Children and Young People Scrutiny Committee

Date: Wednesday, 4 March 2020
Time: 10.00 am
Venue: Town Hall Extension

Everyone is welcome to attend this committee meeting.

There will be a private meeting for members of the Committee at 9.30 am in Committee Room 6, Room 2006, Level 2 of the Town Hall Extension.

---

Access to the Council Antechamber

Public access to the Council Antechamber is on Level 2 of the Town Hall Extension, using the lift or stairs in the lobby of the Mount Street entrance to the Extension. That lobby can also be reached from the St. Peter’s Square entrance and from Library Walk. There is no public access from the Lloyd Street entrances of the Extension.

Filming and broadcast of the meeting

Meetings of the Children and Young People Scrutiny Committee are ‘webcast’. These meetings are filmed and broadcast live on the Internet. If you attend this meeting you should be aware that you might be filmed and included in that transmission.

---

Membership of the Children and Young People Scrutiny Committee

Councillors –
Sameem Ali, Aliah, Cooley, Hewitson, T Judge, Kilpatrick, Lovecy, McHale, Madeleine Monaghan, Reeves, Reid, Sadler, Stone (Chair) and Wilson

Co-opted Members -
Ms S Barnwell, Ms Z Derraz, Mr L Duffy, Ms J Fleet, Mrs J Miles, and Dr W Omara
1. **Urgent Business**  
   To consider any items which the Chair has agreed to have submitted as urgent.

2. **Appeals**  
   To consider any appeals from the public against refusal to allow inspection of background documents and/or the inclusion of items in the confidential part of the agenda.

3. **Interests**  
   To allow Members an opportunity to [a] declare any personal, prejudicial or disclosable pecuniary interests they might have in any items which appear on this agenda; and [b] record any items from which they are precluded from voting as a result of Council Tax/Council rent arrears; [c] the existence and nature of party whipping arrangements in respect of any item to be considered at this meeting. Members with a personal interest should declare that at the start of the item under consideration. If Members also have a prejudicial or disclosable pecuniary interest they must withdraw from the meeting during the consideration of the item.

4. **Minutes**  
   To approve as a correct record the minutes of the meeting held on 5 February 2020.

5. **Annual Report on Special Educational Needs and Disability (SEND)**  
   Report of the Strategic Director of Children and Education Services

   This report sets out in detail the legal and strategic context in which services are delivered to children with SEND, a profile/demography of need in Manchester and an outline of the advice, support and services that are available for children and their families. In addition, the report details how children and their families are influencing and shaping how agencies/services work together so that Manchester City Council and its partners continually improve the experiences and outcomes of children with SEND.

6. **Improving Children’s Outcomes Through Collaboration and Working in Partnership in a Locality**  
   Presentation of Children’s Services and Manchester Local Care Organisation (MLCO)

   This presentation provides an update on the development of the Children’s Services Locality Model and partnership working with the MLCO.
7. **Early Years Service**  
   Report of the Strategic Director of Children and Education Services

   This report provides an update on the strategic and operational priorities in relation to Early Years.

8. **Overview Report**  
   Report of the Governance and Scrutiny Support Unit

   This report provides the Committee with details of key decisions that fall within the Committee’s remit and an update on actions resulting from the Committee’s recommendations. The report also includes the Committee's work programme, which the Committee is asked to amend as appropriate and agree.
Information about the Committee

Scrutiny Committees represent the interests of local people about important issues that affect them. They look at how the decisions, policies and services of the Council and other key public agencies impact on the city and its residents. Scrutiny Committees do not take decisions but can make recommendations to decision-makers about how they are delivering the Our Manchester Strategy, an agreed vision for a better Manchester that is shared by public agencies across the city.

The Children and Young People Scrutiny Committee reviews the services provided by the Council and its partners for young people across the city including education, early years, school standards and valuing young people.

In addition to the elected members the Committee has seven co-opted member positions. These are:

- Representative of the Diocese of Manchester – Vacant
- Representative of the Diocese of Salford – Mrs Julie Miles
- Parent governor representative – Ms Samantha Barnwell
- Parent governor representative – Dr Walid Omara
- Parent governor representative – Ms Zainab Derraz
- Secondary sector teacher representative – Mr Liam Duffy
- Primary sector teacher representative – Ms Joanne Fleet

The co-opted members representing faith schools and parent governors are able to vote when the Committee deals with matters relating to education functions.

The Council wants to consult people as fully as possible before making decisions that affect them. Members of the public do not have a right to speak at meetings but may do so if invited by the Chair. If you have a special interest in an item on the agenda and want to speak, tell the Committee Officer, who will pass on your request to the Chair. Groups of people will usually be asked to nominate a spokesperson. The Council wants its meetings to be as open as possible but occasionally there will be some confidential business. Brief reasons for confidentiality will be shown on the agenda sheet.

The Council welcomes the filming, recording, public broadcast and use of social media to report on the Committee’s meetings by members of the public.

Agenda, reports and minutes of all Council Committees can be found on the Council’s website www.manchester.gov.uk

Smoking is not allowed in Council buildings.

Joanne Roney OBE
Chief Executive
3rd Floor, Town Hall Extension,
Manchester, M60 2LA.
Further Information

For help, advice and information about this meeting please contact the Committee Officer:

Rachel McKeon
Tel: 0161 234 4497
Email: rachel.mckeon@manchester.gov.uk

This agenda was issued on Tuesday, 25 February 2020 by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension (Lloyd Street Elevation), Manchester M60 2LA
This page is intentionally left blank
Children and Young People Scrutiny Committee

Minutes of the meeting held on 5 February 2020

Present:
Councillor Stone – in the Chair
Councillors Alijah, Hewitson, Kilpatrick, Lovecy, McHale, Madeleine Monaghan, Reid, Sadler and Wilson

Co-opted Voting Members:
Ms Z Derraz, Parent Governor Representative
Ms S Barnwell, Parent Governor Representative
Dr W Omara, Parent Governor Representative

Co-opted Non Voting Members:
Mr L Duffy, Secondary Sector Teacher Representative
Ms J Fleet, Primary Sector Teacher Representative

Also present:
Councillor Leese, Leader of the Council
Councillor Bridges, Executive Member for Children and Schools
Councillor Ollerhead, Executive Member for Finance and Human Resources
Councillor Flanagan, Ward Councillor for Miles Platting and Newton Heath
Detective Superintendent Jamie Daniels, Greater Manchester Police (GMP)

Apologies:
Councillors Cooley, T Judge and Reeves
Mrs J Miles, Diocese of Salford Representative

CYP/20/08 Minutes

Decision

To approve as a correct record the minutes of the meeting held on 8 January 2020.

