

Contact Officer: Jenny Bryce-Chan

KIRKLEES COUNCIL

HEALTH AND WELLBEING BOARD

Thursday 18th January 2024

Present: Councillor Jackie Ramsay (Chair)
Councillor Kath Pinnock
Tom Brailsford
Richard Parry
Carol McKenna
Karen Jackson
James Creegan
Superintendent Jim Griffiths
Liz Mear
Catherine Riley
Alasdair Brown
Warren Gillibrand

In attendance: Alex Chaplin, Kirklees Council
Lucy Wearmouth, Kirklees Council
Jo-Anne Sanders, Kirklees Council
Stewart Horn
Tom Brailsford
Izzy Worswick
Karen Huntley (Via Teams)
Kieran Lord (Via Teams)

Apologies: Councillor Elizabeth Reynolds
Councillor Mark Thompson
Councillor Moses Crook
Rachel Spencer-Henshall
Stacey Appleyard
Christine Fox
Sean Rayner
Len Richards
Dr Khalid Naeem
Dr Vanessa Taylor

13 Membership of the Board/Apologies

Apologies were received from Cllr Elizabeth Reynolds, Cllr Mark Thompson, Rachel Spencer-Henshall, Christine Fox, Sean Rayner, Dr Khalid Naeem, and Vanessa Taylor

Health and Wellbeing Board - 18 January 2024

Lucy Wearmouth attended as sub for Rachel Spencer-Henshall, Karen Huntley, attended as sub for Stacey Appleyard, Izzy Worswick, attended as sub for Sean Raynor.

The Chair gave a note of thanks to the previous Chair Cllr Viv Kendrick and to the Nick Hardiker Deputy Chair who has retired.

14 Minutes of previous meeting

That the minutes of the meeting held on the 29th June 2023 be approved as a correct record.

15 Interests

No interests were declared.

16 Admission of the Public

All agenda items were considered in public session.

17 Deputations/Petitions

No deputations or petitions were received.

18 Public Question Time

No public questions were asked.

19 Special Educational Needs and Disability Programmes

Jo-Anne Sanders, Service Director, Learning and Early Support, provided an update on Special Education Needs and Disability Programme, thanking the Board for the opportunity to bring an update on children and young people with Special Educational Needs and Disabilities (SEND) or those who have additional needs.

The Board was informed that the update would also provide a progress update on context and data, governance arrangements, and to share information and receive views on the refreshed SEND area strategy entitled, 'The Big Plan' and then to respond to Board questions. In addition, an update would be provided on the significant progress made towards improving things that were in the Written Statement of Action, where things currently are, and the preparation being made for the next inspection.

In summary, the Board was informed that the Health and Wellbeing Board holds the executive governance for the local area, around children and young people as they progress towards, and prepare for adulthood.

Referring to a set a slides entitled "what difference are we trying to make, and for whom," the Board was informed that there is a complex improvement agenda, so that children young people and their families are able to achieve and succeed.

This is a complex area with a great deal of activity across the partnership, to enable children to have the best start in life from when they are born, putting all the necessary arrangements in place, to ensure that whatever their start in life, they can achieve their potential. Some children and young people need additional help and

Health and Wellbeing Board - 18 January 2024

support, and it is the role of the partnership to get them that support at the earliest opportunity and support them throughout their childhood and into adulthood.

Wherever possible, the aim is to educate young people within the borough, however this is not always possible because of the specific nature of their needs. When young people can be educated locally, services can be wrapped around them in a coherent way by the partnership. It is important that there is consistency and inclusion and that can then be seen in educational outcomes, post 16 opportunities, in working life and that barriers are removed for young people to enable them to excel.

The Board was provided with the following information in terms of background and context:

- New responsibilities on health, education and social care through the Children and Family Act 2014, placed a statutory duties on all partners in local areas. Prior to that date, there were statements of special educational needs for young people in education, this moved on to what is now in place with the Education, Health and Care Plans (EHCP) providing a real impetus for partners to join together
- At the same time that the new statutory duties came into being, a new inspection regime jointly between Ofsted and CQC began to inspect local arrangements. Kirklees, was possibly one of the last local authorities under the old inspection framework to be inspected, and that inspection took place in February 2022
- There are many challenges nationally around supporting children and young people in education, health, and care, and as a result, the government published a green paper in 2023, regarding proposed changes which translated into a National improvement plan, of which they are starting to test things. For example, having a consistent education, health and care plan, regardless of which local authority you reside in
- It also strengthened the partnerships statutory responsibilities, and as a result they refreshed the inspection framework. Work is currently being undertaken preparing and reflecting and measuring against that new inspection framework
- In response to local ambitions, a partnership transformation plan has been developed, and that had been worked on over the last couple of years. It has had significant investment in terms of time and resources across the partnership, and green shoots are now beginning to appear, things that are making a difference
- At the highest level of governance locally, SEND reports directly to the Health and Wellbeing Board and there are good links with schools, Education Learning Partnership Board, Schools Forum and also links into the 'Starting Well' agenda

