**SEND and Inclusion Executive Board, Monday 16September 2024, 10am-12pm, Teams**

**Minutes**

**Present**

**Cath McEvoy-Carr** (Chair), Director: Children and Families, NCC

**Mark Patton** (MP), Assistant Director Children and Families, NCC

**Ian Dawson** (ID), Head of Educational Development and Inclusion, NCC

**Sarah Ledger** (SL),Performance Analyst, NCC

**Deanne Taylor** (DT), Head of SEND, NCC

**Jenny Ellis** (JE), Designated Clinical Officer for SEND, ICB

**Claire Taylor** (CT), Chief Executive Officer, Footsteps

**Adele Moore** (AM), Lead AssistantDirector CSC & EH, NCC

**Louise Melling** (LM), Preparation for Adulthood Lead, NCC

**Stella Wilson** (SW), Director of Operations, Family Health Clinical Board**,** NHS

**Christopher Rollings** (CRo), Headteacher, Hadrian School

**Gail Ballance** (GB), Head of Children, Young People and Community, ICB

**Sarah Newton** (SN), Community Clinical Manager, CYPS

**Sarah Francis** (SF), SENDIASS Manager, NCC

**Rachael Hope** (RH), Public Health Portfolio Lead, NCC

**Kelly McGuinness** (KM), Designated Social Care Officer, NCC

**Rachel Gibson** (RGi), Assistant Director at Newcastle College, Representative of the post 16 sector, Newcastle College)

**Miriam McGregor** (MM), Commissioning Lead Specialist, NCC

**Steve Gittins** (SG), Chair of SEND subgroup on behalf of the Promise Board

**Marie Leddy** (ML), Chair of Parent Carer Forum

**Christopher Richardson** (CR), CEO, Prosper Learning Trust

**Ed Wilkinson** (EW), Service Improvement Assistant, NCC (minutes)

**Apologies:**

Gareth Smith (Headteacher, Walker Riverside Academy)

Kim Barrett (Consultant Paediatrician and Designated Clinical Officer, ICB)

Johnathon Jamison (Assistant Director Community Support, NCC)

Anna English (Group Director, Central Locality Care Group, CNTW)

Hazel Newstead (Early Years SEND Lead, NCC)

Sarah Kerrigan (Service Manager, NCC)

Helga Charters (Associate Director of Nursing; Safeguarding, Learning Disability, MCA)

Richard Scott(Director of Nursing North, ICB)

|  |  |  |
| --- | --- | --- |
| 1 | **Welcome and Apologies** | **Action** |
|   | Chair welcomed all to the meeting.Apologies were noted. |   |
| 2 | **Minutes of last meeting** |   |
|   | Minutes agreed accurate. |  |
| 3 | **Revised SEF – Deanne Taylor** |   |
|  | **Document shared in meeting papers pack.*** This is a revised version of the document previously shared to provide a general overview of our strengths and partnership working but also our challenges and focus areas, with further detail in story boards.
* It has been co-produced with the Parent Carer Forum, and partners from health and social care whilst following feedback from the DfE.
* Work is still being completed on some of the story boards (in particular the timescales).
* This is a live document that will be continually updated (termly) and brought to SEND Executive Board.
* **CRo** – raised the importance of being consistent in terminology around Specialist schools. Some reports are still stating ‘Special Schools’, which should be avoided.
* **SW** – queried where the data in the report has come from – **DT** confirmed that the data comes from NECS. **SW** to report back to the board if there are any issues with the data.

**Chair** confirms with the board that this is the final dynamic self-evaluation, and will be submitted to OFSTED when required. It will be held at the GIRT workstream and updates will be overseen by the Board on a termly basis. |  |
| 4 | **SEND and Social Care Draft Work Plan for Approval – Kelly McGuiness** |  |
|  | **Document shared in meeting papers pack.*** This document is still in draft and has been created as part of the Social Care/ SEND interface workstream.
* Lots of work has been completed around the Education Health and Care Plan (EHCP) processes.
* We are looking to provide a training package for all new and existing staff around the SEN process and requirements for EHCPs.
* The community short breaks offer is also under review and the revised statement is being produced.
* **Chair** – recommended the work plan to include an overview of the number of children that are on the waiting list for residential short breaks at Bedeburn and how this is managed.

