

**Agenda for a meeting of the Children's Services
Overview and Scrutiny Committee to be held on
Wednesday, 18 January 2023 at 4.30 pm in Council
Chamber - City Hall, Bradford**

Members of the Committee – Councillors

LABOUR	CONSERVATIVE	LIBERAL DEMOCRAT	BRADFORD INDEPENDENT GROUP
Alipoor Humphreys Berry Shafiq Thirkill	Winnard Pollard	J Sunderland	Sajawal

Alternates:

LABOUR	CONSERVATIVE	LIBERAL DEMOCRAT	BRADFORD INDEPENDENT GROUP
Mukhtar Walsh Johnson Regan	K Green Felstead	Stubbs	Elahi

VOTING CO-OPTED MEMBERS:

Church representative:

Joyce Simpson (CE)

Parent Governor Representatives:

Fauzia Raza & Shifa Simab

NON VOTING CO-OPTED MEMBERS:

**Teacher Secondary School
Representative:**

Tom Bright

Children's Social Care: Dr Samina Karim

Notes:

- This agenda can be made available in Braille, large print or tape format on request by contacting the Agenda contact shown below.
- The taking of photographs, filming and sound recording of the meeting is allowed except if Councillors vote to exclude the public to discuss confidential matters covered by Schedule 12A of the Local Government Act 1972. Recording activity should be respectful to the conduct of the meeting and behaviour that disrupts the meeting (such as oral commentary) will not be permitted. Anyone attending the meeting who wishes to record or film the meeting's proceedings is advised to liaise with the Agenda Contact who will provide guidance and ensure that any necessary arrangements are in place. Those present who are invited to make spoken contributions to the meeting should be aware that they may be filmed or sound recorded.
- If any further information is required about any item on this agenda, please contact the officer named at the foot of that agenda item.

From:

Asif Ibrahim

Director of Legal and Governance

Agenda Contact: Kanwal Amrez/Farzana Mughal

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A. PROCEDURAL ITEMS

1. ALTERNATE MEMBERS (Standing Order 34)

The Director of Legal and Governance will report the names of alternate Members who are attending the meeting in place of appointed Members.

2. DISCLOSURES OF INTEREST

(Members Code of Conduct – Part 4A of the Constitution)

To receive disclosures of interests from members and co-opted members on matters to be considered at the meeting. The disclosure must include the nature of the interest.

An interest must also be disclosed in the meeting when it becomes apparent to the member during the meeting.

Notes:

- (1) *Members must consider their interests, and act according to the following:*

Type of Interest	You must:
<i>Disclosable Pecuniary Interests</i>	<i>Disclose the interest; not participate in the discussion or vote; and leave the meeting <u>unless</u> you have a dispensation.</i>
<i>Other Registrable Interests (Directly Related)</i> OR <i>Non-Registrable Interests (Directly Related)</i>	<i>Disclose the interest; speak on the item <u>only if</u> the public are also allowed to speak but otherwise not participate in the discussion or vote; and leave the meeting <u>unless</u> you have a dispensation.</i>
<i>Other Registrable Interests (Affects)</i> OR <i>Non-Registrable Interests (Affects)</i>	<i>Disclose the interest; remain in the meeting participate and vote <u>unless</u> the matter affects the financial interest or well-being (a) to a greater extent than it affects the financial interests of a majority of inhabitants of the affected ward, and (b) a reasonable member of the public knowing all the facts would believe that it would affect your view of the wider public interest; in which case speak on the item <u>only if</u> the public are also allowed to speak but otherwise not do not participate in the discussion or vote; and leave the meeting <u>unless</u> you have a dispensation.</i>

- (2) *Disclosable pecuniary interests relate to the Member concerned or their spouse/partner.*
- (3) *Members in arrears of Council Tax by more than two months must not vote in decisions on, or which might affect, budget calculations, and must disclose at the meeting that this restriction applies to them. A failure to comply with these requirements is a criminal offence under section 106 of the Local Government Finance Act 1992.*
- (4) *Officers must disclose interests in accordance with Council Standing Order 44.*

3. INSPECTION OF REPORTS AND BACKGROUND PAPERS

(Access to Information Procedure Rules – Part 3B of the Constitution)

Reports and background papers for agenda items may be inspected by contacting the person shown after each agenda item. Certain reports and background papers may be restricted.

Any request to remove the restriction on a report or background paper should be made to the relevant Strategic Director or Assistant Director whose name is shown on the front page of the report.

If that request is refused, there is a right of appeal to this meeting.

Please contact the officer shown below in advance of the meeting if you wish to appeal.

(Farzana Mughal - 07811504164)

4. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE

The following referrals have been made to this Committee up to and including the date of publication of this agenda.

The Committee is asked to note the referrals listed above and decide how it wishes to proceed, for example by incorporating the item into the work programme, requesting that it be subject to more detailed examination, or refer it to an appropriate Working Group/Committee.

B. OVERVIEW AND SCRUTINY ACTIVITIES

5. QUALITY ASSURANCE AND AUDIT IN CHILDREN'S SOCIAL CARE 1 - 10

The Director of Children's Services submit a report (**Document "N"**) which provides an update regarding the quality assurance and audit process in Children's Services.

Recommended –

That next steps are endorsed to continue to support practice improvement.

(Amandip Johal - 07773 248040)

6. SEND SERVICES - PROGRESS AGAINST THE WRITTEN STATEMENT OF ACTION (WSOA) 11 - 30

The Director of Children's Services presents a report (**Document "O"**) which provides an update on the progress towards the WSOA that followed the March 2002 SEND Area Inspection.

Recommended -

That the report be noted.

(Niall Devlin - (01274) 431356)

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Report of the Strategic Director of Children's Services to the meeting of Overview and Scrutiny Committee to be held on Wednesday 18 January 2023

N

Subject:

Quality Assurance and Audit in Children's Social Care

Summary statement:

This report provides an update regarding the quality assurance and audit process in Children's Services.

EQUALITY & DIVERSITY:

There is no direct impact in terms of equality and diversity from this report.

Amandip Johal
Assistant Director
Safeguarding and Reviewing,
Commissioning and Provider Services

Portfolio:

Children & Families

Report Contact: Amandip Johal
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E-mail: amandip.johal@bradford.gov.uk

Overview & Scrutiny Area:

Children's Services

1. SUMMARY

This report provides an overview of the audit findings relating the quality of social work practice, focusing on the actions being taken to address practice that is requiring improvement or inadequate.

2. BACKGROUND

2.1 Auditing Arrangements

Case file auditing continues to be an essential part of our quality assurance arrangements. Regular and in-depth case file audits are a meaningful and useful method for understanding the experiences of our children and young people whilst examining practice against agreed Practice Standards, guidance, policy, and procedures.