The Board was provided with an overview of statistical information relating to the number of children and young people up to the age of 25 who hold an EHCP, and how that correlates as a percentage of all school age pupils and the percentage of school age pupils who have a special educational need or a disability. The information highlighted the demand including how many new assessments for an

Health and Wellbeing Board - 18 January 2024

EHCP were requested in the last 12 months, which was 1036.

The Board was informed that there has been an increase in demand, some of which is directly as a result of Covid, and this puts pressure on all partners in terms of doing everything that needs to be done to make sure there is quality education and health and care needs assessment. Preparation for adulthood is not just with the 18-25 cohort, everything is geared towards independence and transition at all stages has been identified as being crucial.

The Board was presented with contextual information with regard to expenditure from the high needs block of the dedicated schools grant. The high needs block currently funds school placements, some outreach support, special school places, alternative provision and top ups through the EHCP to mainstream schools, and opportunities for personal budgets. There is also expenditure on young people who are educated outside the local area or in independent provision potentially because their needs are such that they cannot be met in existing provision.

Ms Sanders informed the Board that the information showed that there is a significant challenge locally as current spending is in excess of the money that is coming from national government through the high needs block. As a result, Kirklees is a local area that is part of a Safety Valve Agreement, with the Department for Education and the Skills and Funding Agency, and through the SEND Transformation Plan there is a planned approach where they will help to resolve some of the deficit position. Demand is increasing, there is pressure on services, however, Kirklees is not on its own in terms of some of the challenges it faces in bringing expenditure in line with allocation. There is much to deal with in terms of being able to do the right thing, to meet need and to orientate as much of the spend to early support as is possible.

The Board was provided with further data context with regard to the percentages of children and young people in schools in terms of ethnicity, in terms of need and young people who may have more than one characteristic. For example, a child with a special educational need who might also be looked after by the local authority.

The largest areas of growth that can currently be seen in young people are those with speech, language and communication difficulties, autism, and children and young people with social, emotional and mental health difficulties.

Referring to the presentation, the Board was provided with further information on:

- SEND pupils within wards and the location of schools as this information is important when considering sufficiency and where special schools should be located and making provision as close to where children and young people live as possible
- Educational attainment, and how Kirklees benchmarks alongside national peers in terms of key stage 2 and key stage 4 attainment for children and young people either at SEND support or with an EHCP. Kirklees is not an outlier in terms of where it sits when compared nationally, although performance is

Health and Wellbeing Board - 18 January 2024

slightly lower at key stage two, there has been significant improvements in terms of closing the gap

The Board was informed that in terms of governance, work has been undertaken to refresh and re-focus the program. Previously, there had been nine workstreams and a lot of activity, and whilst not losing sight of that work and the progress made, it is an opportune time to consolidate those under three headings which will make it easier for people to understand what is to be achieved. Whether that is school partners, health partners and parent and carers.

Clear reporting lines have been introduced to ensure responsibilities are clear and to emphasise that this is a partnership and how the system will work together, and this is what gets tested as part of the inspection.

All activities are focused under three areas:

- Quality and compliance – (are we getting it right) ensuring that statutory duties are met, doing things on time and that they are of high quality. Those things are important the 'Big Plan' has been refreshed to make it really easy for people to understand. The feedback received from young people, parents and carers, raised question as to whether as a system "are we getting it right? Are things being done on time?"
- Sufficiency – (enough of the right stuff) making sure there is enough of what is needed, whether that is places, education, speech and language therapy, educational psychology, whether it is a service or a place, is there sufficient?
- Need – (demand) is there clarity around what the needs of the population are and what the demand is? Previously mentioned was the demand for needs assessments, however, what about other things and are there opportunities to get in earlier. Having a good understanding of the local demographic and what they need is important and that there is a joint system ownership.

