



Parent/ Carer Questions to SEND Collaborative Forum Meeting 17 April 2024

How we sought questions/feedback from parents:

- Request for information via our specific Newcastle PCF Facebook page.
- Shared on several local SEN Facebook pages.
- Shared via SENDCO Network to all schools.
- PCF Newsletter.

Questions and answer session with parents/ carers across Newcastle

CROSS SERVICE RESPONSE REQUIRED	
1.	<p>Integrated Care Board (ICB)</p> <p>Question: What is the ICB doing about the issue of GPs not agreeing to set up shared care agreements anymore?</p> <p>Response: <u>North East and North Cumbria ICB (NENC) Level (medium – long term):</u> <ul style="list-style-type: none"> • Local enhanced service review to identify what each delivery team pays for this service (if any), what specifications are used with a view to work towards equity across NENC ICB. • To strengthen the Primary and Secondary Care interface. <p>Local Delivery Team Level (LDT) (short term): Newcastle Gateshead LDT are looking at the possibility of a local enhanced service for one year which would provide funding for GPs to provide shared care whilst the NENC review is underway.</p> <p>Question: How do parents access appropriate medication where shared care has not been agreed, or has been stopped, for example ADHD Meds or Melatonin?</p> </p>



Response:

If a young person is open to the Children and Young People's service (CYPs) and a shared care agreement is not yet in place or has been stopped, as a change has been needed, or because the GP has declined this (in the current issues), they would go back to their prescriber (non-medical prescriber or medic) who would make any changes needed and provide prescriptions. As a result of these complexities there may be a delay to accessing an appointment with a non-medical prescriber or Medic, the team are working hard to ensure clinically effectiveness.

Young people without an ADHD diagnosis would not be able to access ADHD medication and would not be able to access Melatonin as CYPS are not commissioned to prescribe this other than as a co-morbid feature of ADHD.

We are aware that currently no service is commissioned to prescribe Melatonin, and this is something the ICB is aware of.

2.**CYPS**

Question: There are real concerns with CYPS (Children and Young People's Service) and the way it operates in terms of being exclusionary for helping families explore diagnoses like ARFID or OCD.

Response

In terms of AFRID (Avoidant/Restrictive Food Intake Disorders)– this is a new diagnosis / specialist area that is coming through, and we are working across services; CYPS and CEDS (Community Eating Disorder Services) to try and manage the ask and understand the treatment for this as a multi-disciplinary team approach. This diagnosis often needs multi-professional involvement – not just CYPS and the understanding of this is ongoing.

In terms of OCD (obsessive compulsive disorder), we have noticed this is commonly misdiagnosed by others and then referred to CYPS for treatment. This is not easy to diagnose in young people and there are a lot of other factors that may explain a child's behaviours; the most common being an underlying neurodevelopmental condition. NICE state this disorder is also commonly explained by the symptoms of another mental health disorder, such as repetitive patterns of behavior as in autism spectrum disorder, ritualised eating behaviour, and excessive worries as in a generalised anxiety disorder (and occasionally dysmorphic disorder, hoarding disorder, and trichotillomania). This is why idiosyncratic formulation of the whole issue is very important before a diagnosis is suggested.

CYPS have never withheld treatment for either of these. If the evidence presented indicates in any way the client is able to engage with the treatment, we offer the chance. If further assessment is required, this is offered through initial assessment or extended formulation. The treatment is then assessed in a multi-disciplinary forum. However, if we feel that the evidence presents a more suitable way to meet a CYP's needs we have a duty to consider it in the absence of other information (Right Therapy); We have to have availability of a therapist who is suitably trained in an evidence-based practice who the YP can engage with (right therapist) ; and they need to be ready to engage (right time). The absence of any of these factors, which cannot always be addressed by CYPS, can delay treatment, as can the time it takes to manage expectations and attempts in convincing people to engage in a treatment.

	<p>It's important to note that the understanding of a child's presentation and behaviours is critical to accessing the correct therapy. If therapy is accessed without this, it could impose further detriment.</p> <p>Question: What steps are taken to review the way CYPS operates, access to it and the needs of families?</p> <p>ICB would have to review service specifications.</p>
3.	<p>Autism Services</p> <p>Question: Why are there no behavior support/ASD services in Newcastle like Northumberland or North Tyneside?</p> <p>Response</p> <p>In September 2024, NCC launched a new outreach service which supports children and young people who have social, emotional, mental health needs (SEMH). This is a new team that provides support to primary schools in understanding behaviors and the needs of our children and young people.</p> <p>This team will provide support for pupils in year 7 from sept 24.</p> <p>The team of specialist teachers and support workers for Communication and Interaction within the SEND Outreach Service are available for schools and settings to access through the SEND Advice and Support Allocation Panel: Newcastle SEND Advice and Support Allocation Panel (SEN ASAP) (newcastlesupportdirectory.org.uk)</p> <p>SEND Outreach Service (newcastlesupportdirectory.org.uk)</p> <p>The Tree House Early Years Centre Newcastle Support Directory</p> <p>SEND Outreach Service - Early Years Newcastle Support Directory</p> <p>The Educational Psychology Service (EPS) includes Specialist Senior Educational Psychology for those with autism and SEMH needs. The EPS also provides support for individual pupils with SEMH needs through the SEND Advice and Support Allocation Panel.</p> <p>Additional and wider support is provided via the Family Hubs in local communities: Children & Families Newcastle Localities</p>
4.	<p>Support for Siblings</p> <p>Question: What progress has been made towards developing support systems for the siblings of children with SEND who are NOT young carers, or do not meet the criteria to be considered a young carer but still have needs?</p> <p>This question was asked in 2022 as at the time there was no local offer for siblings; has anything moved forward or are parents still simply signposted?</p> <p>Response</p> <p>We recognize that the brothers and sisters of children and young people with disabilities may have additional needs and some individuals may require additional emotional support. This is considered on an individual family basis, as support required for siblings will be variable. Some will get their support within their families and others may need a more personalised approach to support outside of their</p>

home.