**KM** confirms that refreshing SEND champions in Social Care to continue to promote SEND and provide points of contact to support Social Care and Early Help staff is included in the plan.**Actions:** **KM** – to add the number of children on the waiting list for Bedeburn to the SEND and Social Care Work Plan to help identify any challenges in short breaks.**KM** – to provide an update in respect of the community short break offer at the next SEND and Inclusion Executive Board meeting. | **KM****KM** |
| 5 | **Early Years ARPs Draft Report – Deanne Taylor** |  |
|  | **Document shared in meeting papers pack.*** This report is confidential at this stage.
* Hazel Newstead has reviewed the Additional Resourced Provision (ARPs) at the request of schools.
* There is a challenge that young people are being assessed in ARPs but then no ongoing pathways can be identified due to the limited capacity available.
* This has led to some children remaining in ARPs longer than the supposed maximum of 2 years.
* The majority of children have moved onto specialist provision or an independent school.
* **Chair** – reflected that it must be frustrating for parents/ carers and the local authority to have the opportunity to provide the support in assessment but not always be able to move them into a resource that will meet their needs.
* **MP** – gave support that this review is positive and necessary to make sure that the pathways for all children are clear and helpful.
* Discussions are ongoing at Education and Skills Leadership Team meetings and with individual schools to agree next steps.
 |  |
| 6 | **Rapid Process Improvement Week (RPIW) plan – Deanne Taylor / Jenny Ellis** |  |
|  | **Plan shared in meeting papers pack for approval.*** Rapid Process Improvement Week (RPIW) looked at our Special Educational Needs (SEN) process and Education Health and Care Plan (EHCP) process as a system across health (Integrated Care Board; Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust; Newcastle upon Tyne Hospitals NHS Foundation Trust), Local Authority, Social Care, and Parent Carer Forum.
* A week was spent with a focus on quality considering the SEN and EHCP processes from start to finish.
* The aim was to improve the timeliness of EHCPs and the quality of advice provided.
* Out of this work came the 12 month action plan, shared in the meeting papers.
* At the end of the action plan process, we should have a gold standard process that will work better for our children, families, and staff.

**Next Steps:*** Work has already started, meetings are currently ongoing, and actions listed in the Action Plan will run alongside each other.
* Partners involved in this work have agreed to working as a system.
* The Improvement Plan will be monitored by NHS England over the next 12 months to ensure key deadlines are being met. Regular meetings are scheduled with Rachel Wilcox from NHS England.
* **CRo** offered to take some ownership of the work to consult parents and in the sharing of key information for the RPIW action plan work.

**Actions:****CRo** link with PCF to help with consultation of parents as work progresses on the RPIW Action plan.**DT/ JE/ ML** to bring update on progress of RPIW Action plan work to the January SEND Exec Board meeting. | **Cro, ML****DT, JE, ML** |
| 7 | **SEND Outcomes Framework/Data Dashboard Exceptions Report – Sarah Ledger / Deanne Taylor / Jenny Ellis** |   |
|   | **Documents shared in meeting papers pack.****SEND Outcomes Framework and data dashboard:*** The dashboard has been updated with data and anything published before June.
* The commentary from colleagues has also been updated to reflect the latest data.
* To note: a calendar of the latest published data has been added, so each of the updates provide what you should expect to see in terms of the published data.
* **DT** – confirms that this document will be submitted as part of inspection documentation.
* **MP** – Are all partners sufficiently clear about the level of detail that is in the report and are they able to speak to it during an inspection?
* **SW** – Questioned the data source for Health information and need to ensure that this is 100% accurate.
	+ **Chair** – We could look to putting on some quick virtual workshops across the system to help facilitate this and raise staff’s knowledge base.
	+ **DT** – We need to ensure the data is accurate and agreed before we do this.
	+ **SW** – Confirms that this would be useful, and that Ewan Dick should be able to help confirm this.
	+ **JE** and **SW** to have further conversation to facilitate this.