Ms Sanders explained that with regard to 'The Big Plan,' it started with a SEND strategy two years ago and progress has been made and people have been aware of the journey so far. Feedback had been received from the Department for Education, NHS England and through the Written Statement of Action meetings and the feedback suggested that things were moving in the right direction. The feedback from parents, carers, and schools was that it was complicated, and can it be made simpler, because if people don't understand it, how can they engage in it? The strategic intent was correct, but how can it be communicated better.

The previous strategy document had already started to move towards plain language, with the aim of being creative and bringing the strategy to life so that people will want to read it. The approach in developing The Big Plan was to work with a range of partners including Locala, PCAN, Thriving Kirklees and 63 young people have all helped to shape it.

Health and Wellbeing Board - 18 January 2024

Following feedback from young people, parents and carers, the message was clear on the importance of the language used and what and how things are said, because if people do not understand it, how can they do it. It is important to say thank you to all the young people and partners involved who helped to lead this and it was co-produced. This is a live document and not finalised and if there are any suggestions on how it can be made even more accessible, this would be welcomed.

Board members were informed that there will not be a big launch, however, were asked to raise awareness in order to make it come to life and progress towards achieving the outcomes.

The Board was provided with an update on the progress the partnership had made towards the Written Statement of Action (WSOA), following the SEND inspection. The Board was informed that during the inspection Ofsted and CQC determined that *“the delivery of the healthy Child programme, did not support the early identification of SEND and weaknesses in the areas ability across services within settings, to identify and meet the needs of children and young people who are in mainstream settings.”*

In response, robust plans have been developed and colleagues from DfE and NHS England have provided challenge and support which includes:

- six quarterly reviews where monitoring review visits have taken place and to date there have been four, and were well attended by the partnership, and the fifth review will take place in February 2024
- as a result, seven commitments have been made, including improve parent, carer confidence and young people’s confidence in Kirklees SEND system, increase the sufficiency of places and settings across the Kirklees and improve outcomes for children and young people with SEND in mainstream settings
- recently CQC and Ofsted have introduced the opportunity for an annual conversation

This is not without challenge, there is complexity of need across the local population, there are significant cost pressures, and the financial envelope is smaller than the current spend. The volume of children awaiting therapeutic input is also a challenge. There are significant challenges and those are being addressed as they come along, whether it is capacity or financial demand led pressures, however much as already been achieved and there is much to be celebrated. Getting system ownership and building on that, is important and with help, support and challenge and asking partners to take this away and reflect on what more can be done and what individual partner organisations and the Health and Wellbeing Board can do to support this work.

In response to the information presented, Board members asked a number of questions and made comment including the following:

- the inspection framework does this link to criminal justice as the evidence suggests that young people with special educational needs disproportionately

Health and Wellbeing Board - 18 January 2024

enter the criminal justice system, is this part of the inspection framework and is the data on this tracked? If not is there something West Yorkshire Police can do to help?

- With regards to the preparation for working life, it is recognised that people with disabilities are often unemployed, and the level of employment among people with disabilities is much higher than in people without disabilities, what is being done as a system to remove the barriers to work?
- Project Search could be expanded because it only helps a very small number of people. It would also help as a system to look at the culture within individual organisations and look for the barriers that may be in place for people who have disabilities and think about things in a different way
- Calderdale and Huddersfield Foundation Trust (CHFT) is extensively involved in Project Search, and also have a widening participation team in the organisation looking at bringing people into the organisation from the local area, whether that is through schools or a little bit older, giving them opportunities and also helping them to develop in their roles. CHFT would be happy to be involved in any further work to develop this
- The role of the voluntary and community sector is important in this, and it would be beneficial to invite colleagues to attend a future Third Sector Leaders (TSL) meeting
- The approach taken with The Big Plan is good to see as it moves away from volumes of paper to something that is more accessible and that means more to the people receiving services. It would be good to see this sort of approach copied across the wider public sector going forward
- It would be useful if the information could be broken down into those with very complex needs and those with neurodiversity needs who would need different approaches to support. It is possible to be taken in by the very high numbers without taking into account how that breaks down
- It can be difficult to be optimistic when there is not enough money to meet the needs of this very important group of young people, as getting this right now is vital as it impacts on the future. This is a significant challenge because there is a need to reduce spend to meet the high needs funding block and there is no easy solution
- Ward councillors do have connections with many local groups with a wide range of different people who may be able to signpost or set up new groups, however if they do not have the information or request, then they won't do it
- It is important to be aware of the transition period into adult services wherever that cut point is, as there is a potential risk at that stage and it is important to support individuals and their families through into other services, which will look and feel quite different

