshortbreaks)

Address: Salt Way Centre, Pearl Road, Swindon, SN5 5TD



# How do short break services work and what support is available?

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## Information, advice and guidance

- One central point of contact for anyone looking for information about short breaks, the Aiming High Short Breaks Team.
- We will continue to produce the regular Aiming High Newsletter.
- We will continue to raise awareness to ensure that families know about the short breaks services and support available and to ensure that local services, professionals and schools know how short break services work and give families the right information.

## A range of short break services; enabling inclusion and choice, with a focus on individual needs

- Swindon will continue to provide a range of short break services, to ensure that families have choice. The Aiming High Team will work with families to identify the short breaks support that would be most suitable to meet their needs.
- Families will be supported to complete a 'Short Breaks Questionnaire' to look at the child and family's needs. This is not an assessment. The Short Breaks Questionnaire is a tool that will be used in partnership with you, to discuss your individual needs and look at the type of short breaks that would be most suitable. As part of this process we will discuss with you what level of need your child / young person has using the Short Breaks Criteria on page 4. This will determine the level of services / support / information and guidance that you and your child will receive.
- We will continue to gather feedback from families and services, and work with Swindon Parents and Carers Group\* in order to monitor short breaks services in Swindon (\*Swindon Parents and Carers Group is the recognised forum for the active involvement of parents and carers of children and young people with disabilities in Swindon).



## Short Breaks Criteria and Offer

**All children / young people who are eligible for support will meet the following criteria:**

- Swindon resident aged from 0 to 18th birthday
- Have a disability as defined by the Equality Act 2010: You are disabled under the Equality Act 2010 if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.

*(‘Substantial’ is more than minor or trivial. ‘Long-term’ means 12 months or more.)*

**The level of support offered will be determined using the following matrix:**

We aim to ensure a fair, transparent and proportionate response. It is recognised that children / families can and will move between these levels according to their particular circumstances.

Level 1 – LOW	Level 2 – MEDIUM	Level 3 - HIGH
<b>Child / family meet the following criteria:</b>	<b>Child / family meet <u>all</u> of the following criteria:</b>	<b>Child / family meet <u>any</u> of the following criteria:</b>
<input type="checkbox"/> The child has a disability, but this doesn't prevent them from accessing social / leisure activities.  <input type="checkbox"/> The child does, or could, access at least one social or leisure activity where a parent / carer doesn't have to stay.  <input type="checkbox"/> Staff may require some advice / awareness-raising in order to support the child appropriately.  <input type="checkbox"/> The family may need information, advice and signposting about what is available.	<input type="checkbox"/> The child is unable to access any other social or leisure activity without a parent / carer staying.  <input type="checkbox"/> <u>Child falls into A or B (or both):</u>  A. Specially trained / qualified staff are required to safely meet the child's needs and we are unable to identify a setting with staff sufficiently trained / confident to meet those needs.  B. The child requires a higher staff ratio.  <input type="checkbox"/> Parent / carer requires breaks from caring in order to continue to provide care or to enable them to provide care more effectively.	<input type="checkbox"/> The child has complex needs which require 24 hour supervision and a high level of support or the use of equipment.  <input type="checkbox"/> The child/young person's health and development are likely to be significantly impaired without the provision of services.  <input type="checkbox"/> Clear evidence of the imminent risk of family breakdown.  <input type="checkbox"/> Immediate danger and vulnerability of the child/young person or sibling(s).  <input type="checkbox"/> Risk situation where the child or sibling(s) are likely to suffer significant harm.

Type of assessment required:		
<ul style="list-style-type: none"> <li>No assessment required; contact services directly.</li> </ul>	<ul style="list-style-type: none"> <li>Questionnaire by parent / carer. Aiming High Inclusion &amp; Outreach Workers will work in partnership with the family.</li> </ul>	<ul style="list-style-type: none"> <li>Statutory social care assessment</li> </ul>
Level of support offered:		
<p><b><u>Information, advice and guidance</u></b></p> <ul style="list-style-type: none"> <li>Aiming High will continue to provide information, advice and signposting to all families of disabled children and young people and work with settings to support them to be accessible.</li> <li>Social and leisure activities which are available to all children, young people and families.</li> <li>Targeted social and leisure activities for children with disabilities and their families.</li> </ul>	<p><b><u>Aiming High Team Short Breaks 'Offer'</u></b></p> <ul style="list-style-type: none"> <li>Aiming High will provide support to access a short break activity, up to a maximum of <b>80 hours</b> per year.</li> <li>Support will be delivered via one of the following options: <ul style="list-style-type: none"> <li>Inclusion Funding <b>or</b></li> <li>Specialist Groups <b>or</b></li> <li>Direct Payment</li> </ul> </li> <li>Level 2 aims to provide a low level of support without assessment. If this does not meet the needs of the family, or things change, families may require an Early Help Record/Plan or a Social Care assessment. See below for more information.</li> </ul>	<p><b><u>Social Care Team</u></b></p> <ul style="list-style-type: none"> <li>Individualised packages of specialist support are offered, depending on the outcome of the specialist assessment completed by a Social Worker.</li> </ul>

## Recognising that needs may change

We recognise that every family is different, and that needs may change over time. For example, you may no longer require a service from Aiming High, or your needs may increase and require an Early Help Record/Plan or a Social Care assessment.

An Early Help Record/Plan is the common process in Swindon for supporting children, young people and families with additional needs. This is a planned, co-ordinated response supporting early intervention. The Early Help Record is 'part one' of Swindon's assessment process, which aims to give children, young people and their families a proportionate, co-ordinated and timely service if needs escalate. Swindon supports families through early help to escalating complex and urgent needs that require a statutory assessment from children's social care.

If you think you need additional support or you require your needs to be assessed through Swindon's assessment process, please contact Family Contact Point on tel: 01793 466903 or email: [fcp@swindon.gov.uk](mailto:fcp@swindon.gov.uk)

# Range of short break services available through Aiming High

- **Targeted, open access family sessions**

Aiming High provide a number of open access family swim and trampoline sessions for disabled children, young people and their families.

- **Funded local providers**

Aiming High also commissions several local providers to deliver a range of activities for disabled children and young people, for example, sporting activities during school holidays.

- **Inclusion Funding**

Where Aiming High arrange and pay for the extra support required to enable a disabled child or young person to access an activity, for example, paying for a support worker. Inclusion funding is to cover the **additional costs** to enable the child to access the activity, it does not cover the cost of the activity itself.

- **Direct Payments**

Where money is paid to the parent / carer of a disabled child, or to a disabled young person aged 16 or 17, so that they can arrange and pay for their own short break support. Once the appropriate level of short break support has been identified, you can choose to receive a Direct Payment, instead of Swindon Borough Council arranging the service for you. Families are supported by a Direct Payments Support Advisor, who advises you on how the money can be spent and provides ongoing assistance with managing the Direct Payment, for example, supporting families with recruitment of workers, payroll and complying with employment law.

- **Specialist Groups**

Aiming High run some specialist activity groups for children and young people with disabilities throughout the year and during the main school holidays. These groups are for children who have higher levels of need and would be **unable** to access mainstream activities / open access disability groups, even with support.