We have introduced a bespoke audit and supervision database which enables learning from the audits to be communicated directly to the practitioner and manager. This allows audit actions to be tracked and specific training and support to be identified for individuals. Monthly audits are thematic focusing on a different cohort of children and young people.

Auditing generates themes and learning which are analysed to make recommendations for organisational practice improvement/development. Auditing is also used in service to identify case management issues for individual children. Feedback from auditing also provides information to identify learning needs and commission appropriate training and develop a learning culture by providing staff with an opportunity for in-depth reflection on their work.

The audit process is underpinned by a coaching model, with audits being completed alongside practitioners to provide them with an opportunity to reflect on their practice and develop professional competencies to improve their work. Training and guidance is provided to all managers and practice supervisors involved in auditing so as to ensure consistency in our auditing approach. A sample of completed audits are moderated each month at moderation panel to ensure quality and consistency in the auditing process. The moderation process allows the QA & Audit Team to monitor the grading quality of all audits, whilst providing in-depth support for auditors to develop their confidence.

2.2 Audit Outcomes

Early in the year, a decision was taken to step down team managers and practice supervisors from completing this monthly audits due to staffing challenges and capacity. It was agreed that the team manager and practice supervisors needed to focus on ensuring that service delivery was prioritised. This has limited the number of audits completed on a monthly basis. Auditing arrangements resumed with all managers and practice supervisors being part of the monthly programme from September 2022.

The findings of our own audit activity mirrors the outcomes from our various Ofsted monitoring visits in that there is evidence of some good practice identified but that this is not consistent across the service. Key areas for continued improvement identified by audits include the quality of assessments, quality of children's plans, impact of drift and delay (due to changes in the workforce) and quality of supervision.

Audits have confirmed that changes in social worker can impact the quality and in particular the timeliness of intervention. The stability of the workforce is a high-focus area for children's social care and in particular the recruitment of experienced social workers. This is a challenge for all Local Authorities given the number of experienced workers who move into management or specialist posts, or who choose to work for an employment agency. These workers are in short supply and there is a great deal of regional competition. Nonetheless we have introduced new initiatives to further stabilise our workforce including the ASYE academy and international recruitment alongside working with employment agencies to secure permanent rather than agency staff.

Audits graded as Inadequate are reviewed further by the Quality Assurance Team to ensure that identified actions have been completed to address any gaps or issues to improve the quality of service delivery being provided to our children and families.

Individual outcomes are reviewed and discussed in supervision to ensure that there is a reflective discussion regarding the learning and themes to help identify training of specific one to one support.

To further support practice development and to understand the quality of practice across the district independent auditors were commissioned to completed identified pieces of work to support the improvement work to improve the quality of practice. Ingson are experienced care consultants with backgrounds in the children social care environment as practitioners and managers. Ingson have worked with a variety of Local Authorities and work with the Department for Education.

The focus of the work involved 6 areas of improvement work as summarised below:

2.2.1 Area One: Practice Regarding Child in Need (CiN) and Child Protection (CP) Planning in the Keighley and Shipley Locality

In this piece of work, Ingson evaluated:

- (i) thresholds for CiN or CP planning both at the beginning of the plan and at the current time;
- (ii) the current planning format and to extent to which this facilitated clear, logical, simple and effective planning;
- (iii) current practice in terms of the focus and coherence with which plans are written and the frequency of plan review and revision.

In total 100 plans were reviewed: 50 CiN plans and 50 CP plans.

This work identified strengths in current CiN and CP planning practice, such as the initial threshold decision for both CiN and CP plans. Areas for improvement highlighted that CiN plans in particular tended to drift and to stay open for longer than necessary. A further major finding was that planning formats needed to change and become simpler and more child focused.

The learning from this area of work took place in Summer 2022 with Ingson facilitating workshops on CiN and CP planning practice using the revised and simplified formats. These were rolled out to all areas in Bradford and have been positively received and successful.

2.2.2 Area Two: A Review of 15 Case Closures/Step-downs in the Child and Family Teams in the Keighley and Shipley Locality

In this area of work, Ingson was asked to form an opinion on whether the most recent closure to social care, or step-down to early help services, was justified or not. Ingson identified that closure was justified for 12 children (80%) and not justified for 3 children (20%).

Ingson concluded that the issues identified for the three children was two-fold and linked. Firstly, it was felt that the necessary work had not been completed and/or that improvements noted had not been sustained for a sufficient period. Secondly, the quality of the CiN planning for these children were insufficient and contained for example ‘ongoing’ timescales which are prone to drift, and actions which were sometimes just a list of tasks for a parent. The learning from this piece of work was included in the workshops that took place during the Summer as highlighted above.

2.2.3 Area Three: An Analysis of 25 Re-Referrals

For this evaluation, Ingson were requested to consider the following matters and associated findings are also given in the table:

Is the most recent referral for the same (or a similar) issue as the previous referral(s)?	Could the front door have completed further checks to prevent the re-referral? Specify briefly.	Is the incident that has led to the re-referral at the threshold for an assessment? Comment briefly	Was the case closed or NFAAd too early after the previous referral?	Could have the re-referral have been prevented? Specify briefly.
Yes – 15 (60%) No – 6 (24%) Partially – 4 (16%)	Yes – 1 (4%) No – 24 (96%)	Yes – 24 (96%) No – 1 (4%)	Yes – 16 (64%) No – 9 (36%)	Yes – 13 (52%) No – 12 (48%)

The recommendations pertained mainly to two related issues on the right of the table, e.g. too-early closure of cases after the previous referral and whether the most recent referral could possibly have been prevented.

Ingson highlighted particular emphasis to the risk of adult focus practice and of closing matters too early resulting in the issues of concern not been fully dealt with

at the time of closure. This often led to a quick re-referral for similar issues. It was also recommended that social workers should be more tenacious and persistent in 'negotiating' consent from parents.

These areas of learning have been addressed in the David Thorpe Model which has now been introduced at the Integrated Front Door. The new model has promoted a clear and transparent discussion with referring agencies and practitioners to have informed consent as part of the referral making process by holding conversations to get authentic agreement to promote a positive starting position which is more engaging and respectful. Where the Integrated Front Door do not have consent, we record a clear defensible decision on the child's record. We also take an open and honest approach when talking to parents about checks, who, why and parents have a bit more control

2.2.4 Area Four: A Review of 10 Matters Involving Criminal Exploitation (CE)

Review completed to:

- (i) look at the identification of issues of exploitation at the contact and referral stage;
- (ii) to comment on the quality of the actions or planning agreed at the risk assessment meeting (RAM);
- (iii) to evaluate whether these actions had been obviously carried out;
- (iv) to offer a view on the actions in the overarching care plan for the child or young person, particularly in terms of any actions involving CE.