CYP/20/09 Publication of Greater Manchester Mayor, Independent Assurance review of the effectiveness of multi-agency responses to child exploitation in Greater Manchester

The Committee received a report of the Strategic Director of Children and Education Services which informed Members of the work that had been undertaken within the Council following the issues being raised that led to the Mayor’s Independent Assurance Review and provided reassurance that the response to the exploitation and abuse of children had strengthened significantly in Manchester.

The Chair began by stating that this was an issue of great concern to the Committee and that their thoughts were with the people affected. He advised that the Committee had scrutinised the work on complex safeguarding over the past few years, through report and visits, but still had questions and concerns that they wanted to raise through this meeting.
The Deputy Director of Children’s Services introduced the report, highlighting that the Council had been pro-actively working with GMP to make improvements in response to the emerging findings from the review, without waiting for the report to be published. He also advised that, where appropriate, employees from the time period that the report covered had been referred to the relevant regulatory body.

The Executive Member for Children and Schools drew Members’ attention to the statements that the Council had issued following the publication of the report. He advised the Committee that there had been significant changes made since the time period which the report covered but that the Council could not be complacent on this issue.

The Leader outlined his role in safeguarding, following the introduction of the Children Act 2004, which had been implemented in 2006. He informed Members that he was responsible for ensuring the adequacy of the Council’s safeguarding responsibilities and outlined how he did this. This included monthly meetings with the Executive Member for Children and Schools and quarterly meetings with the Chief Executive and Executive Members and members of the Senior Leadership Team with responsibility for safeguarding adults and children, where performance indicators were reviewed and issues discussed.

The Chair highlighted that at the meeting of the Council on 29 January 2020 Members had agreed a pledge on safeguarding children.

Some of the key points and themes that arose from the Committee’s discussions were:

- The issue of Manchester children being placed in homes outside of the city and non-Manchester children being placed in homes within the city and how to ensure safeguarding in these cases;
- How patriarchal attitudes at the time contributed to an environment where the sexual abuse of girls was not effectively challenged;
- Problems with GMP’s new computer system iOPS;
- What was being done to engage with shopkeepers and others in busy retail districts who might spot issues of concern in their area;
- Working effectively with other Council services, such as taxi licensing, to address child sexual exploitation;
- Concerns that the team undertaking the review had not been able to obtain all the relevant information and, that, in addition to the ongoing criminal investigation, further investigation should take place of the failings of the Council;
- Changes in the methods being used to groom children, including via social media; and
- That all Councillors would receive training on issues such as their corporate parenting responsibilities and the exploitation of children and that, as the perpetrators in these cases had come from particular communities, Ward Councillors from these communities could play an important role.
The Deputy Director of Children’s Services informed Members of the safeguards in place for children living in residential children’s homes, regardless of where the home was. These included visits from Social Workers, reviews of the care plans for individual children by an Independent Reviewing Officer, oversight of homes from commissioning services, inspection and monitoring visits from independent professionals under Regulation 44 of the Children’s Homes (England) Regulations 2015 and regulation by Ofsted. A Member expressed concern about the regulations relating to children from outside Manchester being placed in commissioned homes in Manchester, advising that Members should campaign for the legislation to be changed to require the child’s Social Worker to report to the authorities in Manchester. The Leader supported this comment, adding that at present small children’s homes did not require planning permission and often the Council and GMP did not know they were there until there was a problem.

In response to a Member’s comments, the Deputy Director of Children’s Services informed Members that it was clear that children in the city remained vulnerable to exploitation and were experiencing exploitation and, while recognising that improvements had been made, he assured Members that neither the Council nor GMP were complacent on this issue.

The Strategic Head of Early Help outlined the work taking place through the Community Safety Partnership to reduce and prevent harm, through engaging with a wide network of organisations such as hotels and licensing and trading services. She also assured Members that the Council and GMP were committed to acting on the lessons learnt from past failings. She advised Members that it was recognised that young adults were also vulnerable to exploitation and a co-ordinated approach was being adopted to prevent and address the exploitation of both children and vulnerable adults.

Detective Superintendent Jamie Daniels offered GMP’s apologies for the failings and mistakes of the past in responding to child sexual exploitation. He addressed the Member’s comments regarding the iOPS system, acknowledging the challenges it had presented; however, he reported that the key problem with how the force had dealt with child sexual exploitation in the past had not been record-keeping but that it had not been a high enough priority. He assured Members of the high priority that this was now being given, outlining how GMP’s safeguarding teams worked in partnership with the Council and shared information, and he updated them on the recent successes which had resulted in offenders being charged. He informed the Committee that he hoped that this would enable them to rebuild the trust of victims who had been failed in the past. The Chair welcomed that officers from GMP had attended recent scrutiny committee meetings, where relevant, and stated that he hoped this would continue.