The information on the links below from our SEND Local offer may be helpful:

[Family Support - Pathways 4 All](#)

[Sibling Support Groups – Skills For People](#)

LOCAL AUTHORITY GENERAL SEND

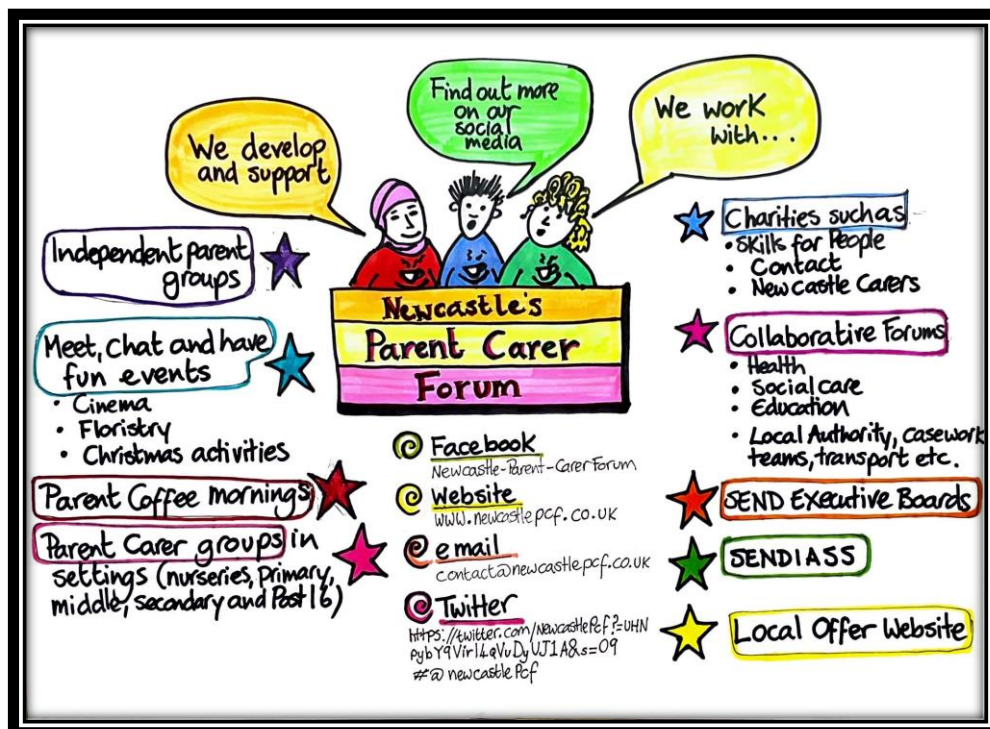
5. Dispute Resolution

When parents feel SEND provision is inadequate or not following the SEND code of practice, what channels are available to challenge this at a local authority level?

Response

We would always encourage parents/carers or young people to discuss any concerns with their school/setting SENCO or SEND Caseworker (where the child/young person has an EHC plan) and the SENDIAS service is available to provide advice and support.

There are several ways in which parents can raise concerns – either directly through the single email address localoffer@newcastle.gov.uk or via the Parent/ carer forum: contact@newcastlepcf.co.uk who share themes and issues with Newcastle Local Authority and the ICB on a regular basis. The graphic below shows how the PCF share views/ feedback from parents.



If you are unable to resolve issues following these conversations, you can make a formal complaint direct to the school or setting. The complaints policy will be published on their website.

If the complaint relates to the local authority you can find the complaints procedure her: [Compliments and Complaints | Newcastle City Council](#)

When we are unable to come to an agreement the local authority has commissioned independent mediation arrangements to help discuss, resolve, or prevent any disagreements linked to decisions about EHC needs assessments and plans. An adviser will provide you with information on how they can help.

Please contact:

Sue Hall, Chapel Mediation & Consultancy Service Tel: 07792227526 or

Email: suehall113@gmail.com

Please note if you wish to make an appeal to the SEND Tribunal you may only do so after contacting the mediation service and discussed whether mediation might be a suitable way of resolving the disagreement. They will issue a certificate.



6.

Monitoring

How is SEND provision in Newcastle monitored?

Response:

In respect of educational provision, Local Authorities have limited jurisdiction over academies. However, in Newcastle all schools and settings are encouraged and supported to use the co-produced SEN Support plan which should be reviewed termly with parents.

