

BNSSG CCG Governing Body Meeting

Date: Tuesday 2nd March 2021

Time: 14:00pm

In light of Government advice regarding social distancing, the Governing Body will meet virtually until further notice. The meeting will be accessible to members of the public. Please see our website for more details.

Agenda Number :	7.1
Title:	Children's Services Update Report
Purpose: For information and update	
Key Points for Discussion:	
<ol style="list-style-type: none"> 1. The Framework for Integrated Care 2. Covid 19 Pandemic Impact & Recovery update 3. Healthier Together: Children & Families Programme update 4. Special Educational Needs & Disability (SEND) - local area updates 	
Recommendations:	For Governing Body members to be more aware of the current developments and challenges in Children's Services
Previously Considered By and feedback :	None
Management of Declared Interest:	Consideration has been given to potential or actual conflicts of interest and none have been declared
Risk and Assurance:	Risk 1: The continuation of the pandemic means that local areas are unable to meet the health requirements of the SEND Written Statements of Action. Mitigation through CCG and provider colleagues engaged in SEND delivery not being redeployed to other duties during the pandemic
Financial / Resource Implications:	The CCG will need to consider appropriate allocation of staffing resource to meet the demand requirements of the key children's priorities identified in the Long Term Plan
Legal, Policy and Regulatory Requirements:	<p>Special Educational Needs & Disability</p> <p>From 2014 CCGs were required to:</p> <ul style="list-style-type: none"> • Commission services jointly with local authorities for children and young people with SEND, including those

	<p>with EHC Plans</p> <ul style="list-style-type: none"> • Work with the local authority to contribute to a Local Offer of available services • Have mechanisms in place to ensure clinicians support the integrated EHC needs assessment process, and align it with Children’s Continuing Care • Have a designated health officer for SEND • Agree Personal Budgets, where they are requested, for those with EHC Plans
How does this reduce Health Inequalities:	Addressing health inequalities is an integral workstream and key principle of the Healthier Together Children & Families Programme
How does this impact on Equality & diversity	Addressing equality & diversity is an integral principle of the Healthier Together Children & Families Programme work streams
Patient and Public Involvement:	The local area Written Statements of Action have been fully co-produced with families in the local area and key stakeholders.
Communications and Engagement:	Bristol “Education, Health & Care Plans - Time for Change” Programme Regular scheduled meetings between senior leaders from CCG, Sirona and BNSSG parent carer representatives
Author(s):	Anna Norris, Senior Contract Manager (Non-acute) Mark Hemmings, Interim Head of Transformation Special Educational Needs & Disability (SEND) Laura Westaway, Interim Head of Children’s Transformation
Sponsoring Directors:	Lisa Manson, Director of Commissioning

Agenda item: 7.1

Report title: Children's Services Update Report

1. The Framework for Integrated Care

In October 2020, NHS England & Improvement Health & Justice (NHSE&I H&J) approached the CCG to offer the opportunity to be involved with the Framework for Integrated Care as the vanguard site for the South West. The framework is part of the NHS response to the Long Term Plan (LTP) commitment of investing in additional services for children and young people with complex needs in the community. Locally, the Framework will support the Children and Families work stream within Healthier Together as it cuts across a number of the programmes within this such as joint commissioning and new models of care.

NHSE&I H&J are identifying a partner site in each region in England to work with to become the vanguard site and deliver the framework over a 4 year period, with the expectation of continued sustainability over a 10 year period.

BNSSG was identified as the vanguard in the South West due to the high levels of need that presents in the area. The CCG has confirmed with Sirona care & health that they will become the lead provider for the delivery of the framework as they hold the Children's Community Health Partnership contract across BNSSG.

The aim is to build on existing services in the community, identifying gaps and providing solutions to address these as well as creating additional capacity to enable existing partners to work more collaboratively.