## Charges

We aim to ensure that families of disabled children do not pay more than families of non-disabled children for Swindon Borough Council short break activities. From April 2016, the price for Aiming High group services will **increase to £2.50 per hour**. This will become a charge, rather than a contribution. If this is a barrier to accessing the service, please contact the Aiming High Team to discuss your circumstances. A sibling reduction will be applied (full price for the first child, half price for subsequent children). Families will be required to pay in advance.

## Transport

We know that transport to and from activities is an important issue for many families. Parents and carers are expected to transport their children to and from short breaks. Consideration will be given to providing transport in **exceptional circumstances only**.

# Outcomes and impact of short breaks

Both nationally and locally, short break services have been shown to have huge benefits for children and young people with disabilities and also for their parents / carers and siblings. Here are some of the things parents / carers and children / young people have told us about the short break services that they use:

## Children & young people with disabilities:

- ✓ Enjoy a positive activity
- ✓ Stay safe
- ✓ Spend time with peers, make friends, increase socialisation, feel accepted
- ✓ Try new things
- ✓ Increase independence & confidence
- ✓ Get out and be active

'Wish I could go more often'

'I don't have to worry about the things I would deal with in normal situations'

'It's fun and good, get to make cakes and play ball'

'They do good activities and I have made friends'

## Parents, carers and siblings:

- ✓ A break from caring responsibilities, enabling parents and carers to continue to care or to care more effectively.
- ✓ Chance to spend time together or with other children
- ✓ Siblings get a break and some 1 on 1 time with their parents

'A chance to spend quality time with our 2 other children'

'A chance to rest and recharge my batteries'

'The clubs have made me feel I can make it through the holidays'

'The change in our family is amazing... we are a much closer, loving family'

'He comes back happy'

'He is accepted as he is'

'I feel my daughter is safe, well cared for and has fun'

'My daughter is gaining independence and learning new skills'

'I can relax and do other things, which helps reduce stress'

'Teaches my son social skills'

# Consultation 2015

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This Short Breaks Statement 2016/17 has been prepared by the Integrated Service for Disabled Children and includes a number of changes to short breaks support in Swindon from April 2016.

The changes follow a public consultation, which ran from **18 August to 16 October 2015**.

Reports outlining the outcome of the consultation which were put before and approved by the Swindon Borough Council Cabinet on December 9<sup>th</sup> 2015 can be seen on [www.swindon.gov.uk/shortbreakconsultation](http://www.swindon.gov.uk/shortbreakconsultation)

Paper copies of these documents can be obtained by contacting the Aiming High Short Breaks Team on the telephone number below.

This Short Breaks Statement and more information about short break services in Swindon will be available online: [www.swindon.gov.uk/aiminghighshortbreaks](http://www.swindon.gov.uk/aiminghighshortbreaks) and via the Aiming High Short Breaks Team on: 01793 464080 or email: [aiminghigh@swindon.gov.uk](mailto:aiminghigh@swindon.gov.uk) .

The information in this Statement can be produced in a range of languages and formats (such as large print, Braille or other accessible formats) by contacting Swindon Borough Council Customer Services:

Tel: 01793 445500

Email: [customerservices@swindon.gov.uk](mailto:customerservices@swindon.gov.uk)

### **Contact the Aiming High Short Breaks Team:**

Tel: 01793 464080

Email: [aiminghigh@swindon.gov.uk](mailto:aiminghigh@swindon.gov.uk)

Webpage: [www.swindon.gov.uk/aiminghighshortbreaks](http://www.swindon.gov.uk/aiminghighshortbreaks)

Address: Salt Way Centre, Pearl Road, Swindon, SN5 5TD

## Education Transport Appeals

### Children's Health, Social Care and Education Overview and Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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Author:	Head of Education
Wards:	All
Locality Affected:	All
Parishes Affected:	All

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#### 1. Purpose and Reasons

- 1.1 This report sets out the current financial and legislative position concerning home to school transport appeals.
- 1.2 The report contains information on recent changes to Education Transport appeals
- 1.3 The Admissions and Passenger Transport Teams work contributes to the Swindon Borough Council Vision Priority to "Offer education opportunities that lead to the right skills and right jobs in the right places.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the information provided within the report

#### 3. Detail

##### Education Transport Policy

- 3.1 The Education Transport Policy is consulted and determined on an annual basis and includes the statutory and discretionary transport provision for students within Mainstream, Special Education Needs and Post-16 settings. The policy for 2016 was determined by Cabinet at its meeting in July 2016 (Cabinet minute 17 refers)
- 3.2 Under the Education and Inspections Act 2006 and Education Act 1996. The relevant sections place a duty on Local Authorities to ensure that suitable travel arrangements are made where necessary to facilitate the student's attendance at school.
- 3.3 The duty applies for home to school travel arrangements made at the start of the day and school to home travel arrangements at the end of the day for students of compulsory school age. It does not relate to travel between educational institutions during the school day

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Further information on the subject of this report can be obtained from Rebecca Mathis, Direct Dial 01793 465766, [rmathis1@swindon.gov.uk](mailto:rmathis1@swindon.gov.uk).

# Education Transport Appeals

## Children's Health, Social Care and Education Overview and Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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- 3.4 Parents are responsible for ensuring that their children attend school regularly. However section 444 of the Education Act outlines the situation where a parent may have a defence in law against prosecution by a Local Authority for their child's non-attendance at school. Section 444(3)(b) provides a defence if he or she provides that:
- a. The qualifying school at which the student is a registered student is not within the statutory walking distance.
  - b. No suitable arrangements have been made by the Local Authority for boarding accommodation at or near to the school
  - c. No suitable arrangements have been made by the Local Authority for enabling the student to become a registered student at a qualifying school near to his/her home
- 3.5 The legal basis for the provision of home to school transport is set out in sections 508A, 508B, 508C, 508D and 509AD and Schedule 35B of the Education Act 1996 (as amended by Part 6 of the Education and Inspections Act 2006) and where appropriate the Equality Act and English and European case law. In addition local authorities are under a statutory duty to have regard to the Home to School Travel and Transport Guidance issued by the DfE in July 2014 and the Post16 Transport to Education and Training Guidance issued in February 2014
- 3.6 The statutory walking distance was originally set in 1944 for a child of statutory school age and is 2 miles for a child under 8 and for a child over 8 is 3 miles.
- 3.7 In addition, in 2006 the Education and Inspections Act extended the statutory provision for families on low income (described as being eligible for free school meals or receiving the maximum amount of working tax credit).
- 3.7.1 For primary children aged 8 – 11, where the nearest suitable school is beyond two miles
  - 3.7.2 For secondary aged children to one of the three closest schools to the home address between 2 and 6 miles or between 2 and 15 miles to attend a denominational school.
- 3.8 The Education Transport Policy sets out the circumstances when the Local Authority will provide transport assistance, in accordance with the legislation described above.



# Education Transport Appeals

## Children's Health, Social Care and Education Overview and Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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### 4. Education Transport Appeals

#### Right of appeal

- 4.1 When a parent has made an application for transport assistance and has been refused such assistance the parent has the right of appeal.
- 4.2 During the period from September 2012 to September 2016, appeals were considered by the Transport Appeals Sub Committee as written representations only without the presence from either Officers or parents, however, the above guidance which was re-issued in 2014 changed the appeal process with the intention to ensure greater consistency in approach and to be clearer and more transparent for both parents and local authorities.
- 4.3 This guidance which has been implemented from September 2016 has introduced a two stage appeal process.