We have also co-produced guidance for schools and settings which is available for all to see on our School Effectiveness local offer pages: [School Effectiveness SEN \(newcastlesupportdirectory.org.uk\)](https://www.school-effectiveness-sen.newcastlesupportdirectory.org.uk)

The [Universally Available Provision](#) was co-produced in 2022-23 and launched with our schools October 2023. A free training package has been offered to schools from the SEND School Effectiveness Team for this academic year and there is an agreed expectation that all schools will use this to support Quality First Teaching in their settings. This document is referred to when schools apply for additional support through SEND ASAP and the EHC portal to ensure that all SEND pupils have had this offer of universal provision in the first instance.

The SEND School Effectiveness Team have introduced a framework called the Inclusion Quality Framework (IQF). All Newcastle schools are strongly encouraged to use this to evaluate their inclusive practice and have the option for applying for an award/quality mark to demonstrate that they have been through the process. This is verified by the LA in partnership with a head teacher who has already carried out the process through a full day quality assurance visit.

We also have co-produced commissioning agreements for our Additionally Resourced Provision (ARPs). These agreements set out the expectations and monitoring arrangements.

7.

Training

What training is available to school staff to ensure they meet the needs of children with SEND?

Is there a minimum requirement that MUST be met?

Response:

There are clear expectations regarding SENCo training and qualifications. Ideally every teacher should be a teacher of SEN but this is currently not expected in law. NCC holds the license for Autism Education Trust training, and we have provided this for free to all schools and settings over the last three years. SEND Outreach Service offer training to schools and settings as part of a core offer. From April 2024 there will also be further training opportunities offered to schools on a traded basis.

A range of training is currently available to schools in relation to specific areas of need through the Educational Psychology Service core offer. Currently this includes training on Emotionally Based School Non-Attendance (EBSNA), Selective Mutism, Zones of Regulation, support for International New Arrivals and responding to critical incidents and bereavement. Training is also available to schools through Team Around the Schools sessions and through input to Early

	<p>Years, SENCO and Inclusion networks. The training offer is reviewed yearly.</p> <p>There had been a free training offer to all schools on using the Universally Available Provision guidance. Schools also have the option of buying into the SLA offered by the SEND School Effectiveness team.</p>
8.	<p>Reasonable Adjustments</p> <p>What guidance around adaptations to existing behavior policies for SEND pupils is currently provided to Newcastle schools?</p> <p>Why does the LA let schools get away with inappropriate behavior and sanctions towards SEND children and young people?</p> <p>Response:</p> <p>The Educational Psychology Service works with partners in education and health to provide targeted support to identified secondary schools to help meet SEMH needs. The schools have been identified where data indicates concerns regarding attendance, suspensions, and exclusions. The Educational Psychology Service also works closely with the Primary SEMH service which offers support to all primary schools in relation to SEMH needs.</p> <p>Academies fall under the direction of the DfE and the Regional Schools Commissioner, who can/will raise concerns directly with schools, e.g., where NCC raises concerns regarding a school and the school is resistant to challenge/working with NCC to improve.</p> <p>Senior managers from Newcastle Local Authority meet with DfE, the Regional Director and Ofsted regularly and raise concerns about permanent exclusions during these meetings.</p>
9	<p>Advice & Support</p> <p>Are there any plans to introduce a specialist centre in Newcastle, similar to Daisy Chain in Stockton?</p> <p>Response:</p> <p>Daisy Chain is a charity run day centre for Autistic children and adults. It is not a local authority service, nor a specific advice and support service.</p>
10	<p>What has changed, that can be felt at grass roots level, changed for SEND children and their families since 2020?</p> <p>Response:</p> <p>Since 2020 we have put the voice of our children and young people and parents and carers at the heart of everything that we have done. This is demonstrated clearly in our: Getting it Right Together Quality Assurance Framework.</p> <p>There are numerous case studies and feedback shown on our Local offer which can be accessed via the SEND Local Offer which show how things have changed. For example case studies of the work of the: SEND Advice and Support Allocation Panel can be found towards the bottom of the page. However, we recognise that the system is complex and there are pressures. Budgets are tight across education, health and social care and difficult decisions need to be made to manage tight</p>

	<p>resources so there will be families that are not happy with what is being provided.</p> <p>The priorities and actions for the next 5 years as set out in our SEND Strategy are what families have told us are important. We have connected to our families. The benefits of our work across the SEND system in Newcastle have not manifested quickly or easily though, but what we have done from the off is elevate the ambition for children by asking 'what's in it for our families'.</p> <p>Newcastle local area had a revisit for the SEND Inspection in 2021 and there was lots of progress recognised in the report: Newcastle upon Tyne LA SEND Draft Inspection Letter.</p> <p>Since 2020 we have been subject to an Accelerated Progress Plan (APP) and we have had regular monitoring meetings with NHS England the DfE. All of the reports have been produced with our PCF and they are published on the local offer under the accelerated progress plan section: SEND related policies and strategies.</p> <p>Everything we do in Newcastle, we do it together, alongside our PCF. One of our working groups is called Getting It Right Together and we continuously look at feedback from parents and carers and our children and young people to understand what further improvements can be made. Every term we aim to publish a 'biteable' video on our local offer pages to show what action has been done in response to what we have been told.</p>
<p style="text-align: center;">LA, SCHOOLS AND SCHOOL EFFECTIVENESS</p>	
<p>11.</p>	<p>School Admissions & Transitions</p> <p>How can the application of random allocation, over distance, in school admissions policies be stopped as it disadvantages and prevents SEN children from attending their local school in a familiar location, making the commute to school much more difficult.</p> <p>Response:</p> <p>Admission authorities are responsible for establishing the admissions policy for the schools for which they have responsibility. For most schools in Newcastle, the admissions authority is either the academy trust or the school governing body.</p> <p>The admissions policy must comply with the statutory School Admissions Code.</p> <p>All children whose Education, Health, and Care Plan names the school must be admitted.</p> <p>The School Admissions Code includes determining the oversubscription criteria if there are more applications than available places. Random allocation can be used either as a criterion or as a tiebreaker to decide between two applications that cannot otherwise be separated.</p>