Findings in relation to these areas of enquiry were:

- (i) CE concerns of various kinds were usually noted at the initial contact and referral stage. It was clear from the manager's decision that these concerns identified and highlighted for further action.
- (ii) The actions agreed at the RAM meeting evidenced that meetings had generally been held promptly, but that the meeting notes were long, difficult to follow and lacked a clear narrative. Actions were of mixed quality and there was a pressing need for a simple and clear electronic template to be designed to improve the recording of RAMs and associated actions. This learning was used to design the new forms that have now been embedded into LCS to support with following through on agreed actions in a more consistent approach.
- (iii) Following through on agreed actions in a more consistent approach.
- (iv) There was little connectivity between the issues and actions identified in (a) CE risk assessments and RAMs and (b) the content of the overarching CiN or CP plan for the child. It was therefore recommended that actions regarding any CE issue identified should be included in all CiN or CP plans. There is work underway to streamline this in the case management system and practice.

2.2.5 Area Five: A review of the quality of current practice in Bradford's Care Leavers service.

This area of review concerned the quality of current practice in Bradford's Care Leavers' service. Specifically, focusing on:

- (i) to evaluate the quality of pathway planning and its effectiveness. This area included scrutiny of the format of the current pathway plan and whether any modifications should be made;
- (ii) the presence of the views of young people on casefiles and to their involvement in the pathway planning process;
- (iii) comment on the presence and quality of recorded staff supervision on casefiles to evaluate its effectiveness in ensuring that practice was purposeful and directed towards plan activities and outcomes.

This review evidenced that practice in the Care Leavers' service was generally good and that many young people were receiving a very good service with their own views and voices being recorded well. To improve practice, it was recommended that:

- (i) all pathway plans should be updated to the new format which would lead to improved quality in planning;
- (ii) that greater specificity and clarity should be used in setting planning actions;
- (iii) that supervision recording needed to improve to ensure greater consistency of management direction and oversight;
- (iv) expectations about reflection in supervision should be clarified.

The learning from this review was incorporated into the overall service improvement plan for care leavers which was evidenced in the July 2022 monitoring visit.

2.2.6 Area Six: Practice Evaluation and Management Development Programme

Ingson led and co-facilitated this programme which has been running from July 2022 with eight social work teams across Bradford and a further cohort of six teams has also started the programme very recently. The aim of the programme is to evaluate, celebrate and improve the quality of social work practice across Bradford Children's Services. The programme is guided by the following principles:

- Complete **clarity** about expected standards including testing on a continuous basis whether those standards are being met
- The use of a **systemic approach** that both recognises good practice and identifies and challenges poor practice
- Use of **transparency**, being clear about how teams are doing against the agreed standards so that the whole Department can see progress (or the lack of it)
- **Recognition** of those individuals and teams who are achieving agreed standards consistently; and using the learning from success to assist teams and individuals who are struggling to meet the agreed standards
- Doing **with** and not **unto**

The programme concentrates on the **basics of practice** which are:

- (1) The quality of Child and Family Assessments.
- (2) The quality of Child Protection Enquiries.
- (3) The quality of CiN and CP Plans.
- (4) The Quality of Staff Supervision.
- (5) The Quality of Visits to Children.

Ingson work intensively in a close mentoring relationship with individual team managers to assist them to improve the quality of practice in these areas. This occurs in a series of repeated reviews or rounds – 4 in all – which occur at approximately 8-weekly intervals. In addition to this, performance data is gathered on a range of indicators, e.g. assessments, visits and supervision discussions in timescale. The evaluations of the quality of practice and the performance data evaluations then make up one combined scorecard and overall grading.

This programme, while demanding and exacting, has been extremely well received. The tables below provide in an anonymised form, a summary of progress concerning two of the original teams which have been a part of this programme.

Round	Team 1	Comments
1	INADEQUATE	Practice was particularly poor and performance data was poor
2	INADEQUATE	Evidence of practice improvement. Performance data stayed the same
3	REQUIRES IMPROVEMENT	Evidence of improvement in both practice and in performance data.
4	January 2023	

Round	Team 6	Comments
1	INADEQUATE	Practice mixed. Performance data poor
2	REQUIRES IMPROVEMENT	Practice remains stable. Performance data has improved
3	REQUIRES IMPROVEMENT	Practice remains stable. The performance data improvement from Round 2 has been sustained.
4	January 2023	

2.3 **Next Steps**

For the Ingson work to complete, with good practice being shared to improve practice improvement, with learning being threaded through individual plans, training plans and system improvement.

To continue to strengthen the quality assurance arrangements with the QA team implementing a long term arrangement to implement a practice evaluation programme throughout all services including Early Help and Fostering.

The Quality Assurance Team to support consistency in thresholds through training and reflective discussions with managers and practice supervisors to ensure that we all have a shared understanding of what good looks like. This will include bench marking activity with managers.

Continue to drive recruitment to achieve stability in the workforce which is contributing to the learning that is consistently evident in the audit reporting.

3. **OTHER CONSIDERATIONS**

3.1 None.

4. **FINANCIAL & RESOURCE APPRAISAL**

4.1 None.

5. **RISK MANAGEMENT AND GOVERNANCE ISSUES**

5.1 None.

6. **LEGAL APPRAISAL**

6.1 Effective quality assurance and audit processes support the Local Authority to comply with its statutory duties, including under the Children Act 1989, regarding the protection and welfare of children and young people.

7. **OTHER IMPLICATIONS**

7.1 **SUSTAINABILITY IMPLICATIONS**

Not applicable.

7.2 **GREENHOUSE GAS EMISSIONS IMPACTS**

Not applicable.

7.3 **COMMUNITY SAFETY IMPLICATIONS**

Not applicable.

7.4 HUMAN RIGHTS ACT

Not applicable.

7.5 TRADE UNION

Not applicable.

7.6 WARD IMPLICATIONS

Not applicable.

7.7 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

Improving practice will improve service delivery for all children and young people.

7.8 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

Not applicable.

8. NOT FOR PUBLICATION DOCUMENTS

8.1 Not applicable.

9. OPTIONS

9.1 Not applicable.

10. RECOMMENDATIONS

10.1 That next steps are endorsed to continue to support practice improvement.

11. APPENDICES

11.1 None.

12. BACKGROUND DOCUMENTS

12.1 None.

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Report of the Director of Children's Services to the meeting of Overview and Scrutiny Committee to be held on Wednesday 18 January 2023

O

Subject:

SEND Services - Progress Against the Written Statement of Action (WSOA)

Summary statement:

This paper provides an update on the progress towards the WSOA that followed the March 2002 SEND Area Inspection

EQUALITY & DIVERSITY:

The WSOA is intended to ensure that all the education and health services better understand our communities. Through co-production we will actively engage with our communities to help people participate in decision-making processes, to improve the services we provide and to enable more people to take part in the life in the District.