#### Two stage Process

- 4.4 The two stage process is outlined in Appendix 1 and has been implemented for applications considered under the 2016 Education Transport policy. At the time of writing it is not possible to report on these as no cases have proceeded to stage 2.
- 4.5 There is now an opportunity for a parent to request a review of their transport application decision to be made. They can do so on the following grounds
  - 4.5.1 The nature of the transport assistance offered
  - 4.5.2 Their child's eligibility
  - 4.5.3 The distance measured in relation to the statutory walking distances
  - 4.5.4 The safety of the route
- 4.6 The responsibility for considering the initial application for transport assistance is carried out by the Passenger Transport Team (Service Delivery) this team is responsible for organising all school transport services. The School Admissions Manager is the policy holder. Therefore, when stage one reviews are received, these are reviewed by the School Admission Manager under the grounds set out above.
- 4.7 If the School Admissions Manager does not find grounds to overturn the original decision to refuse transport, if the parent is unhappy with the decision they have the right to request the decision to be escalated to stage 2.

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Further information on the subject of this report can be obtained from Rebecca Mathis, Direct Dial 01793 465766, [rmathis1@swindon.gov.uk](mailto:rmathis1@swindon.gov.uk).

# Education Transport Appeals

## Children's Health, Social Care and Education Overview and Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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### Stage 2

- 4.8 Should an appeal reach stage two, the appeal is heard by an independent appeal panel who will consider both written and verbal representations from both the parents and officers. The appeal panel are required to be independent of the original decision making process (but are not required to be independent of the local authority) and suitably experienced (at the discretion of the local authority), to ensure a balance is achieved between meeting the needs of the parents and the local authority, and that road safety requirements are complied with and no child is placed at unnecessary risk
- 4.9 The Education Transport Appeals Sub-committee is made up of three elected members from the Appeals Committee and they are expected to attend training at least one per academic year. The last appeal training was held on 30<sup>th</sup> June 2016.
- 4.10 In addition to the grounds indicated above (paragraph 4.5), the appeal panel will also consider
- 4.10.1 Has the policy been applied correctly
  - 4.10.2 Are there any discrepancies in the way it was handled
  - 4.10.3 Do the individual circumstances put forward by the applicant outweigh the normal policy considerations and are considered to be exceptional circumstances.
- 4.11 Where an appeal is successful the panel should advise what form of assistance is to be given e.g. reimbursement of petrol expenses, provision of a bus pass and also the length of time it should be awarded for e.g. one academic year.
- 4.12 Where an appeal is not successful there is no further right of appeal within the academic year, however if the parent believes that the appeal did not follow the correct procedure a complaint can be made to the Local Authority Ombudsman.

## **5. Appeals Data**

- 5.1 The following table outlines the number of appeals which have been heard in the past academic years.

# Education Transport Appeals

## Children's Health, Social Care and Education Overview and Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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Academic Year	Number of appeals received	Number heard	Number successful
2015-16	28	20	10
2014-15	41	36	13
2013-14	32	30	16
2012-13	66	61	29

5.2 The cost of the successful appeals to the Council were

Academic Year	Buss Pass	Petrol Expenses	Taxi	Total
2015-16	£3,392.00	£1,376.76	£3,730.65	£8,499.41
2014-15	£2,821.00	£1,030.32	£12,029.30	£15,880.62
2013-14	£1,155.00	£1,198.80	£19,076.60	£21,430.40
2012-13	£5,362.50	£2,012.70	£16,518.80	£23,894.00
<b>Total</b>	£12,730.50	£5,618.58	£51,355.35	£69,704.43

## 6. Alternative Options

6.1 The Local Authority is required to provide an appeals process.

## 7. Implications, Diversity Impact Assessment and Risk Management

### Financial and Procurement Implications

7.1 Home to School transport is funded from the Swindon Borough Council general fund. The overall home to school transport budget for 2016/17 financial year amounts to £2,765,900.

7.1.1 Mainstream Transport - £728,900

7.1.2 Special Transport - £2,047,000

7.2 The following table shows the number of children eligible for transport during 2015/16 academic year

# Education Transport Appeals

## Children's Health, Social Care and Education Overview and Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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	Number of pupils (2015/16)	Cost during 2015/16 financial year
Mainstream transport and Post-16	685	£643,566
SEN transport	659	£2,832,178 including escorts

- 7.3 Savings are being made year on year by the removal of discretionary transport and efficiency measures as previously approved by Cabinet. The precise impact on the budget is difficult to predict as it depends on parental preference.

### Legal and Human Rights Implications

- 7.4 Legal and Human Rights considerations are fully taken into account in compiling the report to Cabinet to determine the transport policy.

### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 7.5 The Education Transport Policy complies with Section 17 of the Crime and Disorder Act 1998, to develop school policy to maximise school attendance.

### Diversity Impact Assessment

- 7.6 A diversity impact assessment is completed prior to the Education Transport Policy report going to Cabinet. No adverse implications were identified to the proposal; no adverse impacts were identified on the basis of ethnicity, religion, sexual orientation, marital/civil partnership status, or pregnancy/maternity. A copy of the DIA is available on request.

### Risk Management

- 7.7 The policy ensures the safeguarding of children by ensuring that children who are required to attend a school which is greater than the statutory walking distance or is an unsafe route, are provided the relevant transport assistance

## 8. Consultees

- 8.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

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Further information on the subject of this report can be obtained from Rebecca Mathis, Direct Dial 01793 465766, [rmathis1@swindon.gov.uk](mailto:rmathis1@swindon.gov.uk).

# **Education Transport Appeals**

## **Children's Health, Social Care and Education Overview and Scrutiny Committee**

**Date: 14<sup>th</sup> September 2016**

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### **9. Background Papers**