The objectives of the framework are:

- Improved CYP wellbeing
- Reduction in high-risk behaviours
- Reduced mental health concern
- Organisations are more trauma-informed
- Improved purpose/occupation
- Improved stability of home

A workshop to formally launch the initiative took place on 19 January 2021 with representation from across the 3 local authorities, Sirona care & health, Avon & Wiltshire Mental Health Partnership, Youth Offending Teams, Police & Crime Commissioners and third sector organisations. The feedback from the workshop will help to develop a clear picture of the offer to CYP in BNSSG, what the issues, opportunities and concerns are for organisations and the system as a whole, as well as developing opportunities for the future. It is integral that the vision and framework is developed and owned by the entire system to ensure that all organisations are working towards the same shared goal to bring about the change required.

A development group is in the process of being formed and will shape the outputs and work through the information acquired. The group will identify a cohort(s) of CYP and services to be the initial focus of the framework.

In addition to the above a comprehensive patient and public involvement plan (Lived Experience Advisory Group [LEAG]) will be developed and implemented as part of the needs assessment and gap analysis, to ensure that the parent and child voice is at the centre of the work, and we adopt a

'co-design' approach throughout the project. This will ensure that the model of delivery is developed locally and tailored to the needs of the BNSSG population.

The Framework of Integrated Care will feed into the Children's and Families Programme Board as part of Healthier Together which will ensure appropriate system oversight. The expectation is that the framework will be developed over a 4 year period and will remain sustainable for 10 years. This will involve strong system working and a shared vision for the future, ensuring that improved outcomes are achieved for children and young people across BNSSG.

2. Covid-19 Pandemic Impact & Recovery

2.1 Overview

Services and support for children & young people (c&yp) in BNSSG continue to use established contracting and partnership arrangements to respond to the on-going Covid-19 pandemic. This includes the monitoring and reporting of the operational situation in each service, working collaboratively to manage on-going changes to service delivery and effectively communicating with families. Community children's health services provide assessment, therapy and support to c&yp including those with Special Educational Needs & Disability (SEND) and those in receipt of an Education, Health Care Plans (EHCP). Recovery plans continue to be implemented and include consideration of:

- the use of estates
- infection control
- PPE requirements
- equality impact assessments
- workforce risks

During the 2020 school closure period, SEND legislation was nationally adjusted to support services in making reasonable endeavours to provide the integrated care and interventions specified within Education, Health and Care Plans (EHCPs). This adjustment has not been re-enacted during the current school closure period and therefore the CCG has a continuing legal responsibility for ensuring provision. Sirona is currently delivering community children's health services within this context. The short and long term impacts of these closures, both now and throughout 2020, have been widely recognised and discussed across children's education, health and care services. We know that school is a protective factor for all children and without it all agencies have a reduced opportunity to identify and manage a wide range of developmental and safeguarding concerns.

During this school closure period, Sirona has aimed to maintain the usual community children's health offer in Bristol, North Somerset and South Gloucestershire. This aim is supported by current Department for Education guidance for schools, which advises access for visiting health professionals.

Within BNSSG, we are experiencing some inconsistencies from schools in enabling provision of our integrated health services to our education settings. For example, about 30% of South Gloucestershire schools have either declined access for therapists or have cancelled planned appointments. In addition, although school places are available for children with special educational needs and disabilities (SEND), many families are choosing to keep children at home. For those attending, turnout is reduced because of illness, the need to isolate if a family member becomes symptomatic for Covid-19, or the closure of their school bubble. Clinicians are responding to school closures by working to deliver care in

an alternative setting for example in clinics and homes, face-to-face or via a digital platform. Despite this, the current school closure period and associated challenges of accessing children within their educational settings is impacting upon delivery of the full community children's health offer in Bristol, North Somerset and South Gloucestershire.

2.2 Impact for c&yp with SEND including with an Education, Health & Care Plan

School closures are specifically impacting upon provision of the following:

- Initial assessments in all community children's health services
- Delivery of therapeutic provision specified with EHCPs
- Universal and targeted therapy services
- Parent and practitioner training
- Hydrotherapy

Any changes to the provision Sirona offer a child with SEND, or their uptake of that provision, is being recorded within their individual clinical notes and Sirona is also keeping service level records of changes to provision and uptake, which will be shared with the CCG and local authority SEND teams if required.