Health and Wellbeing Board - 18 January 2024

- It is part of the offer, and the association represents about 160 small, medium sized enterprises in the independent sector and would be willing to support this work
- Music and drama is really important to support young people and certainly to support them through into adult life, however, it is a challenge for funding and there are lots of small VCSE groups who deal with drama and music, and they are constantly facing barriers in getting things done, and wonder if some work could be done around this?

In closing, the Chair summarised that during the discussion there have been several offers of invites to do some partnership work from various organisations and some suggestions and ideas. In addition, risks have been identified around transition, employment and criminal justice.

RESOLVED:

- That Jo-Anne Sanders be thanked for providing an update on Special Educational Needs and Disability Programmes
- Note that 'at the highest level of governance locally, SEND reports directly to the Health and Wellbeing Board'
- Note that there is significant growth in the number of EHCPs locally, in particular, for young people with speech, language and communication difficulties, autism, and children and young people with social, emotional and mental health difficulties.
- Note that the approach in developing 'The Big Plan' has enabled a simpler more easily understood strategy.
- Note the progress the partnership had made towards the Written Statement of Action (WSoA), following the SEND inspection.
- Note the both the financial and capacity challenges in providing therapeutic input.
- That Jo-Anne Sanders follow up the invitations of partnership work and the suggestions and ideas from partner organisations
- Note the risks identified around transition, employment and criminal justice

20 Kirklees Health and Care Partnership - Starting Well Programme

Stewart Horn, Head of Children's Integrated Commissioning, informed the Board that he worked in an integrated role, representing the Integrated Care Boards, and Kirklees Council's Children services. He explained that the update would focus on the new integrated governance arrangements for the health and wellbeing of children in Kirklees, called the Starting Well Program.

In summary, the Board was informed that in terms of historical context, there was the Children and Young People's Partnership Plan which ran from 2020 to 2023, and the Health and Wellbeing Board had oversight of that. The priorities in the plan included:

- To reduce the effects of poverty on children - this has now become a Council wide focus, there is a tackling poverty partnership, there are various cost of living support programmes and poverty awareness when working with families. This

Health and Wellbeing Board - 18 January 2024

ensures the continual monitoring and analysing of the negative effects of poverty on children's experiences and outcomes

- To support inclusion and better outcomes for LGBT+ young people – this came out loud and clear on many of the children and young people surveys undertaken and as a result of this increase focus, a service has been commissioned to support LGBT plus children and their families as well as the agencies working around them
- To grow our youth offer, places to go, people to see, things to do – this is now the core work of the youth development programme, and various projects have been delivered including 'Our Space' which was regarding capital grants for local voluntary sector providers to improve their facilities, provisions and venues. There is the holiday activity and food program which provides activities for children in school holidays

The integrated approach to governance in Kirklees is known as the 'Well Programmes,' and the focus of the programme is to align all of the top tier strategies with the emphasis being the Health and Wellbeing Strategy. This helps the system to work together towards shared outcomes. Under the programme, there is a life course approach, which includes, Starting Well, Living Well and Aging Well.

The idea is that work is undertaken in a collaborative way with providers and Commissioners, giving everybody an equal voice at the table and everyone's view is heard. There is distributed leadership around the system where partners have been given autonomy to deliver in the best way they can, ensuring that the programs are partnership led. It is important that the plans are not seen as NHS or local authority plan, it is system wide, and it is hoped that partners feel sufficiently engaged.

It was felt important that there was some senior system leadership with the plans, therefore senior leaders from across the partnership lead each of the plans. Tom Brailsford as director of Children's services, has agreed to chair and lead the Starting Well Programme.

The principles worked to when developing the Well Programmes, were developed through some initial workshops, and the outcome from those workshops included the following:

- Alignment of priorities - to ensure that focus is on collective resource on the same things
- Prevention and self-management and community empowerment – and an important part of this is VCSE involvement and their sustainability
- Personalised care - is also a key principle, encouraging people to think beyond the boundaries of their host organisations and that work is undertaken collaboratively and not in competition. This is not seen as a performance framework but more of a collaboration space and a framework for system support

The Board was informed that the core aim of the Starting Well Programme, is based around one of its aligned shared outcomes, specifically, to ensure that children have the best start in life. In Kirklees, there are a number of markers, which it was an outlier for in terms of stillbirths, infant mortality, and childhood and maternal obesity.