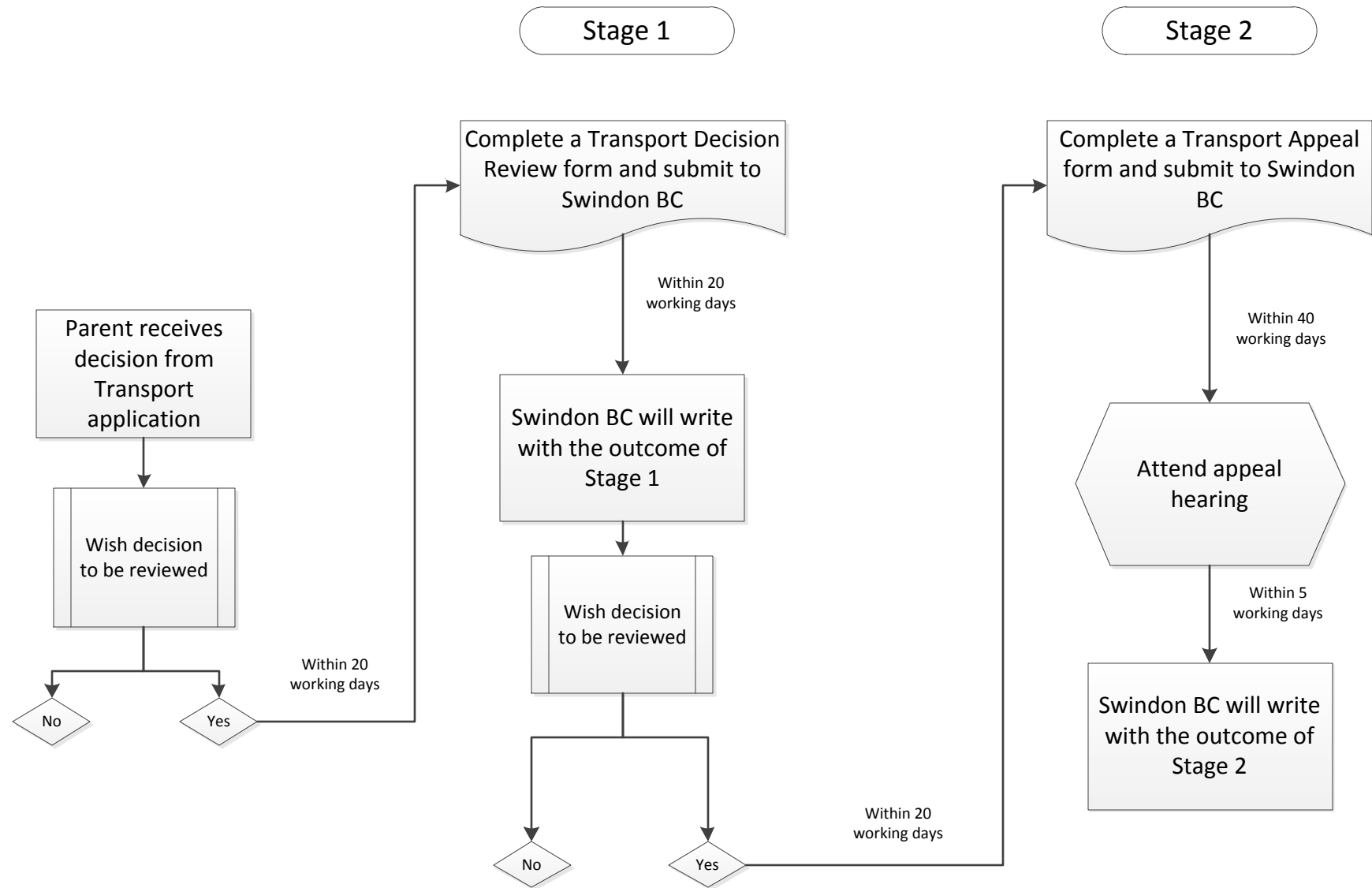
9.1 None

### **10. Appendices**

10.1 Appendix 1: Transport appeals two stage process.

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## Appendix 1: Transport Appeal Process (2 stage)



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## Work Programme 2016/17

### Children's' Health, Social Care and Education

#### Overview & Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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Author:	Director of Law & Democratic Services
Wards:	All Wards
Locality Affected:	All Localities
Parishes Affected:	All Parish Areas

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#### 1. Purpose and Reasons

- 1.1 Each Overview and Scrutiny Committee is requested to have a work programme that details the activities that it will be undertaking during the Municipal year.
- 1.2 The work programme details the various topics and issues that each Committee intends to look into during the coming year with the aim of producing evidence based recommendations intended to provide service improvements for Cabinet and external agencies/bodies to consider.
- 1.3 Under the Council's Constitution, Overview and Scrutiny Committees are required to agree a work programme at the start of the municipal year outlining their priorities and likely outcomes of considering these issues.

The work programme is developed taking into account:

- Corporate priorities and objectives, including the Cabinet Forward Plan.
  - Partnership strategic priorities and objectives.
  - The interests and concerns of Members, Council officers, members of the public and other stakeholders such as community and voluntary groups and local businesses.
- 1.4 Committees are encouraged to review the work programme on a regular basis to ensure it remains relevant and to prioritise the workload of the Committee.
  - 1.5 Members are reminded that the work programme must also take into account:
    - The workload of the Committee and of individual members.
    - The capacity of the Scrutiny Unit and other officers to support a review.
    - The resource implications of carrying out a review.
    - The timescales for a review.
    - The most appropriate method of carrying out a review e.g. Committee meeting, Task Group, Member Champion review.
  - 1.6 The Local Government and Public Involvement in Health Act 2007 have presented the Children's Health, Social Care and Education Overview and Scrutiny Committee with a role, remit and powers regarding local health matters.

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Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463410, rglen-gallo@swindon.gov.uk

# Work Programme 2016/17

## Children's' Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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- 1.7 The Children's Health, Social Care and Education Overview and Scrutiny Committee is encouraged to be mindful of its role and remit when considering a work programme for the 2016/17 Municipal Year.

### 2. Recommendations

The Committee is recommended to:

- Consider and discuss the Chair's proposal for the 2016/17 work programme.
- Approve the proposed Work Programme for the 2016/17 Municipal year.
- Appoint Members to any Task Groups agreed by the Committee.

### 3. Detail

- 3.1 It is important that Overview and Scrutiny adds value to the work of the Council and the Borough and produces tangible outcomes for local people that result in real service improvements. Selecting the right topics is crucial to ensure that Overview and Scrutiny will be effective.

The work programme will be reviewed at every Committee meeting or as the Committee sees fit to ensure that it remains relevant and that Members and Officers have sufficient capacity to effectively achieve its objectives.

- 3.2 The Work Programme attached at Appendix 1 includes these suggestions and the Committee is asked to approve the work programme for the 2016/17 municipal year.
- 3.3 Members of the Children's Health, Social Care and Education Overview and Scrutiny Committee are encouraged to work with Cabinet in the best interests of the Borough and to take into account the priorities and suggestions of Cabinet as detailed in the Cabinet Work Programme and Forward Plan, attached at Appendix 2 when considering the contents for their work programme.
- 3.4 In addition, attention is drawn to the Scrutiny Process Flowchart, attached at Appendix 3, which is aimed at assisting the Committee in identifying how they could influence policy development.

#### Task Group Reviews

- 3.5 The Committee is required to undertake individual reviews throughout the municipal year and proposals for reviews should be proposed and discussed at the Committee meeting.

### 4. Alternative Options

- 4.1 The Committee can choose not to have a detailed work programme although it is recommended that it is best practice to do so.

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Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463410, rglen-gallo@swindon.gov.uk

# Work Programme 2016/17

## Children's' Health, Social Care and Education

### Overview & Scrutiny Committee

Date: 14<sup>th</sup> September 2016

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#### 5. Implications, Diversity Impact Assessment and Risk Management

##### Financial and Procurement Implications

- 5.1 There are no financial or procurement implications arising as a result of this report. Any expenditure arising as a result of an item on the Committee's work programme will be met by the Overview and Scrutiny Support budget, subject to the approval of the Committee.

##### Legal and Human Rights Implications

- 5.2 Section 21 of the Local Government Act requires every local authority to establish an overview and scrutiny function to hold the Executive to account, undertake policy development and review, monitor and improve performance.

##### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 There are no other direct implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Scrutiny Committee and in any recommendations made by the Scrutiny Committee.

##### Links to One Swindon, Plans and Policies

- 5.4 The remit of the Committee includes the review, scrutiny and development of policy recommendations and the monitoring performance of corporate priorities including One Swindon.