The actions in the WSOA aim to design, commission and deliver services that are accessible, inclusive and responsive to the needs of people and communities. The communication strategy will provide information about services in a range of accessible formats so that people know what services are available to support them and how to access them.

Marium Haque
Strategic Director of Children's Services

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Portfolio:

Children & Families

Overview & Scrutiny Area:

Children Services

1. SUMMARY

1.1 In March 2022, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Bradford to judge the effectiveness of the district in implementing the disability and special education needs reforms as set out in the Children and Families Act 2014. On 8th June 2022 the inspection report for Bradford district was published. In accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015; His Majesty's Chief Inspector (HMCI) has determined that a Written Statement of Action (WSOA) is required because of five areas of significant weakness in the local area's practice. On the 21st of October 2022, Ofsted agreed that the proposed Written Statement of Action was sufficient. The first monitoring visit was on the 6th of January 2023.

2. BACKGROUND

2.1 Following Local Area SEND Inspection, the WSOA explains how we plan to improve the following areas of significant weakness:

- Poor communication between stakeholders across education, health and care.
- The variable quality of EHC plans, including plans which do not fully describe the provision that children and young people with SEND need.
- The inconsistent delivery of the 0 to 19 health visiting, school nursing and specialist nursing services.
- Children and young people wait too long for assessments, treatment and diagnosis. There is insufficient support for children and young people with SEND who are waiting for provision, services, diagnosis or equipment.
- Education, health and care services do not work together well. The arrangements for joint commissioning are underdeveloped.

2.2 The report will provide a high-level overview of progress within each of the 5 areas for improvement.

2.3 **Poor communication between stakeholders across education, health and care.**

2.3.1 **Progress on key actions**

Core work is now underway to deliver the activities to improved communication between partners but specifically to improve the relationship with parent/carers and schools.

Key partners have been approached to support the wider development of the local area charter that support families in understanding the support they will receive from local services. This has included:

- Aware and Barnardos our SEND Information, Advice & Support Service (SENDIASS) provider are being tasked to discuss the areas that matter most to them with core areas of interest to then shape the new charter arrangements.
- The CDC have been approached to review the letters we use to ensure they are family friendly and not overly legalistic in nature and are more inclusive.
- Parent and Carer groups have now agreed the new parent and stakeholder survey, which has been sent to parents for 2022/2023. This will be now benchmarked and work towards listening and supporting parents thorough “you say we do” activities are now embedded in the co-production and engagement workstream. Survey in master pack as attachment.

Engagement events are being held with schools in relation to the sufficiency of specialist places to ensure greater awareness and input into school place planning processes. This will include:

- Engagement works with schools has been ongoing throughout the late spring and early summer to support this work in more detail. Ilkley Grammar, Beckfoot, Beechcliffe and Dixon’s academy are all working with the co-production lead to draft the model of pupil engagement that will be trialled through the 2022/2023 academic year.
- A report on the preferred model and the trial is due to be shared at the SEND Strategic Partnership Board (SSPB) before end December 2022 to help understand how this will work.
- New job role profile for Young People’s engagement completed.

We have been working to redefine our governance arrangements following our SEND Inspection and a new model of governance has been agreed. Specifically, we have taken the following actions to improve engagement and participation with colleagues and members:

- Divest Local Authority chairing of meetings to partners where this is the most appropriate to do so to create a distributed leadership model. This is taking place in the Preparation for Adulthood meetings for example as the chair of a local care group has expressed an interest to start chairing this meeting from January 2023.
- Four new Headteachers have been approached to join existing workstreams and to take on deputy chair roles in the Integrate Assessment and PFA meetings.

A full data audit of the Local Offer has been completed, which identified all key areas of improvement. All 400 services that are provided as a direct link from the Local Offer, have been checked and appropriate action has been taken to correct broken links and other errors and a record has been made of the action undertaken.

Less than 5% of services required remedial action and 0.5% of services were archived. A group is currently being set up to quality assure a representative sample of Local Offer services on a regular and ongoing basis throughout 2022/23. General improvement of quality and usability of approximately 50% of the services on the Local Offer has been achieved, although it is appreciated that ongoing activities will continue to present challenges as we now review service content.

2.3.2 Key Next Steps

- Collation of key areas required for a new Families Charter - to provide draft during December 2022.
- Publication of draft Families Charter before the end of 2022.
- First engagement events in December 2022 for school place programmes and development.
- Draft Participation and Engagement model to be shared during December 2022 for comment following co-production work in schools.
- New external Chair of PFA Group to be in place.
- Establishment of the Quality Assurance Group for the Local Offer and Terms of Reference for its activities.
- Work with named content managers to assist them in reviewing and updating their service on the Local Offer where appropriate.
- Local Offer Project Board established and will oversee the delivery of the improved quality and new website.

2.4 The variable quality of EHC plans, including plans which do not fully describe the provision that children and young people with SEND need

2.4.1 Progress on key actions

Work to recruit to the substantial increasing of SEND Services is now underway, following successful staffing and trade union consultations over the summer period.

Staff who are affected by the proposals are now going through the process of assimilation and this work will be complete before end of December 2022.

With such a substantial increase of 100% of staff across the structures, it may take considerable time to recruit 8 Annual Reviewing Officers, 5 Complex and Vulnerable Case workers and a manager, 2 x SEND Auditors, 2 additional SEN Case Officers, a Complaints Coordinator, a Tribunals officer and a new SEND Marketplace lead and a Co-production lead. We are however hoping to have these posts in place throughout February and March 2023 respectively.

Work with partner agencies to ensure we improve the meaningful and accurate contribution of health and social care to EHC Plans is underway. With particular concern to the area raised by Ofsted relating to Social Care. The DSCO role and additional social care assessors have been designed and approved within the new structures to be taken on within the new Social Care Trust. These roles will be in place by April 2023.

To ensure that the PFA Outcomes are stated in all EHC Plans from Year 9 will rely on the staffing recruitment across the team to the new roles. Alongside the Annual reviewing officer posts, we are also adding additional SEN Caseworkers and these posts are also out to advert.

In addition, the SEND Auditor posts will help us to independently track that this taking place in line with our QA Framework that was agreed by SSPB earlier this year.

Reporting on this area will come on line more fully in early 2023 as part of our Vital Signs reporting that will link with our governance arrangements. The SEND Auditing arrangements are key for the Local Area to help improve this area over the next 2 years. The development of a SEND QA framework working with our SLI partner Warrington is key to our improvement journey to ensure that relevant stages within EHC plans show the lived experience of a child and are relevant to their age and what statutory school age they are.

The new QA Framework has now been approved by the SEND Strategic Partnership Board and will support the new SEND Auditors roles that are currently being recruited to.

2.4.2 Evidence of impact

The recruitment to the roles allocated in this area is critical to ensuring that the overall quality of EHC Plans rises over the next three years. Our Vital Signs document will help provide granular evidence of improvements to which further work and concentration is required.