**Action:****JE** and **SW** – to meet to discuss with Ewan Dick the accuracy of the data in the SEND Outcomes Framework before progressing with workshops for staff.**Exceptions report:*** This document draws out and summarises some key issues from the Outcomes Framework with relevant data and actions.
* We have an additional performance management tool in development for our caseworkers, in Power BI, that is almost ready. This will help caseworkers to manage and prioritise their caseloads.
* A slight correction is required in section 2.1, for the local data for the EHCP plan time scales being issued within 20 weeks, it is not 4.3%, it's 6.9%.
* The number of new assessment requests (data for the full academic year) received this year was 745, 18% higher than the year before.
* The monthly data for the average time taken to assess an EHCP plan is still high, but it has decreased from an average of 40 weeks to 35 weeks, still remaining above the 20-week target.
* We have a lower proportion of open assessments over 20 weeks this academic year compared to last year, and the number open over 30 weeks (top end), is reducing.
* Last year, we incorporated collecting the views of our children and young people with our new annual review paperwork across the five overarching outcomes.
	+ This led to an increase in responses, reaching over 150.
	+ Through this, we can see that the majority of our children feel that they are happy, they feel safe and included, and are healthy.
	+ We have seen a particularly high response rate from our specialist schools.
	+ We will feedback to the SENCO network in the Autumn Term.
* **Chair** – We know our EHCP timeliness is a significant challenge and there are conversations being had in relation to increasing the funding for this. There are positive messages in the report, particularly in the reduction in the number of open assessments over 20 weeks. I am very pleased to have children’s views in the document and having an evaluation of this provides a strong message. We could consider cross-referencing these with parent/carer views.
* **Chair** – We also need to contextualise better why, in terms of the outcomes data, our specialist school attendance is below the North East average because from the headline figures alone, it does look like there is a challenge for us.
	+ **MP** – it is worth clarifying that there is significant variation across specialist providers, and there is further work to be done to support some specialist providers to support them and their families.
 | **JE / SW** |
| 8 | **Review of Mental Health, Learning Disability and Neuro Pathway – Gail Ballance** |  |
|  | * We are currently working to transform the pathways to support our children and young people across Mental Health, neurodiversity and Learning disability.

**Slide presentation shared on screen, summary provided below:*** Last year in Gateshead we were asked to undertake a review of the single point of access (SPA) and their Getting Help services, to understand why we were seeing such an increase in referrals through the SPA into mental health service and the neurodevelopmental diagnosis service.
* The review identified that there had been a significant increase in referrals but also that Health alone could not solve this challenge due to the complexity of the referrals.
* Across system cooperation would be needed to address these challenges.
* We are now speaking to Newcastle partners to understand the landscape and unique issues and challenges.

 **Challenges facing CNTW with referrals*** From 2019/20 to 2023/24, there has been a 71% increase in the number of referrals through SPA for Newcastle and Gateshead.
* The largest proportion of referrals in Newcastle come from the Outer West PCN.
* The CYPS (AMS) Service users aged 6-13 has shown the largest increase in referrals from 1194 (in 2019/20) to 2218 (in 2023/24).

**Key issues identified from work with Gateshead*** We found that the single point of access was not a single point – there are multiple points for referrals to go in.
* The current system operates in silos – Mental Health issues will not be solved without taking a wider holistic approach.
* Not all services have an understanding of what is available, so families are not always signposted to the most appropriate offer.
* There is a need to provide support much earlier, before children and young people need specialist intervention.

**Next Steps*** We need to:
	+ Take a system approach to the redesign.
	+ Move away from a culture of diagnosis led towards a needs led approach.
	+ Embed the voice of children and young people to ensure support is what they want – member of children's parliament has been very vocal that their counselling was not helpful.
	+ Move towards early intervention into communities where families are comfortable.
	+ Develop a graduated response that is person-centred and meets individual needs.
* We do expect this to take some time due to cooperation with partners and procurement processes.
* We recognise children and young people need support now, so we are working to see what can be implemented into the pathways now to ensure the right support is available.
* This will include:
	+ Connecting health services with voluntary sector partners to improve signposting.
	+ Introducing a second Mental Health in Schools team through the Children’s Society for Newcastle
	+ Pilot project with schools called PINS to improve support for children with neurodiversity needs.
	+ Additional investment through CNTW to Toby Henderson Trust to undertake additional autism assessments and Kalmer Counselling
	+ Development of accessible multi-agency sessions for families referred into the Neurodevelopment pathway in local communities (family hubs) and a digital offer on the Children and Families website.
* **GB** agreed the need for a timeline, and an outline action plan and data will be provided on the redesign.
* **GB** also to share an updated report on the data and specific data by PCN with **MP** to assist with ongoing work to strengthen the interface with PCNs.