2.3 Impact for routine immunisations of young people

Sirona had an inconsistent response from secondary schools about provision of the annual HPV/Meningitis immunisation programme from their settings. Some schools have asked for guidance from their local authority. It's a challenging ask for schools while their sites are closed to most young people however, provision of immunisations from alternative clinic venues would be at a significant reduced capacity resulting in a backlog.

Sirona met with BNSSG public health, education and schools leaders on Thursday 4th February, with the aim of:

- listening to and addressing the concerns of school leaders
- identifying schools who are keen to enable us to commence the roll-out during the school closure period
- planning the roll-out in these open school settings
- considering further system support for those schools who continue to feel unable to enable access for health professionals
- quantifying the backlog and agreeing the overall immunisation risk from a PHE perspective

The aim is now to commence the HPV/Meningitis immunisations roll-out as close to the usual annual rate as possible. Sirona will notify NHS England, the commissioner of this programme, if the trajectory for completion deviates from expected.

3. Healthier Together: Children, Families & Maternity

The Children, Families and Maternity Steering Group oversee a key area of the wider Healthier Together STP/ICS work. Following an ICS workshop a strategic intentions document has been developed which is due to be circulated throughout the system for feedback imminently. The delivery plan consists of a number of programme areas. Programme leads have been identified from a range of different key partnership organisations and they have established programme groups and associated deliverables as follows:

3.1 Addressing inequalities

- Implement BNSSG Maternity Smoking Cessation Pathway
- Pilot new NHS commissioned smoking cessation service
- Develop and implement new system-wide childhood healthy weight pathway

- Develop and implement workforce training programme to embed ACEs model in all children's services
- Develop and implement BNSSG offer for post trauma identification, assessment and intervention
- Develop and implement integrated BNSSG 'health' offer to support school exclusion processes

3.2 Evolving joint commissioning

- Digital integration of individual-level health, education and social care information

- Implementing systematic shared processes for analysing need, planning and pathway mapping, commissioning, evaluation and improvement across health, education and social care

- Delivering the Children and Young People's Complex Needs Commissioning Strategy

- Collation and co-ordination of SEND joint commissioning plans for each local authority

- Using aggregate data from Annual Review outcomes to inform provider performance management and to inform joint commissioning decision making

- Development of locality (school cluster) and schools level joint commissioning models

3.3 Delivering new models of care closer to home

- Developing single point(s) of information and access for health, education and social care, including digital access to high quality, up-to-date local offer(s)

- Embedding comprehensive multi-agency pathways across community and acute care, which includes:
 - an integrated and expanded community nursing offer
 - integrated advice and guidance for GPs and streamlined referral routes for outpatients
 - virtual and community outpatient appointments, integrated between community and general paediatrics
 - clear pathways and signposting for urgent care

- A support offer for carers, siblings and young carers
- Training and self-management support offers for children, young people and families
- Robust out-of-hours and crisis offers embedded within multi-agency care pathways

3.4 Pathways to Adulthood

- Develop and implement new models of care for young people aged 14 to 25
- Enabling young people to experience effective transition into adult services
- Enabling delivery of the annual GP health check for young people with learning difficulties
- Integrated health service delivery embedded within post-16 educational settings
- Integration of health service delivery for young people into all-age Locality Hubs

3.5 Achieving excellence in Special Educational Needs & Disability

- Working collaboratively with education and social care to deliver our three Written Statements of Action
- Implementing a Shared Outcomes Framework for children and young people with SEND

3.6 Supporting children's palliative and end of life care

- Creation of BNSSG managed clinical network for children's palliative care, including shared clinical guidelines and operating procedures
- Delivery of new integrated model of care for 24/7 end of life at home
- Delivery of integrated prescribing

The CCG has been successful in securing match funding from NHS England to develop integrated services in the End of Life & Palliative Care programme. Funding will be allocated to provide project management support to oversee delivery of the EOL home offer as priority. Governance will be provided through the Programme Board and regular updates will be given to the CCG Operational Delivery Board.

3.7 Maternity

- Continuity of carer
- Personalised care plans
- Digital ante natal service
- Smoke free pregnancy

The steering group also has key links with the ongoing CYP mental health transformation programme and the CYP learning disabilities and autism programmes.