The Executive Member for Children and Schools advised the Committee that many Ward Councillors had a good knowledge of what was happening in their area and that they and other people in their local areas and retail centres needed to know where to report safeguarding concerns. He informed Members that meetings would be set up in localities so that people knew who to contact and that he would circulate details of these meetings to Ward Councillors.
The Leader outlined the weaknesses in information-sharing between GMP and the Council in the time period covered by the report and the challenges in obtaining and sharing information from that time period now. He reported that, although no minutes were available of the gold group meeting which had taken place at the Town Hall in April 2005, the decision to end Operation Augusta had already been taken earlier in the day by GMP and he highlighted that, while this was the wrong decision, GMP had been prioritising based on the measures of police effectiveness set down by the Home Office and Her Majesty’s Inspectorate of Constabulary. He advised the Committee that the Coroner’s report into the death of Victoria Agoglia was a sealed file which the Council did not have access to and that the Coroner was accountable to the Chief Coroner, not to either Manchester City Council or Rochdale Borough Council, of which he was an employee. In response to a Member’s request, the Leader agreed to write to the Coroner to ask that the file on the death of Victoria Agoglia be released.

The Leader highlighted that Victoria Agoglia’s mother had been in the care system herself, under the care of Tameside Metropolitan Borough Council, and had later died of a drug overdose and that there had been a systemic failure which had allowed this to be repeated. He reported that, through the use of early intervention and early help, Manchester City Council aimed to break these cycles, although he acknowledged that there was still more work to do to improve the outcomes for Our Children (Looked After Children).

The Leader expressed concern that, where offenders were prosecuted through Operation Augusta, the offences they were prosecuted for and the sentences received did not reflect the severity of the abuse. He advised Members that, unfortunately, there was a propensity, both then and now, for juries to disbelieve the principal witness because they were a child who the prosecution could describe as a drug-taker and a child prostitute. He informed Members about ongoing work to identify and pursue perpetrators and advised that this prevented complete transparency, as sharing information could risk alerting perpetrators that they were being investigated.

The Chair commented that sentencing from more recent cases indicated that this issue was being treated more seriously now.

The Deputy Director of Children’s Services advised the Committee that discussions had taken place with social services staff from this time period who were still employed by the Council, that it had not been judged that their conduct met the threshold for referral to the regulator and that they had been made aware of the Council’s whistleblowing policy, in case there were any issues they wished to raise.

A Member requested an update on the phase of the review referred to in section 1.4 of the assurance review of Operation Augusta. Detective Superintendent Jamie Daniels advised that he would provide a written response to this query.

Detective Superintendent Jamie Daniels reported that, while for crimes such as burglaries and robberies the police were dealing predominately with adults who they were easily able to engage with and obtain evidence and statements from, the
victims of some types of crimes, including child sexual exploitation, had complex needs and additional vulnerability. He advised that in the past, the response had often been to disregard these victims because of these challenges, rather than recognising that they should be provided with additional support. He confirmed that there were still offenders who had not been brought to justice and advised that part of the approach to addressing this was for GMP to try to re-build trust with victims so that they felt confident to go through the criminal justice system. He provided information about the GMP teams currently working to bring these offenders to justice. The Leader reported that many of the victims had chosen to get on with their lives and did not welcome being contacted by the police and that it was important to be sensitive to their privacy and needs and the risk of re-traumatising them.

Detective Superintendent Jamie Daniels acknowledged that the methods being used to groom children were evolving. He reported that detailed examination of the cases referred to the Complex Safeguarding Hub, along with information from national sources, were being used to identify and address new methods being used.

Decisions

1. To emphasise the role that departments across the Council and external organisations, including the voluntary and community sector, have in addressing child sexual exploitation.

2. That the Committee will continue to monitor complex safeguarding at future meetings.

3. That this work will also be monitored through the Corporate Parenting Panel, which all Members are encouraged to attend.

4. To thank Detective Superintendent Jamie Daniels and his colleagues at GMP and to look forward to continuing to build the relationship with GMP.

CYP/20/10 Planning for Ofsted’s ‘Proportionate’ Inspection of Manchester’s Children’s Services - April 2020 to April 2021

The Committee received a presentation of the Strategic Director of Children and Education Services which provided information on the planning for Ofsted’s ‘proportionate’ inspection of Manchester’s Children’s Services.

The Deputy Director of Children’s Services referred to the main points and themes within the presentation which included:

- Information on Ofsted’s new ILACS (Inspection of Local Authority Children’s Services) Framework, which was implemented in 2018;
- Areas of focus for the ILACS;
- The process for an ILACS; and
- Planned activity during 2020/21.

The Committee recognised the progress that had been since the 2014 Ofsted inspection.
In response to a Member’s question, the Deputy Director of Children’s Services reported that the Signs of Safety model worked to build on a family’s strengths but with a clear focus on risk, understanding the risks and the contribution of partners in ameliorating risk.

In response to a Member’s question on Social Workers’ workloads and the stability of the social work workforce, the Executive Member for Children and Schools advised the Committee that Ofsted had recognised that the Council was addressing this. He informed Members that money had been set aside in the budget for this and that further details would be included in a future report.

Decision

That the Committee will continue to monitor this work in the lead up to the next Ofsted inspection.

CYP/20/11 The Council’s Updated Financial Strategy and Budget reports 2020/21

The Committee considered a report of the Chief Executive and the Deputy Chief Executive and City Treasurer, which provided an update on the Council’s overall financial position and set out the next steps in the budget process, including scrutiny of the budget proposals and budget report by this Committee.

In conjunction to the above, the Committee also considered the Children and Education Services Budget 2020/21 which provided the final budget proposals following the contents of the provisional Local Government Settlement received late December 2019 and feedback from scrutiny committees during January 2020. In addition, the Committee received the School Budgets 2020/21 which provided a summary of the confirmed Dedicated School Grant (DSG) allocation from the 2020/21 settlement announced on 19 December 2019, and the budget allocation across individual school budgets and Council-retained schools budgets.

The proposed 2020/21 budget reflected the fact the Council had declared a climate emergency by making carbon reduction a key consideration in the Council's planning and budget proposals.

The Executive Member for Finance and Human Resources outlined the national context within which the budget was being set, highlighting the significant decrease in funding to the Council since 2010.