**Actions:****GB** – to share timeline, outline action plan and latest data at the next Exec Board.**GB** – To share an updated report on the data and specific data by PCN with **MP** to assist with ongoing work to strengthen the interface with PCNs. | **GB****GB** |
| 9 | **SEND Placement Planning Update and SEND Capital Spend – Deanne Taylor** |   |
|   | **Document shared in meeting papers pack.*** This is an annual report that comes just before we submit our returns to the DfE.
* It outlines how we spend our high needs capital allocation.
* There were 3 aspects agreed last year:
	+ To increase capacity in specialist schools
	+ To improve accessibility in mainstream
	+ To scope out new development for a new free school
* These same 3 aspects remain for this year.
* This is not in the report, but we propose to use approximately £2 million of the unallocated spend to the proposed new specialist freeschool bid.
* We also still require an improvement in accessibility in schools and the addition of safe spaces in general school environments. We have done some great work with 22 schools on this so far this year.
* We are currently looking for innovative solutions on how to increase capacity in specialist schools and are asking for allocation to be granted to this. Further updates will be shared.
* The appendix details which schools have been invested in and the reason for the investment.
* The return will be submitted to the DfE on the 1st of October.
* **CRo** – Huge thanks shared from Hadrian, the funding for the accessible toilets and changing facilities is a huge step forward for our provision.
* **CRo** – Is there a Plan B that can be shared if the free school is not ready in time?
	+ **Chair** – building a new school and finding the funding to build a new school is a real significant challenge . It is regularly monitored through the Children and Families Capital Programme Board and Corporate Capital Program Board. We will not be in the position to start building for at least two years and we cannot guarantee that it will be built within the timeframe.
	+ **MP** – the construction work will not be completed by the council; it will be carried out by a procured contractor meaning there are some big external influences that we do not have control over. We will do our best to mitigate this risk but unfortunately there isn’t any more detail that we have on this now.
* **CRo** – Some local authorities are repurposing empty space in Mainstream schools for SEND**.** Does Newcastle have any surplus space in mainstream?
	+ **MP** – There is ongoing work looking at mainstream schools who do have projected surplus space, and we will continue to monitor this. Newcastle is a growing city and continues to grow in core population because of housing developments and inward migration. It is difficult to forecast this inward migration which adds to the complexity of this.
	+ **Chair** – This is an important point to raise and is something that we are aware of and talk with the DfE about on a termly basis. School place planning overall has always been a challenge for us, and specialist provision is even more challenging, so we know it is an issue.
 |  |
| 10 | **SENDIASS Annual Report – Sarah Francis** |   |
|  | **Document shared in meeting papers pack.*** This report reflects what SENDIASS has faced and what we have achieved.
* We now have an advisory group with key stakeholders from education, health, social care and parent/carers. This means that we are now fully compliant with the National Minimum standards written by CDC.
* These minimum standards are currently encouraged as best practice, but they will become a statutory obligation.
* This group has been a good opportunity to reflect on the service and to agree priorities.
* We have also started to quantify our cases differently this year.
* Families will often come for help and advice multiple times at different stages of their journey, recorded as one case when it amounts to 3 or 4 large pieces of work.
* CDC have recommended the need to recognise a truer picture of the work being done, so we now track the number of people using the service and now the number of pieces of work too.

**SENDIASS has agreed priorities for the next academic year:*** We want to get back to utilising volunteers – we have seen a big increase in parents who are illiterate or cannot access written information. We do not have the capacity to fill in forms or write letters with parents/carers, but we recognise this need. We are now in the process of recruiting and looking at volunteers to help close this deficit.
* This year we propose to host clinics, like we do for children and young people, but in different languages so all parents/carers can access the advice and support they are entitled to.
* SENDIASS currently commission training, but we also want to provide training directly. SENDIASS have met with various teams across Education, Health, and Social Care to talk through what SENDIASS does and SEND processes. We have 9 further training meetings scheduled for this term.

**Data from this year:*** We have had 2237 cases this year and the demand continues to increase.
* We are seeing now, when things go a little bit wrong, it is impacting on every aspect of the child’s life.
* We breakdown our cases into different categories of education, health and social care. Of the 2237 total cases, 1490 were related to education, health, and social care combined.
* We have done a lot of work this year to push for children and young people to use the service.
* The service is now becoming better known amongst schools and settings.
* We have also found that children and young people with emotional based school avoidance are now engaging with SENDIASS.
* 1325 people have accessed the service, of these, 365 were children and young people which is the largest proportion in the North East.
* We still have many professionals accessing the service for impartial advice, and we always encourage this.
* We have provided training this year to 247 professionals including legal training and SEND process training. We are working to upskill professionals across education, health, and social care to help reduce misinformation.