##### Diversity Impact Assessment

- 5.5 No Diversity Impact Assessment is required at this stage, any DIA that is required during review of topics included within the work programme will be identified at the appropriate stage.

##### Risk Management

- 5.6 No risk management issues have been identified at this stage. Any risk management issues will be identified at the appropriate time when a topic is under review by the Scrutiny Committee and if it makes any recommendations.

#### 6. Consultees

- 6.1 The Director of Finance (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

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Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463410, rglen-gallo@swindon.gov.uk

# **Work Programme 2016/17**

## **Children's' Health, Social Care and Education**

### **Overview & Scrutiny Committee**

**Date: 14<sup>th</sup> September 2016**

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#### **7. Background Papers**

7.1 None.

#### **8. Appendices**

8.1 Appendix 1 – Work Programme for 2016/17.

8.2 Appendix 2 – Cabinet Work Programme and Forward Plan for the period 19<sup>th</sup> August 2016 to 19<sup>th</sup> August 2017.

8.3 Appendix 3 – Scrutiny Process Flowchart.

## **Children's Health, Social Care and Education** **Work Programme 2016-2017**

### **Terms of Reference of the Committee**

To fulfil all the functions of an overview and scrutiny committee as they relate to: –

- The review, scrutiny, and development of policy recommendations.
- The management of performance.
- The monitoring of progress towards delivering relevant strategies and corporate priorities.
- The formulation of advice for the Cabinet, Council and other partners and stakeholders.

To have specific responsibility for (but not limited to) the scrutiny of:–

- The performance of services for children towards agreed local and national Performance Indicators.
- The quality of provision and effectiveness of Local Authority strategies to raise standards of education within Swindon.
- Specialist social services and integrated social services for children and young people in Swindon.
- The delivery of services to children and young people in Swindon generally.

In addition, as these relate to Children and Young People:

- The performance of services seeking to deliver healthy communities towards agreed local and national performance indicators.
- Health, health commissioning and service delivery.
- Public Health, Health promotion and the work of the Health and Wellbeing Board.
- Health Integration and collaborative working and commissioning with Health agencies and providers and General Practitioners.

In accordance with Section 7 of the Health and Social Care Act 2001 (as amended), the Children's Health, Social Care and Education Overview and Scrutiny Committee will undertake scrutiny of local health service providers jointly with the Adult's Health, Social Care and Housing Overview and Scrutiny Committee.

### **Review of the Work Programme**

The work programme will be reviewed at every meeting of the Children's Health, Social Care and Education Overview & Scrutiny Committee to ensure that it remains relevant, to ensure that Members and Officers have sufficient capacity to deliver the work programme and to include any additional items on the work programme, if appropriate.

### **Contact details**

Committee Officer: Rita Glen-Gallo  
Email: [rglen-gallo@swindon.gov.uk](mailto:rglen-gallo@swindon.gov.uk)  
Tel: 01793 463611

<b>6<sup>th</sup> July 2016</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Co-optees Appointment	To confirm the appointment of Co-optees to the Committee.	Chair
Performance Report	To provide a detailed report on the Children's Services performance, informing the Committee of the latest indicators across Children's Services.	Phillipa Lamb / Jo Ash
Youth Forum and Youth Parliament	To introduce new Youth Parliament members; receive details of the Youth Forum's work for the 2016/17 period and to give the Committee an opportunity to identify any issues raised that Overview and Scrutiny can assist with.	Paul Dobson/ Claire Smith
Work Programme discussion	To set the work programme for the forthcoming municipal year and agree Task Groups and Membership on to those groups.	All

<b>14<sup>th</sup> September 2016 – Themes: SEND; Disabilities; Transport Appeals</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
SEND & Disabilities	To inform the Committee on the inspection regime to include preparatory work and policy dynamics.	Lyn Frith
Provision at Saltway	To update the Committee on work being undertaken by Saltway Centre to include performance and policy development.	Mark Green
Transport Appeals	To update the Committee on School Transport system to include information regarding policy, funding and transport appeals.	Rebecca Mathis/ Ann Crowley

<b>9<sup>th</sup> November 2016 – Themes: Adolescent Issues; Health</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Youth Parliament	To include an update on the Youth MP Survey.	Paul Dobson
Youth Offending Team	Update on work being undertaken by the Restorative Youth Service since its last report to include: a) challenges and achievements of the service and b) presentation (DVD) relating to restorative justice.	Matt Bywater

<b>9<sup>th</sup> November 2016 – Themes: Adolescent Issues; Health</b>		
Mental Health – TAMHS, CAMHS	Update on mental health of young people to include challenges, evidence of need and impact.	Maria Young (TAMHS) / Thomas Kearney (CAMHS)
Performance of health services performance to include immunisation	<p>Detailed report on the Children's Services performance. Informing the Committee of the latest indicators across Children's Services.</p> <p>To include take up and effectiveness to include meningitis vaccinations for young people.</p> <p>GWH (to include A&amp;E, midwifery, paediatrics; Child's Voice).</p> <p>CCG (to include waiting times on autism pathway).</p>	<p>Phillipa Lamb/Jo Ash</p> <p>Cherry Jones</p>

<b>18<sup>th</sup> January 2017 – Theme: Education &amp; Standards</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Education Standards	To provide the Committee with the latest school standards figures; the impact of academies; Swindon schools' standards as compared to out of borough; school improvement arrangements; update on work being undertaken by the Education Strategy Board; Ofsted Local Authority School Improvement Report update.	Peter Nathan
Early Years	To update the Committee on the Early Years Pilot Project.	Peter Nathan
Performance	Detailed report on the Children's Services performance. Informing the Committee of the latest indicators across Children's Services	Phillipa Lamb/Jo Ash

<b>29<sup>th</sup> March 2017 – Themes: Child Protection; Social Care Work</b>		
<b>Item</b>	<b>Objectives</b>	<b>Witnesses</b>
Child Protection and Social Care	<p>To receive a report on child protection work being undertaken to include recruitment of social workers; an update on Government SW accreditation; caseload issues/ SW Health Check issues.</p> <p>To update the Committee on work being undertaken regarding Child Sexual Exploitation, Female Genital Mutilation, Honour Based Violence and Domestic Abuse.</p>	<p>Maria Young</p> <p>Fiona Frances</p>
Performance	<p>Detailed report on the Children's Services performance. Informing the Committee of the latest indicators across Children's Services</p> <p>GWH (to include Service Level Agreements; Standards)</p> <p>CCG</p>	Phillipa Lamb/Jo Ash

**TASK GROUPS**

<b>Item</b>	<b>Objectives</b>
SEND reforms	The SEND Task Group will continue the review of the Special Education and Disability (SEND) Reforms relating to the Children and Families Act 2014 with special focus on their implementation throughout the Borough of Swindon.



## Swindon Borough Council

### CABINET WORK PROGRAMME AND FORWARD PLAN

19 AUGUST 2016 - 19 AUGUST 2017 – Proposed AGENDA ITEMS and KEY DECISIONS (as at 06/09/16)

**Key Decisions are defined as:**

- a) decisions that are likely to be significant in terms of spending or savings having had regard to the Council's budget for that particular service or function, and
- b) decisions that are likely to have a significant impact on two or more Council wards.