The Ward Councillor for Miles Platting and Newton Heath highlighted the issue of homeless families being placed in temporary accommodation in a different area and who would fund transport to school, where it was in the child’s interests to continue to attend their existing school. The Executive Member for Children and Schools outlined how Executive Members were working together to look at how services could be better co-ordinated to address homelessness and meet the needs of people who were homeless. He reported that he would also be meeting with the Strategic Director of Children and Education Services, the Director of Homelessness and
Deputy Leader Councillor Sue Murphy to consider how Children’s Services and the Homelessness Service could work better together to support homeless families. He advised that he would take forward the issue raised by the Member. The Chair requested that the Committee receive a report at a future meeting on this area of work. A Member questioned whether a joint subgroup should be established with the Neighbourhoods and Environment Scrutiny Committee to look at this issue in more detail. The Chair advised that he would not be recommending this at this time but that he would speak to the Chair of the Neighbourhoods and Environment Scrutiny Committee about how best to scrutinise this subject.

Some of the key points that arose from the Committee’s discussions were:

- Educational Psychology including the overspend and the future commissioning arrangements;
- That the Troubled Families grant had recently been confirmed for a further year by the Ministry for Housing, Communities and Local Government and was the Council prepared if this funding was not continued in future years; and
- That additional money had been allocated to the High Needs Block of the DSG but that this followed several years of the funding being frozen when the number of pupils in Manchester was increasing.

In response to points raised by Members in relation to fostering, adoption and residential placements, the Chair advised Members that these issues were regularly discussed at the Corporate Parenting Panel, which all Members were invited to attend, and that reports on these issues would also be considered at future Committee meetings.

The Director of Education informed Members that there had been an overspend on the Educational Psychology budget because of the increasing numbers of children with an Education and Health Care Plan (EHCP) and she outlined when Educational Psychology services were used in relation to EHCPs. She reported that the Council would be carrying out an open tender for Educational Psychology services. The Chair requested that the Committee receive a short note in a future Overview Report on the tendering process for the Educational Psychology service.

The Deputy Director of Children’s Services reported that plans had been made to spend the Troubled Families funding which had recently been confirmed, stating that this work was well-evaluated, achieving good outcomes and providing value for money. The Head of Finance advised that this was a one-year budget and that, if no further funding was provided by the Ministry for Housing, Communities and Local Government for this programme, the Council would need to make a decision in next year’s budget process about what its priorities were.

**Decisions**

1. To agree the strategy outlined in the reports.
2. To request that the Committee receive a report on the work taking place to better co-ordinate services to support families, children and young people affected by homelessness.
3. To request a short note in a future Overview Report on the tendering process for the Educational Psychology service.

**CYP/20/12 School Place Planning and Admissions**

The Executive Member for Children and Schools outlined the process that was currently taking place regarding the proposal to close Newall Green High School, advising that this was not the Council’s decision. He informed Members that the Council had written to the Regional Schools Commissioner and the Department for Education to oppose the closure. A copy of the letter that the Executive Member had written to the Regional Schools Commissioner was shared with the Committee.

The Executive Member for Children and Schools advised that closing Newall Green High School was not in the interests of the children at the school and their families and that there was not capacity elsewhere within the school system to accommodate all the children if this school did close. He informed Members that the Council had discussed with the Trust which ran the school some options to address the budget concerns which had led to their proposal to close the school. He reported that he was also awaiting a response from the Regional Schools Commissioner.

Members discussed their concerns at the proposed closure of the school, including concerns for the children and staff affected and that high schools in south Manchester were increasingly clustered around one area, with children in Wythenshawe having less local provision. A Member advised that, although a listening period was taking place, she felt as though a decision had already been made.

In response to a Member’s question, the Executive Member for Children and Schools reported that the Council did not have any formal powers in relation to this decision but he outlined what the Council was doing to trying to influence the decision, including lobbying at the highest level and meeting with the Trust to try to identify a solution.

The Chair recommended that the Committee endorse the letter which the Executive Member for Children and Schools had sent to the Regional Schools Commissioner, opposing the closure of the school.

The Committee received a report of the Director of Education which provided an update on school admissions for the academic year 2019/20 along with plans for creating additional capacity in response to forecast demand across primary and secondary schools. The report stated that investment in modern, energy efficient and high quality education infrastructure would drive reductions in carbon across the estate of schools.

The Committee was invited to comment on the report prior to its submission to the Executive on 12 February 2020.

Officers referred to the main points and themes within the report which included:
• School admission applications 2019/20;
• School population forecast;
• Approach to securing sufficient school places; and
• Actions to secure sufficient school places, including proposals for a new primary school and a new secondary school and the expansion of Dean Trust Ardwick.

Some of the key points and themes that arose from the Committee’s discussions were:

• The geographical spread of schools, particularly the number of high schools in the West Didsbury and Chorlton area;
• The importance of taking into account future housing development when planning for school places;
• Whether maintained schools could still voluntarily convert to academies;
• Whether it was appropriate for International New Arrivals with Special Educational Needs and Disability (SEND) to initially be placed in a mainstream school while they were assessed; and
• The challenge for small schools expanding from one-form entry to two- or three-form entry.

The Director of Education reported that the Council wanted to have a good geographical spread of schools across the city but that it was challenging to identify suitable, available land across the city to build new schools, particularly high schools. She reported that her service worked with housing colleagues to understand future housing development and that this had been factored into the plans outlined in the report. She confirmed that maintained schools could still opt to become academies but that fewer schools were now choosing to do so. She advised that it was not always clear what level of assessment International New Arrivals with SEND had had and that sometimes once they were placed in a mainstream school, had had their needs assessed and had settled in this was the right setting for them; however, she advised that officers were reviewing arrangements for how best to quickly settle this group of children and get an understanding what their needs were. She acknowledged that it was a challenge for small schools to expand to two- or three-form entry but advised that the Council was able to offer them support through this.

In a response to a Member’s question, the Head of Access advised that she would provide him with data on the number of school appeals and how many were successful.