The case study in the report this year reflects a big bit of learning for us as a service. We now have regular clinics in place at schools. We are seeing the clinics can change the way in which schools respond and how they function. By having a SENDIASS worker in school doing sessions with children, a school has become aware of gaps in their system. Because of this, they have changed and adapted a lot of their processes.**Further discussions:****DT** – The ICB and local authority jointly commission Skills for People to support capacity with our Parent Carer Forum and help to widen the representation of parents. We had a conversation to consider linking SENDIASS workshops (that support parents who do not have English as their first language) to connect more parents to Parent Carer Forum and hopefully develop involvement in these communities. **SF** – Updated the board that discussions are ongoing with Marie Leddy to agree practicalities and find available dates. **Chair** – SEND processes are very code of practice orientated, and that sometimes it is not easy to understand. If parents/carers have literacy barriers on top of this, it is a challenge. We do need to think how we better support these families. **DT** – Shared that the local authority have committed to review all correspondence as part of the RPIW. The majority of them are now available in easy to read format. We also try to promote the Local Offer with talking heads and explanations, but this is still not widely used. **SF** – shared that SENDIASS promote the local offer at sessions and actively share links to the Local Offer pages. **Chair** – It is interesting that we are still not getting traction on the Local Offer despite these efforts.**MP** – Raised the possibility of separating comments from parents and carers from those made by children and young people; to help to make sure that we seek and listen to the voice of children and young people in the city.**SR** – Agreed that going forward these would be separated. * **CRo** – SENDIASS might be interested in the North East Children with Additional Needs Network (NECWAN) who are doing work to promote parents needs too, which might be something to follow up.

**Action:****CRo** – to share details of North East Children with Additional Needs Network with **SF.** | **CRo** |
| 11 | **Draft SEND Transitions Guide for Approval – Louise Melling** |  |
|  | **Document shared in meeting papers pack.*** This document covers a whole host of information and links to our Local Offer for all to access.
* We worked with parents and carers, representatives from health, education, social care, and school settings to help us pull the information together.
* A draft has been presented to parent/carers and consulted on. We did not receive much feedback from this.
* If the document is approved today, we will take it to the parent carer drop-in sessions to discuss functionality and accessibility.
* We will continue to update this document based on feedback.
* We are also looking at doing a specific guide around year 9 reviews.
* **Chair** – During the thematic review, most parents said that they had not received information about Transitions. It is important to share this document with parents/carers with a child or young person who has special educational needs, or an EHCP, who is in year 7 or above in school or are elective home educated too (of secondary age).
* **DT** – the document can be shared with all Secondary Headteachers.
* **DT** and **ID** agree the document should be shared at the Secondary Heads meeting.
* **ID** – raised the importance of the careers and guidance team having this document to ensure all careers leads in schools have access.
* **CRo** – shared that Hadrian school plan to use a distilled version of the report as part of their Annual Review system for year 5 and year 6 in particular. I think asking the specialist schools to have it as part of the review system would make perfect sense.
* **MP** – shared the recurring challenge of achieving full accessibility of important documents such as this.
	+ **Chair** – we do need to consider if there are requests for this document to be translated, how might we do this.
	+ **ML** – when documents are uploaded to the Local Offer, the document can be translated using google, but people do not necessarily know this is possible.
	+ **Chair** – we could consider doing some random testing with parents/carers in the new year to ask: have they seen it? and did you understand it? **DT** – shared agreement and added this could be done in the Spring Term.

**Action:****RH** – To ask for some advice from public health literacy lead to help ensure all families can access and understand the Transitions Guide.**DT** and **LM** to investigate in the Spring Term if the Transitions Guide has been seen by parents and if they understand it. | **RH****LM/ DT** |
| 12 | **EHCP Audit Proposal – Deanne Taylor** |  |
|  | * We are currently committed through our quality assurance framework that we audit 10 EHCP plans each term.
* Currently, we have a multiagency audit team that meet in person at the Civic Centre.
* We have not had the capacity to audit as many as we need to – around 7.
* I’m proposing that we have up to 50 (sometimes more) auditors from all Services that are committed to doing an audit each term for a maximum of 1 hour.
* The EHCP to audit will be shared via a link, and volunteers will just be expected to audit it at some point within each term.
* Increasing the number of auditors should lead to an increase in evidence gathering and improvements in the quality of plans.
* We are also looking to allocate a Service Improvement Assistant to telephone more families as their plans are getting finalised to further increase the evidence collection and improvements made.
* We have invested in the Envision Annual Review audit tool. We are going to test and report findings through the quality assurance getting it right together workstream.
* Once we have the names of the auditors, we will have a drop-in session to run through the Envision tool.
* **Chair** – I think it would be useful to have members of this board as volunteers as it is important that all understand the quality of EHCPs. Can members of the board indicate if they are willing to do an audit a term and if not, can they identify somebody else from their own service.