12.	<p>School Communication</p> <p>When a child has multiple teachers at a middle or secondary school, how do parents make sure that all teachers are aware of their child's special educational needs and reasonable adjustments that are needed (my experience is that some teachers say that they were unaware of my child's needs despite me going to great lengths to communicate this with the school via the SENDCo before they started at the school and since they have been there).</p> <p>Response:</p> <p>If parents/carers have shared concerns with the school SENCo, it would be expected that relevant information would be circulated to all staff working with the child via internal school systems. The SEND Outreach Service teachers can meet with SENCOs to provide information and discuss the needs and appropriate provision for individual children who have transferred to a new school and who are currently on their caseloads.</p>
13.	<p>Expectations & Culture</p> <p>How can you develop an ethos of aiming to develop each child to their full potential, rather than accepting a bare minimum of achievement, in teachers who teach in Newcastle schools?</p> <p>Response:</p> <p>All headteachers in Newcastle have signed up to the Promise Board. This means that they have all agreed to aspire to achieve the very best for our children and young people in Newcastle. All our head teachers come together on a regular basis to share good practice and learn from each other.</p> <p>We have worked closely with parent/carers, educationalists, children and young people to develop Accessible Newcastle, we are using this as a way to create a platform for culture change across the city. Sharing good practice and setting out what our expectations are for inclusion. Here is the link to the wiki https://rixwiki.org/8973/</p> <p>If schools would like support with their current SEND provision, they can buy into the SLA's offered from the SEND School Effectiveness Team. This is a traded service within school effectiveness team.</p>
14.	<p>School Effectiveness Team</p> <p>What is the purpose of the school effectiveness team?</p> <p>Response:</p> <p>The work of the team is outlined on this webpage: School Effectiveness Services to Schools</p>
15.	<p>Dyslexia Support</p> <p>What support do Newcastle schools offer to parents and children when a child is found to have dyslexia?</p> <p>Response:</p>

There is a range of support provided by schools for individual children and young people with specific learning difficulties. For individual children, schools can access assessment, advice and support from the Specific Learning Difficulties (SpLD) team in the SEND Outreach Service which is available through the SEND Advice and Support Allocation Panel. This team also provides training designed to raise awareness in schools as well as school based 'drop in' sessions to talk through dyslexia friendly classroom approaches. Schools use the advice to inform general lesson/classroom planning, provision of resources and appropriate support and intervention.

SCHOOL EXCLUSIONS

16. What support is available to parents and children when a child is temporarily or permanently excluded from school?

Response:

Early help services are available to support parents at any point they feel appropriate, if a pupil is experiencing regular suspensions and the child has SEND, the school should be reviewing provision and working with parents – offering early help/family partner support at this point is appropriate. Support is also available via SENDIASS.

When a pupil is permanently excluded a referral to early help is made by NCC Access and Inclusion (A&I) team as part of the permanent exclusion process. Children who are permanently excluded continue to receive FSM through a voucher scheme and will be allocated a bus pass if the post-PEX education provision is beyond reasonable travelling distance.

Who is responsible for the child's education?

If they are suspended the school retains the responsibility.

If they are permanently excluded, the responsibility lies with NCC from days 6 following the exclusion.

What process is in place to ensure exclusions are fair, and not because of unmet need?

At the point NCC are notified of an exclusion, LA Officers will contact parents to explain the exclusion process timeline and the options open to them in relation to support available (e.g., early help services etc.). A&I Officers will take the lead organising 6th day provision for young people who do not have an EHCP and are not a Child in Care. When a child with an EHCP or is a Child in Care is at risk of exclusion SEN caseworkers and Virtual School Officers work with schools to explore alternatives to PEX. SEN caseworkers and Virtual School Officers are informed of a PEX and take the lead organising 6th day provision for young people who have an EHCP or are a Child in Care. Often SEN colleagues will request an emergency EHCP review is arranged prior to a PEX or before the Governing Body PEX meeting (with the aim that the PEX is

withdrawn before the GB meeting).

All schools must inform the LA of a PEX or suspension. Our schools are Academies and include the LA in the PEX process and provide any information related to the permanent exclusion on non-statutory basis. We work hard to develop, maintain and build positive relationships with school leaders and will advise around the legal processes. Most schools will provide detailed information around the exclusion (exclusion pack), including any risk assessments, safeguarding and SEND.

Using this information, NCC Access and Inclusion team review the exclusion pack which has been provided by the school to ensure the exclusion is lawful. A report is prepared for the Governing Board (GB) which includes suggested lines of enquiry governors may wish to follow during the GB meeting – these may include questions related to unmet need, identified SEND and provision – especially where the exclusion pack lacks evidence of the plan-do-review cycle or absence of reasonable adjustments/provision. NCC Access and Inclusion officers may attend the GB meeting if invited to do so or will send the report in lieu of attendance. A&I Officers will challenge the excluding school where there are gaps in the information provided in the exclusion pack.