Decisions

1. To record the Committee’s opposition to the proposed closure of Newall Green High School and to endorse the letter which the Executive Member for Children and Schools has sent to the Regional Schools Commissioner

2. To endorse the recommendations to the Executive that they:

   1. Note the data relating to September 2019 admissions;
2. Note the pupil forecasts submitted to the Department for Education (DfE) during summer 2019;

3. Support the principle that Basic Need funding is used to fund the new high school and contribute towards the development of the city centre school;

4. Agree that the Council undertakes consultation to gather views on the plans to develop a new primary school in the city centre and a new secondary school in east Manchester as a first step towards identifying a provider for the new school; and

5. Delegate responsibility to the Director of Education in consultation with the Executive Member for Children’s Services to:
   - progress the publication of a specification for each new school and invitations to sponsor based on the outcomes of the consultation.
   - Identify a preferred sponsor for each school to be recommended to the DfE.

CYP/20/13 Overview Report

A report of the Governance and Scrutiny Support Unit was submitted. The overview report contained key decisions within the Committee’s remit, responses to previous recommendations and the Committee’s work programme, which the Committee was asked to approve.

A Member requested a response to the previous recommendation that further information be provided on the number of siblings who had been allocated places at different schools. The Head of Access confirmed that she would provide this.

Decision

To note the report and agree the work programme.
Manchester City Council
Report for Information

Report to: Children and Young People Scrutiny Committee - 4 March 2020
Subject: Annual report on Special Educational Needs and Disability (SEND)
Report of: Strategic Director of Children and Education Services

Summary

Manchester is committed to building a safe, happy, healthy and successful future for all our children, none more so than those with a disability and learning need. Consequently, this report sets out in detail the legal and strategic context in which services are delivered to children with Special Educational Needs and Disability (SEND), a profile/demography of need in Manchester and an outline of the advice, support and services that are available for children and their families. In addition, the report details how children and their families are influencing and shaping how agencies/services work together so that Manchester City Council and its partners continually improve the experiences and outcomes of children with SEND.

The Special Educational Needs and Disability (SEND) reforms introduced in September 2014 are being embedded in Manchester through multi-agency working and a strong partnership approach from the outset with Manchester CCG, LCO, parents/carers, young people, schools, colleges and settings. There is clear strategic leadership and strong governance through the SEND Board, chaired by the Director of Education and which has senior representation from a range of partners and services including the Designated Clinical Officer for health; strategic lead for Children’s social care; a headteacher; parent representative from Manchester Parent Carer Forum and an Adult Services manager.

In brief, there has been good progress achieved against each aspirational aim of the action plan detailed in section 1.7 with evidence of impact and a shared strategic vision across all the partnership agencies.

The report provides a detailed breakdown of the growing population of children and young people with SEND to enable committee members to understand our children with SEND. In addition, the report details the activity and progress against the local area action plan with input from health and social care colleagues.

Manchester’s parents are a key partner and there have been further developments to the parent carer network and the parent champion model in 2019. In addition, there has been a much stronger influence of children and young people’s ‘voice’ across the local area, via the ‘Changemakers’ work and through improved Education Health and Care plans.

A positive area to note is the work and improvements achieved during 2019 in respect of improving ‘pathways’ to services. Families have repeatedly told us that
pathways into services are too complicated, and that services need to be more joined up. In response to this Local Authority and health teams have worked together with parents to improve ease and timeliness of access to services and support.

A consequence seen locally and nationally arising out of the 2014 SEND reforms has been an increase in the number of requests for children to be assessed for an Education, Health and Care Plan (EHCP). This coupled with a reduction in the statutory timescales for completion has made an area for improvement. There has been less success in improving educational outcomes for children and young people with SEND; both of which continue to be a priority for Manchester City Council and its partners.

**Recommendations**

Committee members are asked to consider and comment on the information in this report and the planned next steps.

---

**Wards Affected:** All

---

**Alignment to the Our Manchester Strategy Outcomes**

<table>
<thead>
<tr>
<th>Manchester Strategy outcomes</th>
<th>Summary of how this report aligns to the OMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities</td>
<td>Continuing to improve SEN provision will contribute to improving educational outcomes, aspirations and job opportunities for pupils with SEND and contribute to Manchester’s young people becoming happy, safe and successful adults.</td>
</tr>
<tr>
<td>A highly skilled city: world class and home grown talent sustaining the city’s economic success</td>
<td>Improving educational outcomes of pupils with SEND and continuing to improve the experience and opportunities for children and young people with SEND will better enable them to gain qualifications and contribute to Manchester’s economic success. Increasing the numbers of Supported Internships and Supported Employment places will ensure more disabled people become economically active and Manchester’s employers benefit from a more diverse talent pool.</td>
</tr>
<tr>
<td>A progressive and equitable city: making a positive contribution by unlocking the potential of our communities</td>
<td>Continuing to improve provision, through co-production, for children and young people with SEND will ensure increased opportunities and outcomes for one of our vulnerable groups - children with SEND.</td>
</tr>
<tr>
<td>A liveable and low carbon city: a destination of choice to live, visit, work</td>
<td>Investment in modern, energy efficient and high quality education infrastructure drives reductions in carbon across the estate of schools.</td>
</tr>
</tbody>
</table>
A connected city: world class infrastructure and connectivity to drive growth

Investment in existing and new education provision will enhance the City’s attractiveness to potential residents and contribute to the development of high quality neighbourhoods.