The additional £1.7m investment across services will be a catalyst to provide greater focus on our work given the substantial increase in EHC Plans that have been issued in Bradford over the past three years.

Throughout 2023, we will publish our progress towards meeting these indicators and outcomes, and a further update will be provided in the Spring once the recruitment has been carried out.

2.4.3 Key next steps

- Recruitment to Annual Reviewing Officer Team.
- Recruitment to additional SEN Caseworker roles.
- Recruitment to DSCO role and assessor's role working with new Social Care Trust leaders.
- Recruitment to SEND Auditor Roles.

- Completion of Assimilation processes for existing staff effected by the restructure.
- Recruitment of Other roles listed in restructure relating to SEND Marketplace and young people's participation.
- Embedding of QA Framework across Local Area in line with recruitment to roles.

2.5 **The inconsistent delivery of the 0 to 19 health visiting, school nursing and specialist nursing services.**

2.5.1 **Progress on key actions**

- *BDCFT to implement plans to establish new teams and ways of working within the Health Visiting service which streamline services and improve the proportion of women receiving routine antenatal contacts.*

Key targets:

- September 2022 35% uptake;
- December 2022 40% uptake.

Delivery:

- In quarter 2 (September) of 2022/23, 25.7% of mothers received a first face to face antenatal contact with a SCPHN at 28 weeks pregnant or above and before they give birth. This has fallen compared to financial year 2021/22 and a robust remediation plan is in place to increase the proportion of mothers receiving antenatal visits. As a result of these plans, BDCFT are forecasting an improvement to this metric, becoming back on track for quarter 3 (to December 2022).

- *BDCFT to implement their plan to establish new teams and ways of working within the Health Visiting service which streamline services and improve the proportion of children receiving the routine 2-2½ year check/ASQ.*

Key targets:

- September 2022, 90% of children receive a 2-year check with ASQ3 assessment by age 30 months;
- December 2022, 92% of children receive a 2-year check with ASQ3 assessment by age 30 months.

Delivery:

- In Quarter 2 of 2022/23, 81.5% of eligible children received the 2-2½ year check by the age of 30 months.
- Of those children who received a 2-2½ year health review by the age of 30 months, 90.7% were assessed using ASQ3.
- This has increased significantly over the past 12 months due to changes to ways of working and improved skills mix within teams.

- *Key stakeholders review and develop core and specialist pathways between 0-19 and Specialist services to ensure seamless and consistent processes for CYP and families.*
 - BDCFT are working on plans to develop pathways on a number of areas in mainstream school nursing and health visiting services. These pathways will enable a consistent offer within the service, ensuring that children and young people receive the same early support, and that referral to specialist service is done in a consistent manner across the District.
 - BDCFT are undertaking a questionnaire for young people in schools who are aged 16 plus. This will help to identify issues that are important to this age group. Partners are meeting regularly to discuss pathway identification and development and to agree next steps.
- *BDCFT to deliver audiology screening at school entry so that hearing impairment is identified and addressed early.*

Key targets:

- December 2022 40% of reception children screened for AI.

Delivery:

- Screening for hearing impairment was critically impacted by covid-19. Since the Service was able to return to schools, a new screening team has been set up to focus on HI screening and measurement for the NCMP programme. By the end of the academic year 2021/22, 85.4% of reception children had been screened.
- Screening of the new reception cohort has now begun for 2022/23.
- *Develop and implement a consistent, effective vision screening pathway for children on school entry:*
 - Vision screening for children at school entry is delivered in Bradford by the orthoptists team within Bradford District Teaching Hospitals Foundation Trust (BTHFT). This service has been in place for many years, and currently offers screening to all eligible children presenting in a school setting. Over the last few months, partners have been working to improve the connections and pathways between this service and the Health Visiting and School Nursing Service provided by Bradford District Care Foundation Trust (BDCFT).
 - Plans are now being developed for greater sharing of information and closer working relationships between the two organisations. This will ensure that learning can be shared between teams, and that information on uptake of services can be shared.
 - Uptake of vision screening in schools is currently very high, with 93% of eligible children in reception classes receiving screening in the academic year 2021/22.
 - Delivery of vision screening for the 2022/23 cohort of Reception-aged children is currently on track to reach 93% uptake.

- *Key stakeholders review and enhance the current training offer to schools, parents and carers and other professionals/services to ensure that health needs of CYP are met consistently and that access to training doesn't delay access to care and/or support.*

Key target:

- December 2022 training audit to identify priority areas.

Delivery:

- Building on work to clarify the service offer for short break units, providers have been asked to identify any other current service offer in terms of training provision for schools, parents and carers and other professionals/services to inform the training audit.
- Next steps will be to work with key stakeholders to identify gaps in current service provision, prioritise service gaps to be addressed and consider opportunities for enhancing the service offer.
- *Ensure that practitioners within family hubs and the in-development Start for Life model have training to ensure that children's SEND needs are consistently identified and responded to early in these settings.*

Key target:

- December 2022 SEND training offer for family hub staff developed.

Delivery:

- Plans are in place to train 165 staff from Prevention & Early Help in Cygnet Practitioner Understanding Autism (Level 1). This will include all parenting workers, Family Support workers, EHCs, Access Take Up permanent staff, BSOs, managers & coordinators. In addition, 20 practitioners from CCHDT service will also be trained.
- The trainer is in the process of organising dates & times, once this is confirmed we will supply a timetable with training delivery details.
- FLNP with top up off FLNP additional needs will be delivered to approximately 85 staff. This will include all Family Support workers from the family hubs & all staff from family time. Dates for this training to be arranged. Planning for delivering of this training to be provided to staff between Jan – April 2023.
- In addition, lead practitioner training on identifying and providing early help and multiagency support to families and children with additional needs has been provided to school and community staff as per the table below. This training incorporates capturing the voice of children including Children with SEN to:
 - Specialist school nurse 6 SEND
 - Portage 2 SENCO 10

- Outreach team for Deaf Children 3
- Health visitors 50
- *Develop and implement plans for family hubs and the Start for Life programme which co-locate a wide range of services, so that babies, children, young people and families have access to practitioners through family hubs who can identify and respond to additional needs.*

Key targets:

- December 2022 Start for life plan includes colocation of a wide range of partners and services including the 0-19 service.

Delivery:

- Progress towards the expansion of family hubs to deliver the Start for Life model has been underway for a number of months. Joint Programme Team (JPT), Programme and Practice Leads are in place.
- The JPT meets regularly and successfully submitted sign up and trailblazer app in timescale. Sign up to the Start for Life programme has been confirmed and the MoU returned to the DfE.
- JPT are currently actively working on draft delivery plan, which is due for completion at the end of December 2022 (draft to follow).
- Prevention and Early Help Board oversees the progress and four multi-agency sub groups are in the process of being convened. Plans include colocation and Parent and Carer engagement in Hubs.