If you wish to make your views known on any matter set out in this work-plan, please contact the relevant Cabinet Member or the contact officer identified.

<b>Councillor:</b>	<b>Portfolio:</b>
David Renard	Leader of the Council and Chair of Cabinet
Russell Holland	Deputy Leader of the Council and Vice-Chair of Cabinet and Cabinet Member for Finance and Corporate Services
Oliver Donachie	Cabinet Member for Housing and Homelessness
Toby Elliott	Cabinet Member for Strategic Planning
Fionuala Foley	Cabinet Member for Children's Services
Brian Ford	Cabinet Member for Adults' Health and Social Care
Dale Heenan	Cabinet Member for Sustainability and Transport
Mary Martin	Cabinet Member for Communities
Garry Perkins	Cabinet Member for the Economy, Regeneration and Skills
Keith Williams	Cabinet Member for Streetsmart

### Cabinet Member Decisions Proposed for August 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
1 and 3 Faringdon Road - Purchase, Refurbishment and Disposal	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	The following Opposition Spokespersons / Ward Members – Councillor Bob Wright (Labour), Councillor Des Moffatt (Labour), Councillor Kevin Small (Labour), Councillor Julie Wright (Labour), Councillor Junab Ali (Labour) Councillor Stan Pajak Wood (Liberal Democrat).	Head of Property Assets Rob Richards tel: 01793 463521 Email: rrichards@swindon.gov.uk	Cabinet Member Decision Note

### Cabinet Meeting Date - 7th September 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Budget Management 2016/17 and 2016 - 2020 Efficiency Statement	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 21 <sup>st</sup> October 2015	Corporate Director Resources (S151 Officer) or Kirsty Cole Tel: 464610 or Email: kcole@swindon.gov.uk	Cabinet Minute 26 refers
Apprenticeships and the Apprenticeship Levy	No	Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 14 <sup>th</sup> June 2016	Head of People, Performance and Engagement Sam Mowbray Email: smowbray@swindon.gov.uk Tel: 07823 525337	N/A
A Smokefree Bus Station	No	Cabinet Member for Adults' Health and Social Care	Cabinet	N/A Date of Notice: 29 June 2016	Director of Public Health Cherry Jones Tel: 01793 444681 Email: Cherryjones@swindon.gov.uk	N/A
Local Bus Services - Strategy Review	No	Cabinet Member for Sustainability, Highways and Transport	Cabinet	N/A Date of Notice: 30 <sup>th</sup> June 2016	Head of Highways and Transport Jason Humm Email: JHumm@swindon.gov.uk tel: 01793 463201	Cabinet Minute 16(3) refers
School Place Planning Update 2016	No	Cabinet Member for Children's Services	Cabinet	N/A Date of Notice: 5 <sup>th</sup> July 2016	Head of Education Services or Gareth Cheal Tel: 01793 465802 Email: gcheal@swindon.gov.uk	N/A

Swindon Education Improvement Strategy	No	Cabinet Member for Children's Services	Cabinet	N/A Date of Notice: 11 <sup>th</sup> July 2016	Head of Education Services Peter Nathan Tel: 07467 440955 Email: pnathan@swindon.gov.uk	N/A
Regulation of Investigatory Powers Act 2000 - Inspection report from the Office of Surveillance Commissioners	No	Leader of the Council	Cabinet	N/A Date of Notice: 14 <sup>th</sup> July 2016	Director of Law & Democratic Services (Monitoring Officer) Stephen Taylor Tel: 01793 463012 Email: staylor@swindon.gov.uk	N/A
Annual review of Local Ombudsman Complaints	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 1 <sup>st</sup> August 2016	Director of Law & Democratic Services (Monitoring Officer) or Erz Turner Tel: 01793 463002 Email: eturner@swindon.gov.uk	N/A
References from other Council bodies - Health and Wellbeing Board and Community Safety Partnership Board	No	Cabinet Member for Adults' Health and Social Care Cabinet Member for Housing and Homelessness	Cabinet	N/A Date of Notice: 8 <sup>th</sup> August 2016	Director of Law & Democratic Services (Monitoring Officer) or Steve Jones Tel: 01793 463602 Email: stevejones@swindon.gov.uk	N/A
Wichelstowe District Centre	No	Cabinet Member for Strategic Planning	Cabinet	N/A Date of Notice: 12 <sup>th</sup> August 2016	Robert Powe Rob Powe Tel: 01793 463305 Email: rpowe@swindon.gov.uk rpowe@swindon.gov.uk	N/A

**Cabinet Meeting Date - 19th October 2016**

<b>Subject</b>	<b>Key Decision Yes/No?</b>	<b>Portfolio Holder / Cabinet Member</b>	<b>Decision Maker</b>	<b>Method of Consultation Undertaken / To be Taken</b>	<b>Contact Officer</b>	<b>Available Background Papers</b>
Budget Management 2016/17.	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 13 <sup>th</sup> October 2015	Corporate Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or email: kcole@swindon.gov.uk	N/A
2017-2020 Financial Context and Budget Proposals 2017/2018.	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 9 <sup>th</sup> December 2015	Corporate Director Resources (S151 Officer) Tel: 463300 or Email: smckellar@swindon.gov.uk	N/A
Delivering the Vision for Swindon	Yes	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 8 <sup>th</sup> August 2016	Corporate Director Resources (S151 Officer) Stuart McKellar Tel: 01793 463300 Email: smckellar@swindon.gov.uk	N/A
Education Transport Policy 2018-19	Yes	Cabinet Member for Children's Services	Cabinet	N/A Date of Notice: 26 <sup>th</sup> May 2016	Head of Education Services or Emily Heaton Email eheaton@swindon.gov.uk Tel: 01793 465769	N/A
Options for reducing street lighting energy usage	No	Cabinet Member for Sustainability and Transport	Cabinet	N/A Date of Notice: 12 <sup>th</sup> February 2016	Head of Highways and Transport or Tim Price Tel: 01793 46 6254 Email: tprice@swindon.gov.uk	Cabinet Minute 69 2015/16 refers

Heritage Lottery Fund Application to support Swindon Museum & Art Gallery development and relocation	No	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 29 <sup>th</sup> June 2016	Chief Executive or Duncan Kerr: Tel: 01793 465743, Email: dkerr@swindon.gov.uk	N/A
Affordable Housing Development Programme	No	Cabinet Member for Housing and Homelessness	Cabinet	N/A Date of Notice: 20 <sup>th</sup> July 2016	Head of Housing Management & Community Safety Michael Ash Tel: 01793 464377 Email: Mash@swindon.gov.uk	N/A
Insurance for Community Groups	No	Cabinet Member for Communities	Cabinet	N/A Date of Notice: 23 <sup>rd</sup> August 2016	Head of Localities and Volunteering Patrick Weir tel: 07946 595852 Email: pweir@swindon.gov.uk	Council Minute 90 2015/16 refers
Waste Strategy Options	No	Cabinet Member for Streetsmart	Cabinet	N/A Date of Notice: 24 <sup>th</sup> August 2016	Head of StreetSmart Leon Barrett Tel: 07818 51062 Email: lbarrett@swindon.gov.uk	N/A
Solar Farm Investment Options	No	Cabinet Member for the Economy, Regeneration and Skills	Cabinet		Jan Willis, Interim Corporate Director, Resources or Philippa Venables Tel: 07824 550469 Email: pvenables@swindon.gov.uk Jan.Willis@swindon.gov.uk	N/A
Land at Oakfield	Yes	Cabinet Member for Communities and Strategic Planning	Cabinet	N/A Date of Notice: 4 <sup>th</sup> May 2016	Head of Property Assets Rob Richards Tel: 01793 463521	N/A

