

**Report of the Cabinet Member
Children's Services and Schools**

I have been asked to Report as follows for Full Council on 21 July 2022:

1. By Councillor Adams as follows, although as stated at the Cabinet, I would provide a Report on the issues raised and an action plan:

In the light of the recent Ofsted report into SEND services at the Council, may I request from the Cabinet Member for Children's Services, a report into the urgent measures and the outline of an action plan, being put in place at present, to improve this distressing situation for schools, parents and especially the many vulnerable children, in our authority that are in dire need of timely and effective SEND support.

2. By Councillor Hannaford as follows:

.....on the effect inflationary pressures are having on school meals in Devon.

Specifically ensuring that children are not choosing or accessing less nutritious or varied options.

For example, there is a trend nationally, that children aren't opting for a roast dinner , with or without meat, that comes with four or five different vegetables, and going for a pasta bake that does include the advised five a day.

Furthermore, are we looking to potentially subsidise meals to ensure our children are not missing out.

3. By Councillor Aves as follows:

On Mental Health in Devon:

So many people are suffering from not having timely help to support their Mental Health illness or disorder.

How has Mental Health support improved in Devon over this last year for both adults and children, different genders?

What is available? Is there parity across areas of Devon for this support?

How long are the waiting times to be seen for assessment and for treatment?

What capacity for improvement in treatment and support is there?

What are the figures for those needing support, showing how that has changed over the last five years?

4. By Councillor Bailey as follows:

In light of the child trafficking of Sir Mo Farah when he was nine years old, please can the Portfolio Holder for Childrens Services provide a report on child trafficking in our county and what Devon County Council is doing to identify and prevent it.

Responses

1. Ofsted Report into SEND

1) At the last Cabinet meeting, I agreed to bring a report to Full Council to set out the service's response to the recent SEND letter and to detail the Action Plan to address these failings and improve the service. I would like to set some context for Members.

2) In preparation for the Inspection, D.C.C. leadership team were able to provide a detailed self-assessment acknowledging that there has been no progress in the four areas of weakness identified in the first inspection:

a. Strategic plans and the local area's SEND arrangements are not embedded or widely understood by stakeholders, including schools, settings, staff, and parents.

b. The significant concerns that were reported about communication with key stakeholders, particularly with parents and families.

c. The time it takes to issue education, health and care (EHC) plans and the variable quality of these plans. Plans do not consistently capture a child and young person's needs and aspirations. EHC plans are not able to be used as a valuable tool to support the planning and implementation of education, health and care provision to lead to better lived experiences for the child and their families.

d. Weaknesses in the identification, assessment, diagnosis and support of those children and young people with autism spectrum disorder (ASD).

3. The leadership team demonstrated to Ofsted that they:

- Therefore, already have a clear understanding of the weaknesses in the service and how to address these
- Are already taking the steps to deliver improvement

The inspection was an inspection of the Local Area, which includes D.C.C. and partners. Since the initial inspection of 2018 there has been both a DfE and NHS adviser involved with supporting improvement.

4. However, the DfE has understandably challenged us in relation to the need to make headway on reducing the backlog of annual reviews-which is still accumulating-there is a need for far greater caseworker and leadership capacity.

5. Shortly before the Inspection, the Parent Carer Forum shared the feedback from their parent survey which mirrored the findings of the Inspectors in terms of our relationships with children and families, the quality and level of service that we provide, particularly around quality and timeliness of Education and Health Care plans (EHCP) and the need for vastly improved relationships and communication with families.

6. In January, the Interim Director for SEN conducted an early assessment of the weaknesses within the system and was quickly able to put some tactical improvements in place to stabilise the service wherever possible as part of an overall improvement plan. I have set out a list of actions below that are already in train.