If the GB upholds the Headteacher's decision to permanently exclude, parents are able to request an Independent Review Panel within 15 days of being informed about the decision. If parents wish to challenge this decision, parents can request an Independent Review Panel review the decision, a SEN expert is able to be involved if a parent requests it.

If needs are identified as being unmet, resulting in an exclusion, what action is taken to educate school and ensure appropriate actions are taken forward?

NCC has a wide offer of support around SEND and Inclusion, including EPS Core Training Offer, Inclusion network, Team Around the School, ASAP, LIP.

However, unless there is a significant safeguarding concern related to a PEX or the actions of a school, LAs do not have a statutory right to insist a school works with them.

Academies fall under the direction of the DfE and the Regional Schools Commissioner, who can/will raise concerns directly with schools, e.g. where NCC raises concerns regarding a school and the school is resistant to challenge/working with NCC to improve.

NCC SLT meet with DfE, the regional school's commissioner and Ofsted on a regular basis and raise concerns related to permanent exclusions during these meetings.

COMMUNICATION AND INTERACTION TEAM

17. ASAP Panel Timescales

What is the current waiting time for requests for support from the ASAP panel and how long does it take for this to be implemented?

Varies across service; some teams are able to respond and provide advice within a couple of weeks. Currently, due to high demand for the service, schools can be waiting up to 6 working weeks for advice and support for individual children with social communication needs following Panel allocation. We are continually reviewing the SEND ASAP offer to make sure we are working efficiently and in a timely manner across all teams and are hopeful that any waiting times will be reduced over time.

There is also a lot of advice available for schools and settings on our Local Offer pages for a wide range of SEND and there is an offer of both centralised and in school training from the team that schools can access.

SEN DEVELOPMENT AND ADMINISTRATION

18. EHCP Needs Assessment Process, Issuing Final Plans & Annual Reviews

What is the current wait time for EHC needs assessment?

We currently have 480 assessments ongoing. Of the 363 new requests we have received since the start of the academic year 2023/24 that have gone on to have an assessment, the average time between the date the request was received and start of the assessment is 2.5 weeks.

What is the current average time from the start of the process to the issuing of plans?

For the 304 EHC plans issued since the start of the academic year 2023/24, the average time from the date the request was received to the EHC plan being issued was 39 weeks.

What is the current average wait time for Annual reviews?

We currently have over 2800 EHCPs. We delegate responsibility to schools and settings to arrange and facilitate annual reviews. The SEND Caseworkers tend not to attend. We have recently reviewed our Annual Review process and this is the link to AR toolkit : [EHC Annual Review Toolkit for Schools and Settings | Newcastle Support Directory](#).

We do have concerns about the timescales however we are in process of reviewing how we report on the annual review data and our current figures



	are inaccurate, so we are unable to report. The SEN 2 data showed that overall, 12.8% of EHC plans were issued in the 20-week timescales (47.7% nationally) in 2022.

CHILDREN'S SOCIAL CARE	
19	<p>Breaks/Respite</p> <ul style="list-style-type: none"> There has been a lack of provision for several years, how is this going to be addressed? <ul style="list-style-type: none"> a) What provision is going to be put in place? b) Who will lead the commitment to ensuring this is done? <p>There is a community short breaks steering group which is looking at this and how we can improve accessibility to current provision.</p> <p>A short break review is underway with clear actions and timescales.</p>
20.	<p>Children with Disabilities Team</p> <p>Are there any plans to amend the criteria and access to the children with disabilities team for children who don't have a learning disability?</p> <p>Whether written or unwritten, this appears to be a barrier to help from this team.</p> <p>The criteria are on the local offer: Access to services</p> <p>Threshold criteria.</p> <p>Appropriate referrals are considered above, the information below considers the varying degrees of level of need and would provide sufficient information to determine whether a referral or assessment is required. A child will meet the criteria for an assessment and/or support if they:</p> <p>Are aged up to 18 years old and would ordinarily reside within the area of Newcastle upon Tyne. Has a physical disability or may have significant learning needs, such as a learning disability. The criteria may also include a chronic, life limiting condition or autism which significantly impacts on the child's emotional</p>

wellbeing and ability to be safe, equal and achieve, or has a profound sensory impairment which means that they are unable even with support to be safe, equal and achieving.

There must be clear evidence that the child's additional needs impact on family's choices and their opportunity to enjoy ordinary life. The degree of time, effort, energy and planning for support to meet the child's needs are far more significant that would be required to meet the needs of a neurotypical or non-disabled child of the same age. There needs to be evidence that the child's disability/ies have a profound and significant impact on their ability to enjoy ordinary day to day life, and to be safe, equal and achieving.

Evidence of complex needs (in addition to any behavioural problems including ADHD and that may be present) or have a serious or life-threatening illness. If the child or young person has autism, there needs to be evidence that there are complex needs associated with the diagnosis which show a clear and evidenced impact on the young person's ability to be safe, equal and achieving. We know that some young people with autism are in receipt of support from schools, colleges and partner agencies and do not always want or require significant amounts of support. For children and young people with autism, we need to understand what the additional role for a Social Worker would be that could not be met elsewhere and have a clear understanding of any additional needs associated with autism, and the impact of these. We need to establish the impact of any diagnosed disability on the child or young person and their family and be able to appropriately signpost if required.