2.5.3 Evidence of impact

- Antenatal advice and activity has gradually increased over the past few months, indicating that the quality of antenatal assessments is increasing, and suggesting that the women most in need of support are receiving it.
- More parents will be receiving an AN visit as per improvement trajectory.
- 2 year check with ASQ 3 will increase as per trajectory.
- AI screening will be delivered as per academic year plan by the screening team.
- Training from Specialist SEND Nurses will commence both across our Services as well as the Hub network.
- Greater presence of Public Health Nursing staff within the Family Hub network will aid closer working, learning and development and easier access for families.

2.5.4 Key next steps

- Continue to deliver improvement plan for antenatal reviews.
- Continue work on 2 to 2½ year health visitor reviews.
- Progress with pathways identified for priority development.
- Proceed with audiology screening for current reception-aged children.
- Continue to deliver vision screening and build on links between teams.

- Work with key stakeholders to identify gaps in current training service provision, prioritise service gaps to be addressed and consider opportunities for enhancing the service offer.
- Start for Life – confirm training delivery timetable.
- Start for Life – finalise delivery plan by end December 2022.

2.6 **Children and young people wait too long for assessments, treatment and diagnosis. There is insufficient support for children and young people with SEND who are waiting for provision, services, diagnosis or equipment.**

2.6.1 **ASD/ADHD**

- Current service pathway is mapped, and all key stakeholders are aware of current service offer by March 2023.
- Referral criteria is reviewed and signed off and is shared with key stakeholders including children, young people and families by March 2023.
- Self-help, Universal and Early Help pathway is agreed by March 2023.
- Evidence of the delivery of the support pathway for Autism / ADHD from self-help, universal offer and early help services by September 2023.

Following the review of the clinical model which was undertaken to inform the business case for new funding in 2021, there has been a period of continuous review and refinement to address inequalities in access.

- We have opened the referral pathway to allow direct access from educational settings to address issues highlighted by colleagues about the difficulties they faced in making referrals.
- We have reviewed the current service offer in terms of signposting information provided to families and have ensured that all families are provided with relevant information as children enter the waiting list.
- The CAMHS team have recently been successful in their bid for an iCare Innovation Award to create and develop a website that aims to promote knowledge, awareness and understanding of neurodevelopmental disorders such as Autism and ADHD, and provide access to quality, evidence-based support and guidance. This will be aimed at parents, schools and young people in order for them to be able to create a mentally healthy environment, especially in the period of time between referral acceptance and the initial appointment.
- The acuity and complexity of children that presented for autism has significantly increased. We are now being presented with increasing numbers of dual diagnosis requests for ADHD and autism.

2.6.2 **CAMHS**

- Improvement plan agreed and commenced and progress ongoing.
- Service offer mapping commenced.
- CAMHS welcome book produced by C&YP for CYP accepted into CAMHS. Sharing to system in January 2023.
- Progress ongoing Inclusion criteria written in a Standard operating procedure

and model to be shared at system meeting 28/11/2022.

- By March 2023 signposting Information will be available for CYP/Parent Carers about the support that is available while CYP are waiting for commencement of CAMHS assessment and treatment.
- Thrive workshops held for stakeholders and evaluation is positive to support embedding of the approach for CYP MH.
- Rapid Improvement Week booked for the 2nd week in January 2023 which process involves CAMHS and support services and will review templates for care plans in CAMHS and personalised care and parental wishes.
- A CAMHS wide notes audit taking place, including Care Plans.

2.6.3 Speech & Language (SLT)

- Performance on track to meet March 2023 target improvement in wait times to 61.6% seen within 18 weeks of referral in Sept 22.
- SLT referral criteria and new website launched in October 2022.
- Beginning stakeholder engagement to set up SLCN pathway work and identify key group members.

2.6.4 Wheelchair and Specialist Equipment

- We are on track with actions to improve timeliness of provision of wheelchairs and specialist equipment. However, measurement of these two aspects is different due to pathway and data collection source. Two different providers of wheelchair services are held locally.
- Data from wheelchair services show we are already ahead of our local improvement target but not yet reaching the national target.
- We will monitor data and plan for continued improvement, focusing on understanding the issues that impact those C&YP not receiving timely provision.
- Our providers of therapy services to assess children for specialist equipment, are in discussions to develop a plan to support data capture and reporting along the multiple points of the specialist equipment pathway.
- The delivery of specialist equipment by the specialist equipment service is on track to target and also reports challenges to equipment supply due to worldwide shortage and reliance on material from abroad. The local Bradford equipment service is working with suppliers to develop stock item agreement and thus reduce and avoid mainstream specialist equipment issues.

2.6.5 Dynamic Support Register

- Referral forms and protocol for CYP with Learning Disability and Neurodiverse conditions (LD/ND) have been circulated for final comments to key stakeholders. The first Dynamic Support Register Panel is due to take place on 29th November 2022. The meetings will meet fortnightly.
- DSR data collection, reports and outcomes will be available from March 2023.
- Once the LD/ND part of the Dynamic Support approach is embedded, work will commence to develop the MH/SEMH part of the Dynamic Support Approach in 2023.

2.6.6 Annual Health Checks for CYP aged 14-25

- Work is progressing to map the current Annual Review pathway; key stakeholders are involved in this work. The pathway is on track to be completed by March 2023.
- Uptake of AHC at individual Practice level is in place to enable awareness raising at Practice level if required. Exploring how coding improvement and associated tracking on SystemOne. Note: Tops Tips and Easy Read are with Comms for final sign off prior to circulating to CYP, families and professionals.

2.6.7 Initial Health Assessments/Review Health Assessments (IHA/RHA's)

- Full-service review was undertaken in 2019 and funding to enhance the service was secured. The new clinical model for delivery of IHAs was agreed by the system and implemented in April 2022.
- Paediatric and GP's with specialists' skills in IHA workforce resilience challenging due to retirements, resulting in capacity challenges.
- We are working with social care to ensure social worker understand the importance of children attending their IHA and emphasise that it would be best practice for them to attend with the child/young person.
- A remedial recovery plan is in place to achieve improvement plan IHAs.
- we are currently concerned about the impact of reduced clinical workforce to deliver IHAs on our ability to meet the 20-day target. Work is ongoing to recruit more GPwSI capacity to deliver IHAs.
- A review of the available capacity for IHAs within AFT and BTHFT is underway to ensure all funded capacity is being utilised.
- The availability of staffing to undertake RHAs remains challenging. A business case is currently in development to increase the Children Looked After (CLA) nursing team.
- BDCFT supported the service with just over 5WTE of non-recurrent funding - these have been converted to permanent posts.
- Review of caseload to meet demand is in process of review for recommended caseload to staff ratio.
- Weekly triage meetings are held between health and social care.
- Established relationship between the CLA Nursing team contact social workers to remind them that an IHA appointment has been made and to seek their support to ensure the child/young person attends.
- Concerns about delays in receipt of consent were raised at Systems Quality Committee and with Assistant Director in social care.