Contact Officers:

Name: Amanda Corcoran  
Position: Director of Education  
Email: a.corcoran@manchester.gov.uk

Name: Isobel Booler  
Position: Head of Schools Quality Assurance and Strategic SEND  
Email: i.booler@manchester.gov.uk

Name: Julie Hicklin  
Position: SEND Lead  
E-mail: j.hicklin@manchester.gov.uk

Name: Darren Parsonage  
Position: Deputy Head of Commissioning, Children and Maternity/DCO SEND (MHCC)  
E-mail: darren.parsonage@nhs.net

Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

Key points from the Education Bill and Green Paper – Support and Aspiration: A new approach to SEN and Disability – Report to CYPOS, May 2011

Impact of the proposals outlined in the Special Educational Needs and Disability (SEND) Green Paper – Next Steps document and the reform of funding for high levels of need – Report to YPCSC, September 2012

Update on the national reform of SEND and progress towards implementation in Manchester – Reports to YPCSC, May 2013; January 2014 and June 2015

Update on Manchester’s implementation of SEND reforms and information on the Local Area inspection of SEND – Report to Children and Young People Scrutiny Committee, October 2016

Update on Manchester’s implementation of the SEND reforms - Report to Children and Young People Scrutiny Committee, December 2017

School place planning and admissions – Report to Executive, May 2018
Special Educational Needs and Disability strategic review - Report to Children and Young People Scrutiny Committee, June 2018

Update on Manchester’s implementation of the SEND reforms - Report to Children and Young People Scrutiny Committee, January 2019

Our Manchester Disability Plan - Report to Communities and Equalities Scrutiny Committee, October 2019

Dedicated Schools Grant - Report to Schools Forum, January 2020
1. **Introduction**

1.1 This report provides an update on Manchester’s progress on embedding the special educational needs and disability (SEND) reforms set out in the Children and Families Act 2014.

1.2 A revised Code of Practice, which provides statutory guidance on the policies, procedures and requirements of the Children and Families Act was published in April 2015. The Code of Practice sets out key principles for practice and provision for children and young people aged 0-25 in local areas. All partners in the local area need to have due regard to the Code of Practice. These principles are:

- Putting children and young people with SEND and their families at the heart of assessment, planning and decisions about their future outcomes and provision.
- Local authorities must publish a Local Offer showing all the services and support that the local area expects to be available to children and young people with SEND and their parents/carers, as well as how to access the provision, how to report gaps and give feedback.
- The local authority must also make sure children, young people and parents are provided with information, advice and support on all matters related to their SEND.
- Education, Health and Care plans (EHCPs) replaced Statements of SEN and SEN Support has replaced School Action and School Action Plus.
- The timescale for assessing a child or young person and issuing an EHCP is 20 weeks
- Local authorities must help young people with SEND prepare for adulthood from the earliest years.
- Health and local authorities should jointly commission services for children and young people with SEND.

1.3 Local areas are subject to inspection by Ofsted and the Care Quality Commission on their effectiveness in identifying and meeting the needs of children of children and young people with SEND. There is a strong emphasis in the inspections on local areas understanding their strengths and areas for development and being able to demonstrate how the provisions are improving outcomes for children and young people with SEND and improving the experience of families in accessing services and support.

1.4 So far, eight local areas in Greater Manchester have been inspected: Bolton, Bury, Oldham, Rochdale, Salford, Stockport, Trafford and Wigan. One area’s inspection letter is awaiting publication. Four areas were required to produce written statements of action. The Department for Education announced in 2018 that further inspections of local areas will follow the current programme which is due to conclude in 2021, and that local areas with written statements will receive a reinspection visit to assess the progress made.

1.5 Manchester’s SEND Board, chaired by the Director of Education provides governance of SEND. The Board is responsible for evaluating progress,
identifying key areas for development and overseeing improvements. Members of the Board include senior staff from children’s and adults’ social care, education, community health, population health, the Designated Clinical Officer from MHCC, Manchester Parent Carer Forum, a headteacher and performance research and intelligence. The Board also serves as the children and young people’s workstream of the Our Manchester Disability Plan (OMDP) Board.

1.6 The Our Manchester Disability Plan outlines the vision and strategy for all Manchester residents with a disability including children and young people with special educational needs or disabilities. This plan aligns with Our Manchester Strategy and Our Children’s plan and has as its aim: ‘A strategy to remove barriers and increase opportunities for disabled people of all ages in Manchester.’ The OMDP Board is a partnership between disabled people’s organisations, parents/carers, the City Council, health, Transport for Greater Manchester, DWP, employers, educational institutions, and other partners.

1.7 This report will provide an update on numbers and primary needs of children and young people with SEND and the progress the Local Authority and partners are making in embedding the reforms. There will also be an update on Greater Manchester partnership working. The report will be structured using the aspirations in the local area’s development plan.

- Parents'/carers’ and children’s/young people’s views impact on strategic decisions.
- Excellent local offer, understood and accessible to all leading to improved life outcomes.
- Integrated, transparent pathway allows parents/carers and young people to access services across education, health and care.
- Young people with SEND have needs met through excellent education, health and care services, jointly commissioned where appropriate.
- Preparing for Adulthood (PfA) is embedded in Manchester from the earliest years.
- Improved outcomes and standards across education and training.
- A highly skilled workforce across all stakeholders improves outcomes for children and young people.

2. Overall Population With Special Educational Needs And/Or Disability (SEND)

2.1 In order to better meet the needs of our children and young people with SEND it is first helpful to understand the nature of the cohort. This section of the report provides a detailed breakdown of both numbers of children and young people and also a breakdown of the type of need. Manchester’s school population and SEND population continues to grow.

2.2 The October 2019 school census showed that within the Manchester school population, 16.7% of pupils have SEND (14,833 pupils). This was made up of 13% (11,560 pupils) who have their needs met at SEN Support level and 3.7%
of the school population who have an Education, Health and Care plan (EHCP) (3,273 pupils).

2.3 The census shows that the number of pupils who have their needs met through SEN Support is increasing again after a small decrease in 2018. Both the number and percentage of pupils in Manchester schools with an EHCP have increased, a 54.2% increase since 2015. The percentages of pupils at SEN Support level and EHCP are higher than the latest national comparison data from January 2019 (11.7% and 3.1%).