There must be evidence that the child or young person's additional needs impact significantly on their ability to enjoy day to day activities, to achieve, and stay safe.

The day-to-day care of the child or young person must require a more significant level of input than the typical needs of a non-disabled peer of the child the same age. For example, the level of supervision required for a 15-year-old would be minimal for a neurotypical or non-disabled young person than it would be for a child with particularly complex needs.

The child or young person's level of disability cannot otherwise be met with the input of health professionals, mental health professionals, the EHCP process, education, or specialist services such as Early Help or children's continuing care that do not require a Social Worker.

They must require a significantly higher level of support in multiple areas of support as defined in the indicators of need guidance associated with the child and family assessments. This level of need compared directly to what would be expected for the typical needs of a similarly aged child who has no additional or complex needs.

Have a level of unmet need. This is particularly crucial in fair allocation of resources, as we know that some young people have similar needs and are in the same classes in specialist schools. The impact of a child's disabilities varies and every child is different, and we know that the impact is likely to be higher for

	<p>those children and young people who have one person who supports their day to day needs, compared to children and young people with more than one parent, and those with significant family networks who provide a range of practical and emotional support that lessens the impact of the caring role.</p> <p>Highlighted several of the 'lots' or 'exceptional' bands of support as highlighted in the indicators of need document.</p> <p>The indicators of need document is not an exhaustive list, but intended to identify descriptors of need and provide examples of what would typically determine a particular level of need.</p> <p>The CWD team manager does plan to produce an accessible criteria in addition to the full document.</p>						
21.	<p>Respite</p> <p>What provision is the council making for children that have a high level of need?</p> <p>Is it only Bedeburn that is available, or will parents have a choice of where to place their child?</p> <p>Currently the only respite facility offered for young children is Bedeburn and there are no daycare centers for respite.</p> <p>The Short Breaks Offer is detailed in the <u>Short Breaks Statement</u>; Bedeburn is available for complex children and young people and can provide overnight short breaks; this is the only in-house overnight residential provision the Council have. A child with additional/complex needs does not need a Social Worker or a package of care to access short breaks. There are a range of commissioned services in Newcastle and the wider area that parents/carers can access, self-refer to and take their child or young person to which are detailed in the Short Breaks Statement.</p>						
22.	<p>Summer 2024 Provision</p> <p>When will summer holiday respite/short break provision be published? Families need plenty of notice about the activities available for SEND children over the summer holidays, so they have the chance to look for funding or save to afford places.</p> <p>All activities will continue to be advertised on the local offer. We are working closely with HAF and youth services to ensure there are accessible activities for over the holiday periods.</p>						
	THERAPIES						
23.	<p>Waiting Lists</p> <p>What are the current waiting list times for the following and what dates are currently being worked?</p> <table><tr><td></td><td>Average Waiting time</td><td>Maximum Waiting time</td></tr><tr><td>SALT</td><td>35 weeks</td><td>72 weeks</td></tr></table>		Average Waiting time	Maximum Waiting time	SALT	35 weeks	72 weeks
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SALT	35 weeks	72 weeks					

OT	48 weeks	163 weeks
Physio	10 weeks	46 weeks
CYPS autism assessment	160 weeks	835 weeks
CYPS mental health pathway	18 weeks	60 weeks
CYPS neurodevelopmental pathway	38 weeks	95 weeks
CYPS learning disability pathway	23 weeks	46 weeks

Community Pediatrics

CYPS

OT

Physio

SALT

Continence Service

Wheelchair Services

- a) **Chair and cushion clinic**
- b) **Buggy clinic**
- c) **Specialist seating clinic**
- d) **Domiciliary visit**

Adaptions/Disabled Facilities Grant

a) OT assessment prior to referral (previously up to 3 years) and, once referred to Fairer Housing Unit (previous response was between 2-4 months)

There are currently 90 children and young people waiting for an OT assessment to meet an adaptation or equipment need at home with an average waiting time of approximately 10 months. The referral process has been streamlined. All referrals are now acknowledged and triaged within 10 working days. Priority is based on clinical need however the length of time a family has been waiting is also considered to ensure that all referrals gradually make their way up the waiting list. With the exception of 4 historical cases the date of the oldest referral is February 2023.

Commissioning and Social Care meet monthly with our commissioned OT Adaptations and Equipment service to monitor demand and progress. The aim is for waiting times to have reduced to 6-7 months by September 2024. This takes into account rising referral rates which during 2023 were 6-7 per month but are



now averaging 20 per month.

Once assessed and recommendations made average waiting times for allocation within housing pathways are as follows. Please note these pathways include both paediatric and adult cases:

Care and Repair Newcastle (CARN): Urgent cases 1.5 months, Routine cases 9.5 months. Oldest referral dated August 2022. Improved alignment of services has resulted in a reduction in waiting lists from 311 in December 2023 to 167 in February 2024.

Your Homes Newcastle (YHN): Equipment = 2 weeks (stairlift) to 6 months (hoist). Date of oldest referral is August 2023. Adaptation = Urgent cases 20 weeks, Standard cases 36 weeks. Date of oldest referral is July 2023.