**Action:****ALL** – to consider joining the pool of EHCP auditors, and if not able to, identify someone from their service who would be able to. | **ALL** |
| 13 | **AOB** |  |
|  | **APP meeting – Deanne Taylor*** We are still subject to the Accelerated Progress Plan (APP).
* DfE and NHS England are meeting with the local authority on 15 October and they expect to see a robust plan for when our timescales will improve.
* Actions will be shared with the SEND Exec Board

**Inspection Preparation – Deanne Taylor*** We had 2 online sessions.
* These were well attended across Education, Health, and Social Care.
* When we do receive the call, 6 case reviews will be expected.
* In preparation for the inspection, DfE SEND Lead will be undertaking 4 mock case reviews. These will be randomly selected, and we will have a multiagency audit.

**Update on Therapies commissioning – Jenny Ellis*** There will be an end to end service involving the ICB communications team and local authority communications team to have a consultation process over 4 weeks.
* We are feeding back next steps and results of the thematic annual review to local area directors.
* These next steps will be brought to the next board meeting in a full update.

**Action:****JE/ SK –** bring full update on Therapies commissioning to the next SEND Exec Board meeting on 11.11.24.**Dynamic Support Register update – Jenny Ellis*** Work is ongoing and we are meeting monthly.
* Meetings are being held by the ICB.

**Request to change SEND Exec Board meeting dates*** Due to a request from School colleagues, we are working to identify a different day for future meetings after November (11.11.24)
* This is because schools receive their OFSTED call on a Monday morning.
* We will provide an updated schedule of dates when they have been agreed.

**Update from Parent Carer Forum next Meeting – Chair** It would be useful to receive an update on the work being done, particularly with Skills for People and the numbers involved now. | **JE / SK** |

**Action summary from this meeting**

| **Agenda Item no.****Date of mtg** | **Action** | **Owner** | **Due by date** | **Status** |
| --- | --- | --- | --- | --- |
| 416.09.24 | Add the number of children on the waiting list for Bedeburn to the SEND and Social Care Draft Work Plan to help identify any challenges in short breaks. | KM | November | Open |
| 416.09.24 | Bring Community Short Break Offer report to the 11.11.24 SEND Executive Board. | KM | November | Open |
| 616.09.24 | Meet with **CRo** to discuss helping with consultation of parents as work progresses on the RPIW Action plan. | CRo / ML | November | Open |
| 616.09.24 | Bring update on progress of RPIW Action plan work to the January SEND Exec Board meeting. | DT / JE / ML | January | Open |
| 716.09.24 | Meet to discuss with Ewan Dick the accuracy of the data in the SEND Outcomes Framework before progressing with potential workshops for staff. | JE / SW | November | Open |
| 816.09.24 | Share timeline, outline action plan and latest data for Review of Mental Health, Learning Disability and Neuro Pathway with the SEND Exec Board. | GB | November | Open |
| 816.09.24 | Share an updated report on the Review of Mental Health, Learning Disability and Neuro Pathway data and specific data by PCN with **MP** to assist with ongoing work to strengthen the interface with PCNs. | GB | November | Open |
| 1016.09.24 | To share details of North East Children with Additional Needs Network with Sarah Francis. | CRo | November | Open |
| 1116.09.24 | Ask for advice from public health literacy lead to help ensure all families can access and understand the Transitions Guide. | RH | November | Open |
| 1116.09.24 | Investigate in the Spring Term if the Transitions Guide has been seen by parents and if they understand it. | DT / LM | January | Open |
| 1216.09.24 | To consider joining the pool of EHCP auditors, and if not able to, identify someone from their service who would be able to. | ALL | November | Open |
| 1316.09.24 | Bring full update on Therapies commissioning to the next SEND Exec Board meeting on 11.11.24. | JE/ SK | November | Open |
| 20.05.2024 | Ask about the ability of adding post-16 data to the dashboards | SF | June | Open |
| 20.05.2024 | Check whether the early years data reflects children attending other settings or only those at maintained nurseries. | ZF | June | Open |
| 20.05.2024 | Provide a list of hourly rates for providers as an appendix to the contract specification. | MM | Sept | Open |
| 508.07.2024 | Send Celebration Events evaluation to be shared at the next board meeting. Deferred until November meeting. | DT/AB | Sept | Open |
| 10.08.07.2024 | Access Fund EOY evaluation report to be added to the forward plan for January | EN | Sept | Open |