Proposed Property Acquisition, Swindon Town Centre	No	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 14 <sup>th</sup> August 2016	Rob Richards Rob Richards Tel: 01793 463521 Email: rrichards@swindon.gov.uk rrichards@swindon.gov.uk	N/A
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**Cabinet Meeting Date - 7th December 2016**

<b>Subject</b>	<b>Key Decision Yes/No?</b>	<b>Portfolio Holder / Cabinet Member</b>	<b>Decision Maker</b>	<b>Method of Consultation Undertaken / To be Taken</b>	<b>Contact Officer</b>	<b>Available Background Papers</b>
Capital Programme Monitoring - Second Quarter and Treasury Management Performance 2016/17.	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Notice of decision: 9 December 2015	Corporate Director Resources (S151 Officer) or Paul Smith Tel No: 463976 e-mail: psmith2@swindon.gov.uk	N/A
Swindon's Country Parks - Car Parking Charges	Yes	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 30 <sup>th</sup> June 2016	Corporate Director Resources (S151 Officer) Stuart McKellar Tel: 01793 463300 Email: smckellar@swindon.gov.uk	Cabinet Minute 14 (3) refers
North Star - Proposed Regional Leisure Destination	Yes	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 1 <sup>st</sup> August 2016	Head of Property Assets Rob Richards Tel: 01793 463521 Email: rrichards@swindon.gov.uk	N/A



**Cabinet Meeting Date - 8th February 2017**

<b>Subject</b>	<b>Key Decision Yes/No?</b>	<b>Portfolio Holder / Cabinet Member</b>	<b>Decision Maker</b>	<b>Method of Consultation Undertaken / To be Taken</b>	<b>Contact Officer</b>	<b>Available Background Papers</b>
Budget 2017/18 and Beyond	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Corporate Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme 2017/18	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Corporate Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 07500 884176 or Email: psmith2@swindon.gov.uk	N/A
Treasury Strategy Statement 2017/18	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Corporate Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 07500 884176 or Email: psmith2@swindon.gov.uk	N/A
Housing Revenue Account - Rents and Charges 2017/18	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Corporate Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 07500 884176 or Email: psmith2@swindon.gov.uk	N/A
Swindon Pay Policy Statement 2017	Yes	Cabinet Member for Corporate, Customer and Digital Services	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Head of People, Performance and Engagement Tel: 07823 525337 or Email: smowbray@swindon.gov.u	N/A

Securing a sustainable future for Swindon's Cultural Assets	Yes	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 12 <sup>th</sup> February 2016	Corporate Director Resources (S151 Officer) or Rachel Watts Tel: 07823 525297 Email: RWatts2@swindon.gov.uk	Cabinet Minute 58 2015/16 refers

**Cabinet Meeting Date - 15th March 2017**

<b>Subject</b>	<b>Key Decision Yes/No?</b>	<b>Portfolio Holder / Cabinet Member</b>	<b>Decision Maker</b>	<b>Method of Consultation Undertaken / To be Taken</b>	<b>Contact Officer</b>	<b>Available Background Papers</b>
Budget Management 2016/17	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Corporate Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme Monitoring 3rd Quarter 2016/17	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Corporate Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 463976 or Email: psmith2@swindon.gov.uk	N/A

**Cabinet Meeting Date - 26th April 2017**

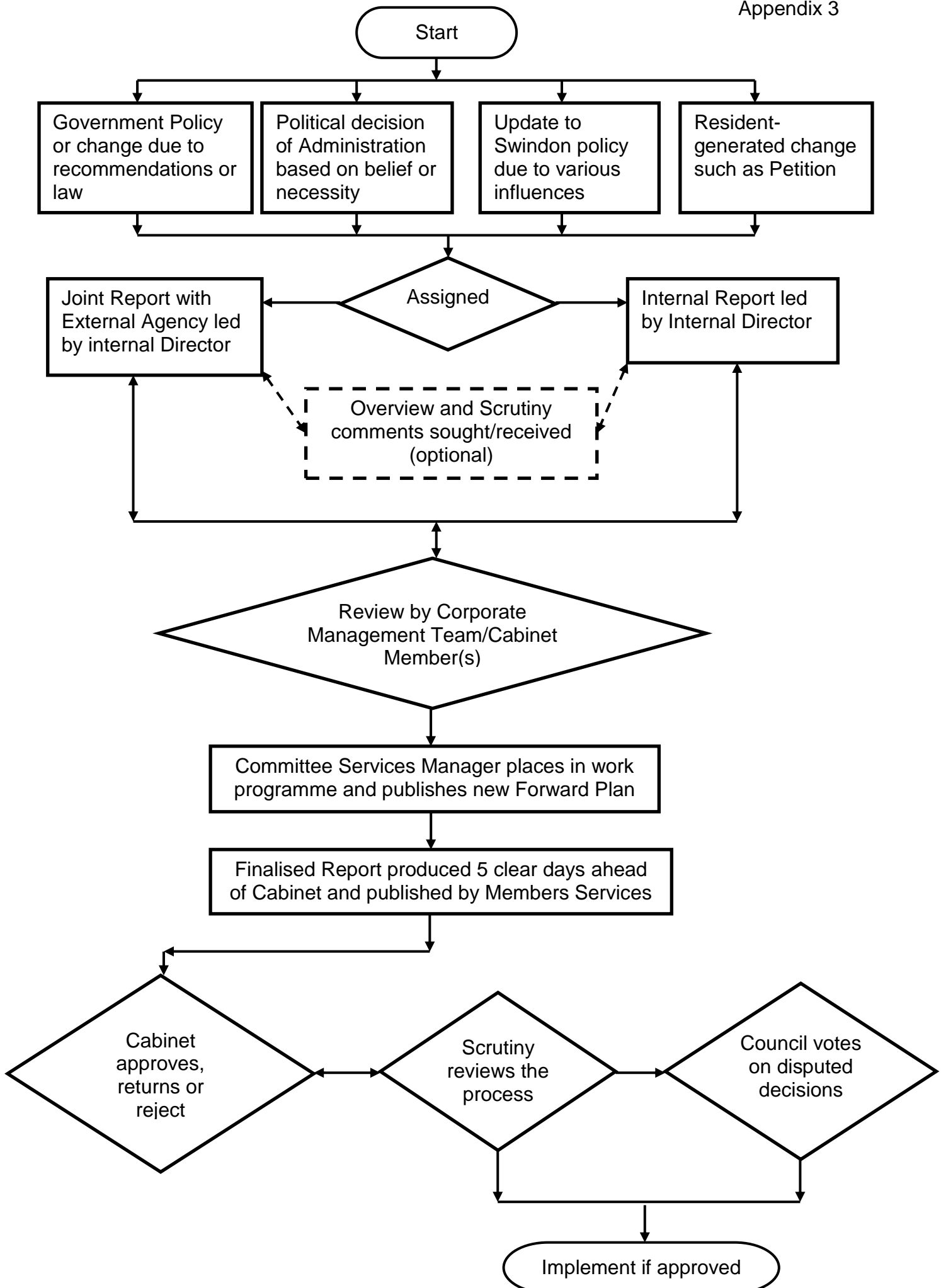
<b>Subject</b>	<b>Key Decision Yes/No?</b>	<b>Portfolio Holder / Cabinet Member</b>	<b>Decision Maker</b>	<b>Method of Consultation Undertaken / To be Taken</b>	<b>Contact Officer</b>	<b>Available Background Papers</b>
Budget Management 2016/17	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 <sup>nd</sup> April 2016	Corporate Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A