Health and Wellbeing Board - 18 January 2024

There are inequalities within these outliers, many of which relate to protected characteristics.

In addition to these issues, there are systemic issues that needs to be addressed, for example, families have said that they often have to tell their stories multiple times, and it is recognised that there isn't always a systematic approach to collecting outcomes from children and families. Where it is collected, this intelligence appropriately can inform service design and transformation.

One of the primary reasons for the development of Starting Well Board in Kirklees, was that it was recognised that there was a lack of partnership means of oversight for the program in the area. This led to some disjointed priorities and there was a need to improve systems thinking and leadership and the Starting Well Programme was a means to address that. One of the early models approached with the starting well principles, is the Families Together Programme.

Referring to the presentation, the Board was shown a diagram of the governance arrangements and the workstreams that sit under the Starting Well Programme. The governance arrangements includes the Starting Well Board, Early Years Programme Board, Youth Development Programme Board, Early Support Partnership Steering Committee Group, and Childrens Emotional Health and Wellbeing Partnership.

The Families Together Programme is one of the first examples of the starting well approach. The Board's attention was drawn to the branding that has been adopted and developed and partners were encouraged to use the branding wherever possible to promote the approach and make everyone aware of families together as a principal. There are a range of slides and headers that people can adopt.

Families together comes from the national Family Hubs program, which is driven by the Department of Health and Social Care and Department for Education. This program was designed to help provide support to parents and carers to enable them to nurture their babies and children, improving healthcare and education outcomes for all, and to contribute to a reduction in health inequalities. It will also help to build the evidence base for what works for future services. This national program did come with some funding opportunities, unfortunately, Kirklees was not successful, however it was decided to still work to the principals.

The Board was informed that work is being undertaken to progress that approach in Kirklees, whilst recognising that advances may not progress as quickly as some neighbouring authorities, due to the funding issue. In Kirklees, Families Together has been defined as a place-based integrated early support offer to children, young people and families aged 0-19 or up to 25 where the children have special education needs and disabilities. It is a principle of whole family working and was approved at Cabinet in 2021.

It is split into four geographical areas which have some physical sites however, it is about how organisations in the area are co-ordinated and to help with that, some Families together area partnerships have been funded and are led by voluntary sector organisations. The four main sites are:

Health and Wellbeing Board - 18 January 2024

- Huddersfield (Chestnut Children's Centre)
- Dewsbury and Mirfield (Dewsbury Moor Children's Centre)
- Kirklees Rural (Slaithwaite Town Hall)
- Batley and Spen (Birstall & Birkenshaw Children's Centre)

It is still very much in its infancy; however, progress is already being seen and it is important that there is this governance process to show accountability for priorities and supportive challenge which will ultimately lead back up to the Health and Wellbeing Board.

In response to the information presented, Board members asked a number of questions and made comments including the following:

- There has been quite a transformation and change, and it is good to see it actually coming together and the real test is how to move this model going forward.
- One of the areas mentioned in the presentation was with regard to workforce training, particularly the example given about families having to tell their stories over and over again and it has been like that for a long time. It is important to move away from that, and workforce training is one way to enable different sectors to understand how each other works and doing things in the same way instead of doing things in their own way. It would be positive to put some effort into that, and it would include the public sector, the health agencies, VCs and the University all working together, people being trained in the same room
- Recognising that this is still at an early stage, from the information presented there are some outputs in terms of information being sent out to ensure that people understand about the services. In trying to understand what the outcomes will be, because in some places these are to be determined and other places it will link into strategies, it would be good if there could be clarity on what the expected outcomes will be from these outputs and if possible likely timescales

In closing, the Chair summarised that during the discussion there were a couple of issues to take away. Firstly, how can partners work together to build up training programs with the aim of everyone speaking the same language. Secondly, work on articulating outcomes including timelines.

RESOLVED:

That:

- Stewart Horn be thanked for providing an update on Kirklees Health and Care Partnership – Starting Well Programme
- consideration be given to how partners can work together to build up training programs with the aim of organisations speaking the same language
- work is undertaken on articulating outcomes including timelines