Actions on the ground:

1. Recruitment has been underway to ensure greater capacity and skills in delivering services to families- based on forming and improving relationships. The caseloads are far too high, with one caseworker to 500 children's cases. The involvement of the Parent Forum co-chairs in recruitment has been pivotal in ensuring relationships with families are a focus of casework. This has to date included recruiting 14 new permanent staff to the service.
2. In addition, there has been further recruitment to create a 'backlog' team to oversee the delayed annual reviews and there is now a team of 10 experienced virtual case officers in place with a lead. In the past month they have closed 100 reviews. We have taken advantage of technology and Teams meetings to recruit virtual caseworkers with experience and skills. Our Parent Forum co-chairs have been alongside side us at all of the interviews. The team needs to be further expanded.
3. Appointed a lead Annual review officer to quality assure annual reviews and train staff.
4. Deployed in the first instance two virtual case officers in the backlog team to focus solely on post-16 young people. We need to add greater capacity here.
5. There is delegated leadership now to robust leads for the backlog team, and post-16 work, who will work together to ensure
6. The deputy director leading by example to the 0-25 service by meeting (virtually or face to face) parents before they escalate their complaint so that their voice is heard and listened to.
7. Providing clear direction in engagement with children, young people and
 - a. families so that schools and further education providers improve the opportunities, communication with and outcomes for our young people and their families.
8. We have established a multi-agency assessment panel to ensure children and young people referred to EHC needs assessment are considered in more a robust way.
9. Commissioned a quality assurance tool from Invision 360 which will involve
 - a. multi-agency collaborative quality assurance and training for caseworkers in relation to annual reviews and EHC Plans.
10. Commissioned a data company to develop a dashboard.
11. Established a High Needs Funding sub-committee of the schools forum.

Since the inspection in May 22, we have:

1. Refreshed the SEND board, agreed governance and membership with partners,
 2. secured more senior support
 3. Developed an action plan with KPIs and milestones based on the parent career survey-in liaison with the Parent Forum-this is now being considered across the Local Area
 4. Used this work to develop a draft Accelerated Progress Plan based on the Parent Survey and the Ofsted inspection outcome letter. Now being reviewed and further developed across the Local Area.
7. The focus has been on improving outcomes for children and young people through changing culture and practice to be restorative rather than process driven.

8. Partnership between senior local areas leads, including health partners and the Parent Forum is fundamental in showing that there is the right leadership capacity to take any development of a joint improvement plan forward. This cannot be solely a DCC one. We are also required to work with the DfE and NHS inspectors. We are required to work alongside the Department for Education (DfE) and the NHS to set out the full improvement plan. The official meeting with the DfE happened on 19 July 2022.

9. There have been weekly meetings between the Deputy Director and the co-Chairs of PCFD (who now have an office in County Hall) to ensure the parent voice is embedded in improvements. The Parent Carer Survey gave clarity about the poor experiences of families 'on the ground' and was reflected in the Ofsted inspection. This survey also made positive recommendations and KPIs are developed in the draft action plan, drawing on the impact of service delivery on the experience of families. This action will be embedded in a wider improvement plan following the Ofsted inspection.

10. The SEND Board has agreed it will provide governance over the development of the plan, along with oversight of its implementation and impact.

11. The DfE meeting on 19th July set out that we will most likely have a government intervention which will involve an accelerated action plan developed in liaison with our partners.

12. The Interim Deputy Director has already worked with our Parent Forum Co-chairs to develop a draft action plan based on the findings of the parent Care survey and used the KPIs/metric from the survey to set targets -this will need to be worked upon by all stakeholders at pace and developed into an Accelerated Programme Plan, agreed upon by the DfE. The DfE adviser and Health adviser have already had an informal meeting with the Interim Deputy and will again on Thursday. Health partners as well as the Parent Forum co-chairs have been invited.