**Cabinet Meeting Date - June 2017 (TBC)**

<b>Subject</b>	<b>Key Decision Yes/No?</b>	<b>Portfolio Holder / Cabinet Member</b>	<b>Decision Maker</b>	<b>Method of Consultation Undertaken / To be Taken</b>	<b>Contact Officer</b>	<b>Available Background Papers</b>
Housing Revenue Account - Medium Term Financial Plan	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 <sup>th</sup> May 2016	Corporate Director Resources (S151 Officer) or Paul Smith Tel: 07500 884176 or Email: psmith@swindon.gov.uk	N/A
Budget Out-turn and Management 2016/17.	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 <sup>th</sup> May 2016	Corporate Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme Monitoring Out-Turn 2016/17	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 <sup>th</sup> May 2016	Corporate Director Resources (S151 Officer) or Ian Burbidge, Finance, Tel: 464384 or Email: iburbidge@swindon.gov.uk	N/A
Treasury Performance 2016/17	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 <sup>th</sup> May 2016	Corporate Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 463976 or Email: psmith2@swindon.gov.uk	N/A

**July 2017 (TBC)**

<b>Subject</b>	<b>Key Decision Yes/No?</b>	<b>Portfolio Holder / Cabinet Member</b>	<b>Decision Maker</b>	<b>Method of Consultation Undertaken / To be Taken</b>	<b>Contact Officer</b>	<b>Available Background Papers</b>
Budget Management 2017-18	No	Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 7 <sup>th</sup> June 2016	Corporate Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 01793 464610 or Email: kcole@swindon.gov.uk	N/A



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## NHS Swindon Clinical Commissioning Group

### Children's Health, Social Care and Education Overview & Scrutiny Committee

Date: 14 September 2016

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Author:	Executive Nurse, Swindon CCG
Wards:	All Wards
Locality Affected:	All Locality Area
Parishes Affected:	All Parish Area

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#### 1. Purpose and Reasons

- 1.1 This report provides the Children's Health, Social Care and Education O&S Committee with an update of performance and key issues relating to Swindon CCG.
- 1.2 A key purpose of the Children's Health, Social Care and Education O&S Committee is to hold Commissioners of Health and Social Care Services to account.
- 1.3 Any Commissioner of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.  
  
Identify any areas of concern that require further investigation.

#### 3. Detail

General Update

##### 3.1 Review of Children's Services

Children's Mental Health Pathways are being developed locally in line with national ambition integrating into a tier-less service to make assessments faster and more seamless.

A full review of community children's provision is being completed this year and we will update the committee as this progresses further.

# NHS Swindon Clinical Commissioning Group

## Children's Health, Social Care and Education Overview & Scrutiny Committee

Date: 14 September 2016

### 3.2 Appointment of Designated Nurse

We are pleased to confirm that we have appointed a full time Designated Nurse who started with the CCG on the 7 September 2016. Swindon CCG is required to employ, or have in place designated professionals for safeguarding children and for looked after children. The designated nurse will be a vital source of advice to the CCG, NHS England, Swindon Borough Council and the Local Safeguarding Children's Board, and offer advice and support to other health professionals.

### 3.3 SEND

The CCG have been working with Community Paediatricians, the SEND Strategic Lead and colleagues at Swindon Borough Council in order to meet the statutory requirements of the Children and Families Act 2014, with specific regards to children with Special Educational Needs and Disability.

The CCG has created and funded a Designated Medical Officer post; to support the health review for children and young people in Swindon who are requiring an education and health care plan (EHCP). This will provide children and young people with better care planning as a result of multi-disciplinary working across health, education and social care.

The CCG is now using a nationally recognised quality self-assessment tool to further indicate actions moving forward. This will support progress and generate a SEND health specific action plan.

### 3.4 Maternity Care in Swindon

As part of the NHS Five Year Forward View, a national review of maternity services was undertaken to assess the current maternity care provision and consider how services should be developed to meet the changing needs of women a babies.

The key local issues to are:

	<b>September 2016 Update</b>
Tongue tie pathway	Waiting times have been reduced to one week following a close collaboration with the Ear, Nose and Throat (ENT) department. Reductions in waiting times are expected to be sustainable and will continue to be reviewed monthly.

Further information on the subject of this report can be obtained from Robin Butcher, 01793 683700, [communications@swindonccg.nhs.uk](mailto:communications@swindonccg.nhs.uk)

# NHS Swindon Clinical Commissioning Group

## Children's Health, Social Care and Education Overview & Scrutiny Committee

Date: 14 September 2016

Smoking cessation	A new pathway is due to commence in October 2016 for Swindon patients which will see a transfer of support services from one part-time midwife to an existing service at Swindon Borough Council. This will be closely monitored in respect of contacts and outcomes. This gives the opportunity to extend services beyond the maternity time frame and better extend cessation support to family members also, for longer term effect.
High caesarean section rates (emergency and elective)	<p>GWH are now participating in the SW Network Caesarean Section working party.</p> <p>The CCG are exploring the prospect of a University of Bath Clinical Psychology Placement for an MSc student to look at selection and desire for caesarean from a psychological perspective for professionals, mothers and partners. This is due to start in the Summer of 2017 and could be a unique piece of work nationally.</p>
High induction rates	As above (linked with high caesarean section rates)
Low normal birth rates	As above (linked with high caesarean section rates)
2015 CQC recommendations:  <i>Ensure there are sufficient numbers of midwifery staff to provide care and treatment to patients in line with national guidance</i>	<p>A recruitment plan is in place and new staff are being recruited. This issue will be closely monitored through the CCGs Commissioning for Quality Forum.</p> <p>A tele-health project is being planned (with West of England Health Academy) which will allow remote monitoring for pregnant women. This has the potential to release staff from face to face contact in the hospital and will be more patient friendly, for a select group of low risk patients. .</p>

### 3.5 Supporting Information

#### 3.5.1 None

Further information on the subject of this report can be obtained from Robin Butcher, 01793 683700, [communications@swindonccg.nhs.uk](mailto:communications@swindonccg.nhs.uk)

# NHS Swindon Clinical Commissioning Group

## Children's Health, Social Care and Education Overview & Scrutiny Committee

Date: 14 September 2016

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### 4. Alternative Options

4.1 None

### 5. Implications, Diversity Impact Assessment and Risk Management

#### Financial and Procurement Implications

5.1 None

#### Legal and Human Rights Implications

5.2 None

#### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.3 None

#### Diversity Impact Assessment

5.4 None

#### Risk Management

5.5 None

### 6. Consultees

6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

### 7. Background Papers

7.1 None

### 8. Appendices

8.1 None