Figure 1: Number of pupils with SEND in Manchester schools (School Census)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>EHCP/Statement</td>
<td>2,123</td>
<td>2,333</td>
<td>2,464</td>
<td>2,387</td>
<td>2,746</td>
<td>2,895</td>
<td>3,090</td>
<td>3,273</td>
</tr>
<tr>
<td>SEN Support</td>
<td>9,265</td>
<td>10,102</td>
<td>10,667</td>
<td>10,750</td>
<td>11,063</td>
<td>10,612</td>
<td>11,097</td>
<td>11,560</td>
</tr>
<tr>
<td>All SEN</td>
<td>11,388</td>
<td>12,435</td>
<td>13,131</td>
<td>13,342</td>
<td>13,809</td>
<td>13,507</td>
<td>14,187</td>
<td>14,833</td>
</tr>
</tbody>
</table>

Figure 2: Gender of pupils with SEND in Manchester schools, 2019

Source: January 2019 School Census
Analysis by Children’s PRI

<table>
<thead>
<tr>
<th>Gender</th>
<th>% of SEND</th>
<th>% of SEN Support</th>
<th>% of EHCP</th>
<th>No SEND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>32.5%</td>
<td>34.6%</td>
<td>25.1%</td>
<td>52.4%</td>
</tr>
<tr>
<td>Male</td>
<td>67.5%</td>
<td>65.4%</td>
<td>74.9%</td>
<td>47.6%</td>
</tr>
</tbody>
</table>
2.4 More boys than girls in Manchester schools are identified as having SEN – both at SEN Support and EHCP levels. There is a similar picture nationally. The differential is greatest for pupils with autism, with approximately 4 boys having an autism diagnosis for every girl with autism. However, these proportions may change in the future – the south Manchester social communication pilot is identifying a larger proportion of girls with autism and at an earlier age than has previously been the case.

*Figure 3: Age and gender of pupils with SEND in Manchester schools, January 2019*

2.5 The age distribution of Manchester pupils with SEND is similar to national figures, with the highest numbers in Years 5 and 6. Figure 3 only shows the numbers of children in Manchester schools, there are Manchester children with SEND in schools and early years settings outside Manchester and in colleges and training provision.
This graph shows the percentage of pupils with SEND in Manchester schools that have English as an Additional Language (EAL). Pupils whose first language is English are more likely to have special educational needs than those who have EAL. 32.7% of the pupils who have SEND have English as an Additional Language, whereas 42.7% of pupils who have SEND have English as their first language. Nationally, there is a similar picture.
2.7 Manchester pupils with SEND are more likely to be eligible for free school meals (FSM) than those with no SEND. 40.7% of pupils at SEN Support and 47.5% of pupils with EHCPs are eligible for free school meals, compared to 25.4% of pupils with no SEND. These figures are higher than in 2018 when 37.3% of SEN Support pupils and 45.3% of EHCP pupils were eligible for FSM. The DfE reports that in 2018, 28% of pupils with SEND in England were eligible for FSM compared to 13% with no SEND. There is a high correlation nationally between family poverty and households with a disabled family member.

*Figure 6: Pupils in Manchester schools by SEND Primary Need, January 2019*

This graph shows the primary type of special educational need/disability of pupils in Manchester schools, as recorded on the January 2019 school census, using Department for Education codes. The four most common types of primary need are the same as last year: speech, language and communication needs (SLCN) 23.1%; social, emotional and mental health needs (SEMH) 20.7%; moderate learning difficulties (MLD) 19.2% and autism (ASD) 9%. The number of pupils with speech language and communication needs has risen significantly over the past 4 years, whilst the number with moderate learning difficulties has decreased. It is pleasing that the number of pupils whose needs have not been identified through a specialist assessment (NSA) continues to decrease. Nationally, speech, language and communication is also the most common type of primary need (22% of pupils).

### Numbers of Education, Health and Care plans

2.8 Overall, in December 2019, Manchester maintained 4,602 Education, Health and Care plans (EHCPs) for children and young people aged 0-25 and the
The number is continuing to rise. In December 2015 the number of EHCPs and Statements maintained by Manchester was 2,553. Key factors in the increase are: the growth in the child population in Manchester, the SEND reforms extending the age range covered by EHCPs to 25, and better early identification of young children with SEND due to the multi-agency early years SEND pathway and early years integrated delivery model.

**Figure 7: EHCP Numbers by Primary Need, December 2019**

The most common types of primary need for Manchester children and young people with an EHCP in December 2019 are:

- Autism which is 24.9% of the cohort – a 1.1% decrease from 2018.
- Social, emotional and mental health needs – 22.6% - a 1.8% increase from 2018.
- Severe learning difficulties – 17.6% - a 1.4% decrease from 2018.
- There has been a 1.3% increase in the percentage of children and young people with a primary speech, language and communication need - 14.3%.
2.11 This graph shows the age distribution of Manchester’s children and young people with EHCPs and that of comparators. A higher percentage of Manchester EHCPs are for primary aged children than all comparators and a lower percentage of Manchester’s EHCPs are for 16-25 year olds.

2.12 The number of requests for EHCPs continues at a high rate. The number of requests declined is 1% higher than in 2018. In 2018, Manchester ranked 47th out of 152 local authorities for the number of EHCPs per 10,000 of the under 25 population. Manchester’s rate is higher than other core cities, though is below the North West and national averages. (Source DfE)
Sections 3 to 9 of the report detail the progress the local area is making towards achieving the aspirations in our development plan.

- *Parents’/carers’ and children’s/young people’s views impact on strategic decisions.*
- *Excellent local offer, understood and accessible to all leading to improved life outcomes.*
- *Integrated, transparent pathway allows parents/carers and young people to access services across education, health and care.*
- *Young people with SEND have needs met through excellent education, health and care services, jointly commissioned where appropriate.*
- *Preparing for Adulthood (PfA) is embedded in Manchester from the earliest years.*
- *Improved outcomes and standards across education and training.*
- *A highly skilled workforce across all stakeholders improves outcomes for children and young people.*

This includes actions from all the partnership agencies to ensure that the experience of children with SEND and their parents continue to improve.