4 Special Educational Needs & Disability (SEND)

Ofsted and the Care Quality Commission (CQC) jointly inspect the effectiveness of the approach to implementing the special educational needs and disability (SEND) reforms which is called a Local Area Review (LAR). South Glos was inspected in November 2017, North Somerset in May 2018 and Bristol in October 2019. Whilst acknowledging areas of significant strength, each local area was asked to produce a Written Statement of Action describing how the identified areas of significant weakness were going to be addressed. Local multi-organisational SEND Partnership Boards are responsible and accountable for implementation of the WSoA.

4.1 Local Area Updates

4.1.1 South Gloucestershire

South Gloucestershire had its first SEND inspection in November 2017. Inspectors identified eight significant weaknesses in the local area's SEND practice. In accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector determined that a Written Statement of Action was required. The Ofsted/CQC revisit of SEND in the South Gloucestershire was in January 2020. Sufficient progress was deemed to have been made in six of the eight areas of significant weakness (ASW) however, in two of the areas, insufficient progress was deemed to have been made namely the quality of EHCPs and progress made improving educational outcomes in early years and Key Stage 1. The result was a requirement for the local area to produce an Accelerated Progress Plan (APP) to address the two outstanding areas of significant weakness. Regional DfE and NHSE advisers held an APP progress review meeting on 25th January 2021. We await formal feedback but informal feedback indicated the local area was making significant and sufficient progress in both remaining ASW. The final progress review visit will be held in or around July 2021.

4.1.2 Bristol

Bristol had its SEND inspection in October 2019. Inspectors identified areas of good practice but also identified five areas of significant weaknesses in the local area's SEND practice, most notably in relation to leadership and accountability, fractured relationships with parents and carers, and timeliness and quality of EHCPs. As a consequence, a Written Statement of Action (WSoA) was required. The WSoA was co-produced by BCC and CCG with parent carers' children, young people & families and key stakeholders to address the five areas of significant weakness. Each of the priority areas for improvement is being delivered through a more detailed action plan, with operational oversight by the SEND Partnership Group. Dept. for Education and NHS England regional advisers regularly monitor and challenge progress of the WSoA through quarterly meetings with senior leaders in the local area. DfE/NHSE update following progress review held 16th November 2020:

- *Despite the disruption caused by Covid, the local area continues to make good progress in implementing the WSoA. 89% of milestones have been achieved or are on track to be reached by January 2021. 11% are delayed.*
- *Improving the performance management of the WSoA has allowed SEND leads to undertake 'deep dives' in certain areas and to shape and respond more effectively.*

- *SENCo engagement was reported to be far more widespread. Increasingly, SENCOs have become involved in developments across the wider SEND system in Bristol. Better partnership working generally is evident and helping to drive forward improvements across the City.*
- *Coproduction is recognised to be a major challenge, largely due to the impact of Covid-19 inhibiting the meaningful engagement of parents/carers and other key stakeholders.*
- *The collaboration with parents/carers across the broader SEND system is showing some improvement, though this was reported to be fragmented.*

The next progress review visit will be on Thursday 18th March 2021. The re-inspection was expected in mid-2021 but this may well be delayed due to the pandemic during which all inspection activity has been paused and will not resume until spring 2021 at the earliest. The Bristol SEND Partnership Group local area meetings have resumed “business as usual” and delivery of the Bristol WSOA continues.

4.1.3 North Somerset

North Somerset SEND Programme Board local area meetings have resumed “business as usual” and delivery of the North Somerset WSoA continues.