2.6.8 Evidence of impact

- The opening up of the pathway has resulted in the majority of referrals now being from education. Whilst this increase in referrals creates additional resource pressure on our health and care system, we welcome this as it shows that colleagues understand and recognise the signs of neurodiversity.
- Informal positive feedback received e.g., at the SLCN stakeholder pathway event.

- Providers across both pathways are working together for system wheelchair and equipment improvements e.g., Agreement on equipment stock items aligned with need; Improving timeframes achieved in specialist equipment Delivery Hit-Rate – percentage of deliveries made within 10 days’ target* (taken from BACES Board performance report (November 2022)).

2.6.9 Key next steps

- A focused children’s partnership event – Building the Children, Young People & Family Priority was held on 1st December 2022. This had over a 100 key stakeholders and leaders supporting the event to review the current provision for children across health/partnerships. This was an exciting event and will facilitate and enable further partnership engagement and communication, and agreement for new ways of working in and across our partnership to achieve the vision for children in Bradford District and Craven. The improvement to SEND provision is an underpinning thread for this event.
- ASD service offer and referral pathways are promoted accurately on the Local Offer and Bradford Schools Online. Partnership communications and engagement leads to consider how best to promote ASD information.
- Review of the current signposting offer to ensure consistency across local NHS provision and commissioned external/independent providers with the relevant information to share with families.
- Using the Thrive framework to overlay and map service and support offer across self-help, universal, early intervention, and specialist services, and identify priority areas for the development of an increased support offer, linking into commissioning plans.
- Continued communication of SLT referral criteria.
- SLT partnership steering group formation - join existing, re launched pathway steering group, cross partnership plan.
- Development of monitoring data to support identification of challenges to provision.
- Workforce capacity vs demand modelling, plan for agreement of standardised equipment use (stock items), systems and communication.
- Co-production of appropriate C&YP/parent carer information and guidance on specialist equipment provision tailored to local needs (e.g. Bradford/ Airedale populations).
- Further refinement and alignment of wheelchair pathway across the partnership.
- DSR draft terms of reference and referral template to be approved at the first

panel meeting on 29 November 2023/Children's Board.

- Raise Awareness of Annual Health Checks, particularly linked to EHCP Annual Reviews with key stakeholders including CYP/Parent Carers Development of 'Easy read' leaflets to raise awareness and explain what happens at an Annual Health Check.

2.7 Education, health and care services do not work together well. The arrangements for joint commissioning are underdeveloped.

2.7.1 Progress on key actions

- The Strategic Partnering Agreement (SPA) document has been reviewed and updated to reflect our ambition for working together in Bradford. The SEND Joint Commissioning Workstream has been established and had its first meeting on 30 November. Evidence of impact 1).
- Updated SPA document and SPA Governance Handbook.
- SPA principles will be shared widely with key stakeholders to raise awareness and embed the understanding within the partnership about how we work together in Bradford to improve outcomes for children with SEND. SPA principles will be added to the Local Offer website.
- Work with children, young people and families in Bradford to raise awareness of the SPA principles and enable them to influence the development of service. Identify key education health and care partners for further engagement. Develop the slide deck outlining the key principles which will be widely promoted across key partnerships and board in Bradford.
- Recruitment of the Head of Strategic Commissioning and the recently established People Commissioning Service, brings new leadership capacity to develop and strengthen our capacity for integrated commissioning between the local authority and the NHS.
- Consult with AD SEND and Inclusion to ensure good link to education partners.
- To strengthen SEND joint commissioning governance structures to ensure strong accountability, effective progress tracking and timely problem solving by March 2023.

2.7.2 Key next steps

- The SEND Joint Commissioning Workstream was established in Nov 2022. This new governance structure will be used to manage joint commissioning arrangements and support the progress of this action towards its March 2023 delivery milestone.
- To support the development of a System Joint Commissioning Strategy which will align with the SEND specific Joint Commissioning Strategy 2020/23. The system Joint Commissioning Strategy will outline our principles for joint commissioning and our approach to decommissioning.

- By June 2023 The SEND Joint Commissioning Workstream has been established and will be used to develop the Joint Commissioning Strategy.
- To publish an updated JSNA for SEND Services to show the current needs for CYP with SEND across the Bradford District by April 2023.
- To develop mechanisms to ensure that our commissioning strategy and intentions are informed by clear assessment of need. This will include: The voice of CYP, The voice of parents/carers, Service gaps identified through the EHCP process By June 2023.
- A programme of SEND commissioning engagement and consultation will be developed through the work of the SEND Joint Commissioning Workstream.
- Informed by clear assessment of need. This will include: The voice of CYP, The voice of parents/carers, Service gaps identified through the EHCP process By June 2023.
- A programme of SEND commissioning engagement and consultation will be developed through the work of the SEND Joint Commissioning Workstream.
- Service gaps identified through the EHCP process By June 2023 Key next steps A programme of SEND commissioning engagement and consultation will be developed through the work of the SEND Joint Commissioning Workstream.
- Identify budgets aligned to SEND service provision to develop transparency and assurance in terms of spend across all areas by December 2023.
- Map SEND service provision and related budgets will be undertaken through the work of the SEND Joint Commissioning Workstream.
- Map jointly commissioned provision and aligned services. This will be used to undertake needs analysis to inform future commissioning intentions.
- A review of S75 agreements to be undertaken through the SEND Joint Commissioning workstream to ensure agreements reflect our intention regarding the management of system resources for SEND service.

2.7.3 Progress on key actions

- Dedicated capacity has been identified to coordinate and write the SEND JSNA - A draft outline has been circulated to the SEND working group for comment.
- Work has begun on collation and analysis of information.
- Time has been secured from the Warrington peer review team for review and feedback on the outline and (when ready) the draft JSNA.
- On track to publish SEND JSNA by April 2023.

3. **OTHER CONSIDERATIONS**

3.1 None.

4. **FINANCIAL & RESOURCE APPRAISAL**

4.1 The proposed 2023-23 Council budget includes additional budget to ensure the delivery of written statement of action.

5. **RISK MANAGEMENT AND GOVERNANCE ISSUES**

5.1 If there are no significant risks arising out of the implementation of the proposed recommendations it should be stated but only on advice of the Assistant Director Finance and Procurement and the City Solicitor.