Work to reduce waiting times further continues to be an active priority within both Housing and Occupational Therapy. The long term aim is to create a single service that delivers both Community OT and OT Adaptations and Equipment. This will reduce the number of times a young person is handed off from one OT to another significantly reducing assessment waiting times. Additionally, policy and processes within Housing pathways are under review to streamline systems to better meet need.

24. Therapies Review

- a) What progress has been made on the Therapies Review?
- b) When will this review be concluded?

What provision is in place to make sure that the children/young people need therapies while the review is underway have their needs met?

The Therapies Review was initially focused on bringing together a Newcastle Children's Therapies Offer which ranged from universal services through to specialist therapy provision, and covered speech and language, occupational and physiotherapies. We looked at how we might bring services together with one referral process and one place where information and advice about a range of needs could be accessible to families. This is still our aspiration for the city.

However, as we worked together on the Review, we have recognised that we there is work to be done to ensure that our individual therapy services are best equipped to meet the changing and increasing needs of our children and young people, before we then look at bringing them together. The focus of current work is on a review of our OT pathways, both in the community team and into the assessments for adaptations. In SALT, we are looking at the configuration of the service and the breadth of the graduated response. This work is likely to continue into the summer.

All therapy services are continuing with business as usual there are additional resources available to support children and young people whilst they are waiting for an assessment.

General support available

<https://www.newcastlesupportdirectory.org.uk/support-while-you-are-waiting-appointment-treatment>

Occupational Therapy

<https://www.newcastle-hospitals.nhs.uk/services/childrens-occupational-therapy-2/>



Speech and Language

[Speech and language therapy for children and young people - Newcastle Hospitals NHS Foundation Trust \(newcastle-hospitals.nhs.uk\)](https://www.newcastle-hospitals.nhs.uk)

NEAS Autism Hubs

[NEAS Autism Support Hub at Fawdon Centre | Newcastle Support Directory](#)

[NEAS Autism Support Hub at Galafield Family Hub | Newcastle Support Directory](#)

[NEAS Autism Support Hub at Byker Sands Family Hub | Newcastle Support Directory](#)

[NEAS Autism Support Hub at Nunsmoor Centre | Newcastle Support Directory](#)

HOUSING & ADAPTIONS

25. Service Improvements

What is being done to:

- a) Reduce the waiting time for adaptations?**
- b) Implement effective processes for referrals?**
- c) Progress requests once they have been received?**

Over the last 18 months, additional investment has been made in increasing the capacity to conduct OT assessments for adaptations. We have also moved away from OT assessments for adaptations being conducted by the in-house OT team at the Council. We recognise that there is work to do, to improve the efficiency of the pathway and to make the journey for families as seamless as possible. We have reviewed our services and are exploring ways to ensure an end-to-end pathway within the OT service, and better link up and progress through the onward housing pathways.

This work is taking a 'whole pathway' approach, looking at various aspects of the journey including:

The links between the community OT team and the adaptations assessment team

The presenting needs of our children requiring adaptations, particularly the increasing numbers of adaptations requested in connection with sensory and neuro-diversity needs

Ensuring understanding and best practice across the system in connection with meeting the changing needs of our children and young people

Ensuring smooth transitions between OT assessment and technical advice within the housing pathways

Considering capacity and lead times within the construction and supplies market and whether adaptations can be concluded in stages where appropriate, in order to minimize delay.

To ensure that needs can be met whilst this review concludes and a new pathway is established, we have commissioned an external provider, The Occupational Therapy Service, to undertake assessments for adaptations on behalf of the Council. This is a temporary arrangement. We meet with this



provider regularly to check on progress of cases.
Whilst we have taken time to survey the whole pathway, we absolutely appreciate the need to mobilise new arrangements as soon as possible. We are hoping to have a permanent pathway established in 6-9 months.

26. Adaptations

Many families are housed inadequately, and without due consideration to children or young people's needs, for example sharing of a bedroom where a child can be violent or unpredictable towards a sibling.

Are there any plans to review the 'scoring' system for families to take SEND into account?

Response:

Social Housing Applicants for families with SEND

The majority of social housing in Newcastle is allocated through Newcastle Homes, the council's choice-based lettings system. Social housing includes homes owned by Newcastle City Council and housing associations such as Home Group. Households are required to submit an application online which will ask them for details about:

- their household
- their current housing situation
- the reason they need to move.

Their application for housing is then assessed and the applicant will be advised about:

- whether they can join the housing register or not.
- What size property they will be able to bid for e.g., property with three bedrooms
- What priority band they have been placed in.

The Council's [Allocations and Lettings Policy](#) sets out the criteria that must be applied in making these decisions.

In recent years we have seen an increase in the number of applications that we receive in relation to families with children with SEND and are working to increase our understanding of the impact that this can have on families and how it affects that housing requirements. The circumstances of these households and the impact of the child's SEND can vary greatly, and each application is considered on a case-by-case basis. If a family with a child or children with SEND feels that their housing is having an impact on them or putting someone at risk of harm, we would ask that they contact the Housing Needs Assessment team who have responsibility for all health application decisions and banding appeals. They can be contacted on housingneeds@yhn.org.uk or alternatively they can contact their local housing office. The outcome of this may be that an extra bedroom is awarded or an increase in the priority status. There is more detail about this below.