North Somerset had its SEND Local Area Review in May 2018. Eight Areas of Significant Weakness were identified resulting in a comprehensive WSoA being needed. North Somerset had a Local Government Association SEND Peer Review in November 2020 to provide independent support and challenge. The final report is still awaited but the informal feedback highlighted the following:

- *Services across the SEND system in the North Somerset area are regarded by partner organisations and parents alike as having responded actively to the needs of children, young people and families in the face of the challenges presented by the Covid-19 pandemic. Responding to the crisis has strengthened aspects of partnership working and prompted some innovation*
- *The senior leaders of the NHS Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (BNSSG CCG) acknowledge the need for a levelling up of service provision to that of other areas across the wider CCG*
- *The commissioning of new providers for community and mental health and wellbeing services from April 2020 is regarded as a positive development.*
- *Progress is not as advanced as it should be and more improvement should have been secured before the Covid-19 pandemic took hold. There is a need to refocus and streamline governance structures across the partnership to drive improvement at pace and provide clear leadership of the SEND agenda, including clarifying the relationship between the newly established Children’s Improvement Board and the current SEND Programme Board. This would help leaders across the partnership to take greater ownership of SEND improvement work*
- *There should be a much clearer communication of vision, intention and impact across the partnership at all levels, including a shared ownership of and responsibility for the information that comprises the Local Offer. Partners should ensure that there is sufficient capacity, with the right skills mix and focus, in key roles across the SEND system and that people feel empowered and have the authority to act, or the confidence to approach senior managers to resolve obstacles that may arise*
- *Other strengths to build on include an active parent / carer forum that is connected to the key statutory stakeholders; examples of good partnership and multi-disciplinary working at the*

front line and in new quality assurance procedures and a focus on developing better outcomes for Education, Health and Care Plans (EHCPs)

- *Work is required across the partnership to establish a genuinely participative approach with children, young people, parents and carers in both service development and delivery. A culture shift is required to one in which early involvement of these key stakeholders in service design and delivery is the default position as the basis for genuine co-production*

The DfE and NHSE held a further progress review meeting on Monday 1st February 2021.

Re-inspection was scheduled to take place in April 2020 but inspections and re-inspections have been paused during pandemic and are not scheduled to recommence until spring 2021. When the inspection regime is resumed, we are expecting North Somerset local area to be prioritised for re-inspection.

4.2 SEND workforce

Associate Designated Clinical Officers

The CCG has resolved the gap in statutory compliance that was recently identified with regards to providing health advice within the 6 week statutory timescale following a request for Needs Assessment information. Sirona Health & Care have been commissioned and recruited 3wte Associate Designated Clinical Officers (ADCOs). The ADCOs started on 1st January 2021 and are now triaging health needs assessment requests from all three LA's, collating information from individual patient records across a variety of specialities and clinically reviewing each referral at a face to face clinic appointment (if necessary) in order to make an informed clinical decision about whether any further assessments or onward referral is required and providing the requested health advice within statutory timescales of 6 weeks.

5 Conclusion

The report is developed to provide an update for Governing Body members to be more aware of the current developments and challenges in Children's Services. The next report will focus on the further development of the Framework for Integrated Care, the continuing impact and recovery from the pandemic, the new Healthier Together Children & Families Strategy and developments following SEND progress reviews.

Glossary

APP	Accelerated Progress Plan An APP is required if an area has remaining Areas of Significant Weakness in their WSoA following a re-inspection.
ASW	Areas of Significant Weakness
ASD	Autistic Spectrum Disorder
AWP	Avon & Wiltshire Mental Health Partnership NHS Trust
BNSSG	Bristol, North Somerset & South Gloucestershire
BAU	Business As Usual
CQC	Care & Quality Commission
CAMHS	Child and Adolescent Mental Health Services
CCG	Clinical Commissioning Group
CCHP	Community Children's Health Partnership
CCHS	Community Children's Health Services
DfE	Department of Education

DCO	Designated Clinical Officer
DMO	Designated Medical Officer
EHCP	Education, Health & Care Plan
HMCI	Her Majesty's Chief Inspector
KPI	Key Performance Indicator
LAR	Local Area Review A LAR is a SEND inspection of a local authority area by OFSTED & CQC
NHSE	NHS England
NS	North Somerset
OFSTED	Office for Standards in Education
OPEL	Operational Pressures Escalation Level
PPE	Personal Protective Equipment
PHE	Public Health England
RAG	Red Amber Green
RTT	Referral To Treatment
SG	South Gloucestershire
SEND	Special Educational Needs and Disabilities
WSOA	Written Statement of Action A WSoA is required to address Areas of Significant Weakness identified during a Local Area Review
wte	whole time equivalent