13. I would like to state my support for the D.C.C. leadership team for their proactivity in partnership work both with the Parent Forum, health partners, and education providers to ensure there is a wider Local Area approach, as well as close working with the DfE and NHS advisers. This is creating the conditions for the Council itself to support the delivery of the changes needed with their support. Whilst no Council wants to be subject to Intervention, this is an opportunity for the Council to support the leadership team in every way possible to ensure that all children, young people, and families in Devon receive the best possible service from a council that cares and truly wants every child to reach their full potential and live fulfilled lives.

2. Inflationary Pressures on School Meals

There are two separate issues to respond to here. I am not sure that inflationary pressures necessarily directly influence the choices of our children and young people in the dinner queue at schools. Helping children and young people to make healthy choices, including ensuring that they get their five a day, is something that I am very keen for schools to promote but with the support of families and our partners.

As a Council we don't hold data on the purchases of school meals so we do not have a specific evidence base relating to the specific choices of children and young people. It is for schools to make their choices in terms of their supplier of school meals or the ingredients that make up schools' meals. I agree that it is important that children and young people have access to healthy options in school.

In terms of ensuring that the most vulnerable receive help, the provision of Free School Meals is based on a national funding formula factor. Schools choose how this money is spent as part of their overall budget setting. There is currently no consideration for Devon County Council to subsidise schools.

3. Mental Health in Devon

This is a very complex area of provision and we have conferred with partners in DPT and CFHD, since NHS commissioners and providers usually work closely on this type of response. Also, the request for the Report spanned both Children's and Adults Services, which of course is two separate Cabinet portfolio's.

Attached as an Appendix to this Report is a recent paper produced for Health & Adult Care Scrutiny Committee, which describes aspects of Mental Health prevalence, impacts of COVID, national forecasts of demand and key developments, challenges and opportunities faced in addressing the mental health needs of Devon's population. This responds to many of the questions posed by Councillor Aves.

However, these important questions require a reasonable amount of detail and context in order to explain fully and I would suggest a timescale be agreed for a specific analysis and presentation, as a Report and/or masterclass session which would allow for sufficient differentiation between types and intensity of services to make for meaningful descriptions of the issues and opportunities and the impacts on the population.

This would include NHS provision, MH social work and wider community, Voluntary, Community and Social Enterprise Sector provision, all of which are part of how we would interpret "support" in the questions posed.

There is also work in terms of the impacts of recent system financial choices made in the context of the Integrated Care System as a whole, which could be described at that later date also.

I will conclude with a response to the question posed on 'what capacity is there for improvement in treatment and support', which is three-fold:

- The Integrated Care System is establishing a "Provider Collaborative" which brings commissioning and provision decisions closer together with greater input from experts by experience on an equal footing with experts by training working with the pooled resources, assets and experience of statutory and non-statutory partners. The Provider Collaborative is shadowing NHS commissioning responsibilities currently with a view to delegation by 23/24.
- The Community Mental Health Framework is a national policy shift in Mental Health, which more explicitly seeks to join up services much closer to the point of need in primary care and communities for those with severe mental health problems. This CMHF has started across all 31 Primary Care Networks in Devon with at least 1500 people benefitting from the initial implementation so far.

- There is a greater emphasis on the Voluntary, Community and Social Enterprise Sector as full partners in provision. A VCSE Alliance Contract has been established this year to join up this expertise with health and social care in a more systematic way, with shared resources and shared approach to opportunities and risks.

4. Child Trafficking – Identification and Prevention

Human trafficking is a horrendous crime, often leading to sexual exploitation, forced labour, domestic servitude or even organ harvesting

Whilst Devon and Cornwall Police are the lead agency in this area, a wide range of agencies work closely together expose child trafficking and modern slavery and ensure that the victims (or potential victims) are supported and protected, and perpetrators brought to justice.

However, this is a very complex area of work and to give a comprehensive response, I would like to engage with those partners, which has not been possible in the timeframe prior to this meeting.

I will contact our partners in this area and provide an updated response after the meeting.

Andrew Leadbetter

Cabinet Member

Children's Services and Schools