When considering these requests, we would usually consider, but are not limited to, below:

- Where there is a formal diagnosis.
- If diagnosed, what meds/treatments are being used e.g., do meds help them sleep better etc.? Meds can help ADHD but no meds for autism so depends on presented issues.
- If diagnosed, does the child present behaviours that suggest they need their own room or would keeping consistency help.
- If there is violent behaviour, and significant risk to siblings we would award an extra bedroom even if diagnosis not completed. It would be expected that the family have taken the correct process to address this (visited GP/have services involved so diagnosis is being addressed) If other sibling is under 1 it is reasonable for the baby to share parents' rooms to alleviate any risk.
- Carer stress: Does the parent/s have a diagnosed mental health or physical health condition that means giving children separate rooms will help them meet the needs of the children as well as benefit them. For example, have they recently had to increase SSRI dosage due to home environment/parenting issues.
- Does the current home have a dining room that can be used by another sibling in the household freeing up a bedroom (we would usually recommend that diagnosed child be housed on same floor as parent/s. Especially if there are behaviours of climbing/opening doors/lack of danger)

We were asked the specific questions below some of which will be answered above.

Many families are housed inadequately, and without due consideration to child/ren's needs, for example sharing of a bedroom where a child can be violent or unpredictable towards a sibling.

As set out above when we are made aware of such cases we will consider the families housing application.

Additional Bedrooms

Our Allocations and Lettings Policy sets out the number of bedrooms that a household will be awarded. These are based on the criteria set by the DWP for certain benefits. In relation to children, it states that:

- One bedroom will be awarded to two children under the age of 10 regardless of sex
- One bedroom will be awarded to two children under 16 years of the same sex

We do, however, give consideration to exceptional circumstances that may warrant the award of an extra bedroom such as when a SEND child may be violent towards a sibling with whom they are sharing a room. In order for us to be able to do this we would need to be provided with supporting information from professionals. An extra bedroom would not be awarded solely on the basis

of a child having autism or ADHD, we would consider the impact this is having on the family and any risk posed. This means that some families will be awarded an extra bedroom/priority, and some may not. It would depend on the individual circumstances of an application and information provided. We would also note that waiting times are longer for larger properties so while an extra bedroom may be awarded the household may wait longer for re-housing as a result.

In addition to the above, we would also be able to award an additional bedroom if the DWP have applied an exemption from the bedroom tax due to the child having a medical need for an extra room. The DWP have advised us that they can provide a letter to the applicant confirming this if requested. This would be the quickest way for an extra bedroom to be awarded but again we would note that this may result in longer waiting times depending on the size of the property required.

Are there any plans to review the 'scoring' system for families to take SEND into account?

We don't operate a 'scoring system' as such, applicants needs are assessed and they are awarded one of the priority bands below.

Band A	Immediate and exceptional need or risk of serious harm
Band B	Urgent need
Band C	Medium housing need
Band D	Low housing need

When considering banding, in these cases we would usually award band C if an additional bedroom had been awarded and they lack this additional bedroom in their current property. In some circumstances, we may be able to award a band B but this would depend on the individual circumstances of the application and would only be in exceptional circumstances.

We recently reviewed our Allocations and Lettings Policy which included a period of consultation. The new policy has been agreed but not yet implemented. The new policy when implemented will not introduce any changes in relation to SEND and applications will continue to be considered as outlined above.

Social Housing Waiting Times

In recent years the demand for social housing has increased significantly. The average waiting time for a three-bedroom house for applicants in band C is currently 75 weeks. In 2022/2023 we only had 12 4-bedroom homes become available and had nearly 600 households in need of a four-bedroom house. If a household requires adaptations or an accessible property, they will wait significantly longer as there is a severe shortage of this type of property. This means that households will wait longer to be offered social housing, some people may never be made an offer for the type of property they need in an area that they would like to live. You can find out more about average waiting times, including a personalised search using the information below.

Social Housing Waiting Times tool

The **Social Housing Waiting Times Tool** is a tool that you and customers can use to find out the **average** waiting times for properties in the city. [Search properties - NewcastleHomes.org.uk](https://www.newcastlehomes.org.uk)

You can find instructions on how to use this by clicking on Housing Options>Social Housing Waiting Times on the Newcastle Homes website - <https://www.newcastlehomes.org.uk/content/HousingOptions/WaitingTimes>

You can personalise a search based on priority banding and household size. The screen shots below show the results of a personalised search for the average waiting times for applicants in band B in need of a three-bedroom property based on allocations made in the last years two years.

Applicants with specific needs such as adaptations, can expect to wait longer as the tool doesn't take into account such specific needs.

Mutual Exchange – House Exchange

Another housing option for existing tenants of social housing is mutual exchange, dependent on tenancy type. You can find information about Mutual Exchanges by clicking on Housing Options>Mutual Exchange [Mutual Exchange - NewcastleHomes.org.uk](https://www.newcastlehomes.org.uk) which provides an additional housing option to current tenants of local authorities and registered providers.

The Newcastle Homes website also includes information about housing options for older people, adapting your current home, the Private Rented Service etc., which may assist customers to consider other options or access advice or support to enable them to remain in their own home.

Search Details - 2 Years

Overall average waiting time

30 weeks

Best area

Byker (average 13 weeks based on 12 lets in the last 2 Years)

Most properties let

50 properties in Newbiggin Hall

Most bids

9722 bids in Fenham

[Back to property search](#)



Key

- Shortest average waiting times
- Middling average waiting times
- Drill down into this area

- Longest average waiting times
- No data available