6. **LEGAL APPRAISAL**

6.1 The Local Authority's duties and functions in respect of children and young people with special educational needs or disabilities (SEND) are contained in Part 3 of the Children and Families Act 2014; the Special Educational Needs and Disability Regulations 2014 and the statutory Code of Practice on Special Educational Needs and Disability 2015. The requirements are too detailed to set out in this report but if a Local Authority does not comply with its statutory duties and functions in respect of children with SEND, it is at risk of being challenged in the Courts and Tribunals or by the Local Government and Social Care Ombudsman.

Following a review of SEND services, under Regulation 3 of the Children Act 2004 (Joint Area Reviews) Regulations 2015, the Chief Inspector of Schools (Ofsted) must (having regard in particular to the nature of the review) determine whether it is appropriate for a written statement of proposed action (WSOA) to be made.

Under Regulation 4 of the Children Act 2004 (Joint Area Reviews) Regulations 2015, a written statement of proposed action (WSOA) must be sent to the Chief Inspector of Schools; any other person or body who conducted the review (to which the WSOA relates (in this case the Care Quality Commission) and the Secretary of State within 70 working days of receiving the joint area SEND inspection report.

The WSOA must state who it is proposed should take action and include a statement of the period within which the action is to be taken.

If a Local Area is making insufficient progress in addressing any of the areas of significant weakness identified by the Chief Inspector of Schools, the DfE will decide on the appropriate next steps. This may include the Secretary of State using their powers of intervention.

7.1 **OTHER IMPLICATIONS**

Not applicable.

7.2 **SUSTAINABILITY IMPLICATIONS**

Not applicable.

7.3 **GREENHOUSE GAS EMISSIONS IMPACTS**

Not applicable.

7.4 **COMMUNITY SAFETY IMPLICATIONS**

Not applicable.

7.5 **HUMAN RIGHTS ACT**

Not applicable.

7.6 **TRADE UNION**

Not applicable.

7.7 **WARD IMPLICATIONS**

Not applicable.

7.8 **IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE**

The WSOA is intended to make significant differences in how children, young people with SEND and their families interact with services and having their needs met. This will include:

- Families and professionals will have a published group of service level agreements so they know what and when they can expect updates on their case. This will clarify the timeframes for families and professionals about queries, applications and updates on matters relating to next steps which are clear. Professional letters will be more personal in providing core updates.
- Schools will be sighted on sufficiency plans so they understand what places are being built and when and to test through a survey to see if they are happy with the engagement and with the forward plan for places.
- Children and young people will have an opportunity to co-produce the services of the future and to be given more opportunities to be involved in the democratic and co-productive elements more widely of services that support them.
- The new Local Offer will not contain out of date information and acts as personalised resource to help parents, carers, professionals and young people find what they need easily about services.

- Families and schools receive up to date plans that clearly articulate any material changes to an EHC plan that set out the support and provisions that are reflective of a child's needs and demonstrate their lived experiences.
- Families receive plain English descriptions of the support they are going to receive from social care and health that is practical in nature and focuses on supporting any health conditions and social care needs a child may have. This helps to support families to understand how and where they can access services that support their child's health and social care needs.
- Preparation for Adulthood outcomes will be included as early as possible to support a child and young person meet their potential. That support and services are wrapped around these objectives in the plan to help a young person transition into the most suitable education, employment or training opportunities.
- EHC plans will have greater value and meaning to both parents and professionals due to a child's plan accurately reflecting their journey and what support they need moving forward. This will help inform the size and shape of services that are needed to meet sufficiency needs of children individually and as a whole.
- More families will consistently get an antenatal visit pre-birth to provide information, advice and guidance to prospective parents. Families with additional needs will also be identified early and supported and/ or referred to other appropriate services. Health visitors post-birth will continue to support parents and more 2 and half year-old checks will be completed on time, providing improved opportunities for the early identification of needs so that parents are supported sooner where needed. Families will have a better experience (feeling involved and cared for) when liaising with school nursing, specialist school nursing and other specialist services as consistent pathways will enable smooth transitions and closer working between different services.
- Children across the Bradford district will receive the hearing and vision screening checks when they are in the reception class. This will help to identify children who may have a hearing or visual impairment earlier in their childhood, providing greater opportunity to support these groups of children meet their potential.
- The specialist nursing services will provide training to a wide range of schools, services and parent/carers.
- Families who go to the newly re-launched family hubs are supported by a range of professionals and early help staff. All practitioners will have the skills to assess and support families appropriately and signpost where appropriate. They identify a range of potential additional needs in children and refer these to the most appropriate pathways in the Early Years stage before the children are of school age. Families' needs are identified early, and appropriate support will be offered. Family will report they have good support.

- Children and young people will have timely assessment for suspected autism/ADHD, which will help children and young people understand themselves better and will also help their parent carers, families and other key people such as school and health care staff understand them better too.
- Children and young people will have timely assessment for children and young people's mental health needs, which is important so that children and young people, their parent carers, families and other key people are aware of the emotional and mental health needs and difficulties that a child and young person may be experiencing.
- Children and young people will have timely assessment for children and young people's speech and language therapy, which is important so that children and young people, their parent carers, families and other key people such as schools are aware of the speech language and communication needs and difficulties that a child and young person may be experiencing.
- Children and Young People will receive the postural and mobility equipment that is needed in a timely way to maintain or optimise their physical functioning and enable participation in age-appropriate activities including family life, social events and education. Parent carers will have improved quality of life as appropriate supportive equipment in place. An efficient pathway for equipment provision releases therapist time to support families in use of equipment and the associated health and well-being gains.
- Annual Health Checks for Children and Young People aged 14-25 years who had a Learning Disability are important to help the young person to stay well. Having an Annual Health Check with the GP practice also helps the young person build relationships with staff at the practice and ensures that they start to know the people and the environment. If they are then unwell & need to visit the GP, the experience is less traumatic. It also helps people get the medications they need. Annual visits, also helps the GP practice identify family carers and ensure they are offered health checks and relevant vaccinations so that they themselves remain well and healthy.
- Children in Care will have timely Initial and Review Health Assessments, which is important to ensure that the health needs of children/young people in care are identified as soon as possible; this is so services can be offered to meet needs and enable children in care to achieve the best health and life outcomes.
- New arrangements will be in place to consider the whole needs of children and families. This puts children's commissions at the centre of our approaches to understand the needs of the population.
- Families who have specific needs will have those met ahead of them realising that these services are needed.

- Greater availability of services with reduced waiting times is provided in Bradford due to a mixture of aligned budgets, pooled budgets and agreements on commissioning and decommissioning needs for the District. These are clearly stated and signposting for services is shown on the Local Offer alongside the pathways to access these services.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

Not applicable.

8. NOT FOR PUBLICATION DOCUMENTS

8.1 None.

9. OPTIONS

Not applicable.

10. RECOMMENDATIONS

10.1 Executive to note the contents of this report.

11. APPENDICES

11.1 None.

12. BACKGROUND DOCUMENTS

Not applicable.