3. **Parents’/Carers’ And Children’s And Young People’s Views Impact On Strategic Decisions**

3.1 **Co-production with parents and carers**

Manchester Parent Carer Forum (MPCF) receives national grant funding to act as the strategic voice of parents/carers of children and young people with SEND in Manchester. The Forum co-chair the Local Offer Review Board, sit on the SEND Board and their members are involved in a wide range of co-production activities with health, education, social care and work and skills. The Forum currently has around 500 members.

3.2 **The co-production charter, launched in 2018, is being used widely and organisations have recognised the importance of co-production in service improvement.** The Forum and colleagues from the Working Together for Manchester group of parent carer organisations are in high demand to ensure the voice and experiences of families are influencing service improvements.

3.3 **Manchester Parent Carer Forum and the Working Together for Manchester group, delivered a second conference ‘About Inclusion’.** Following the conference, the Forum were invited to become involved in the co-production of Manchester’s Inclusion Strategy. Members of the Forum and Working Together groups participated in the Inclusion Strategy launch and continue to be involved in the work to embed the strategy in Manchester.

3.4 **The Forum are commissioned by the SEND Board, to survey parents/carers on their experiences of education, health and care services.** The responses to these surveys show that there continues to be inconsistency across the local area to how well services meet the needs of children and young people with
SEND. This survey provides a rich source of both quantitative and qualitative information which is used to monitor performance and identify areas of improvement which are embedded in the development plan.

3.5 The Forum run an annual Local Offer Fair for families in central and east Manchester in collaboration with Melland High School. Building on the success of this they are working with Rodney House Outreach and Inclusion Service on an event for parents of early years children with SEND.

3.6 The Forum are part of the NW Network of Parent Carer Forums, and are currently working with health commissioners and education on a Transforming Care initiative to develop parent/carer groups in mainstream schools.

3.7 The SEND Parent Champion model was developed with parents as a result of conversations with families and local research which showed that existing formal structures of participation did not work for many of our families. Parents and carers also told us how much they value peer support. Many members of the Manchester Parent Carer Forum are also parent champions and the two groups complement each other.

3.8 Manchester now has over 160 Local Offer parent champions, and, supported by the Engagement and IAS teams they are working with other services to extend the model. Currently 370 parents/carers access the Champions’ Facebook page. The Facebook page is used widely by parents and carers as a source of information and advice. Members benefit from a rolling programme of training, including how to use and promote the Local Offer and building emotional resilience. The strength of the model is that the level of commitment is flexible to individual parent circumstances.

3.9 In response to parents reporting an increase in families having their Disability Living Allowance applications declined and the emotional impact of the process, the Specialist Resource team, and Parent Champions and the Forum worked with Genie, Henshaw’s, and Lifted parent/carer groups to co-produce ‘Top Tips’ for parents when applying for DLA.

3.10 In the past year Champions have been involved in a wide range of activities, including:

- Hosting a summer picnic in the park and silent disco in collaboration with Whitworth Art Gallery, to promote the services available there. Parent Champions are offered free space at the Gallery to hold their regular network meetings. The Whitworth have seen the benefit of the event in terms of reaching a wider audience within the SEND community. Further events are planned.
- Working with Manchester Libraries to encourage use by children and young people with SEND and their families, including a project with libraries and Autism and the Arts to create an immersive escape-room like experience, which groups of autistic young people can engage with at libraries.
- Working with Grange Outreach Team and Manchester Leisure, Parent Champions designed a fun and friendly inclusive Sunday swim session.
The session runs every Sunday. This case study shows the impact on one family:

A parent used to take his son swimming. His son began to present more challenging behaviour and seemed to prefer playing in the showers rather than the pool. The parent found this very stressful. His son got taller and bigger and the parent did not feel confident to take him swimming anymore. They stopped going swimming altogether, for a number of years.

When the parent saw the Relaxed Fun and Floats sessions advertised at Moss Side Leisure Centre, designed by Parent Champions, he decided to give it a try. Supported by the warmth and acceptance from other parents, and noticing how much his son enjoyed the swim session, the parent has since taken his son to a number of other mainstream swim sessions. His son is particularly enjoying going to the Aquatics Centre. Parent and young person are delighted!

- Parent Champions run regular One Page Profile Workshops to help parents/carers describe their children’s strengths and support needs in a person centred way. This case study shows how powerful a One Page Profile can be in understanding how best to support a child or young person with SEND.

“Just a wee story about how the recent workshop has benefitted me and my child. Normally when I pick Theo up from holiday club there are complete meltdowns every day after the club and also meltdowns beforehand each morning. We have tried every club under the sun.

On Monday I turned up to the holiday club with a “one page profile” for Theo. At a glance they could see all his challenges, what he needs to calm him, what he likes and doesn’t like, what to do if he is being challenging.

This week each day I have expected the usual fireworks and meltdowns. But he has happily emerged and even told us all to hurry up one morning as he wanted to go. Upshot is that this piece of advice has made a tangible difference to the quality of Theo’s week. And the quality of all our weeks!

Thank you this was the best holiday club ever!”

Children and young people’s voice

3.11 The Local Authority has commissioned Greater Manchester Youth Network to recruit and train a group of young disabled people to become the strategic voice of children and young people with SEND. The Changemakers group was established in 2019 and they have received training in creative ways of capturing and presenting the views of other young people with SEND. Group members have presented to the SEND and Local Offer Review Boards and have attended a number of coproduction events.
3.12 The group are working in partnership with the People’s History Museum, which has recently exhibited their self-portraits:

![Self-portraits of young people](image.png)

3.13 So far the Changemakers group have run twelve consultation workshops with a range of different school, college and youth groups. They asked young people what they want to discuss and what services they want to improve. The most popular were Transport, Education, Leisure Activities and Mental Health/Wellbeing. The most fruitful discussions so far have been about Transport and Leisure and some of their findings include:

3.14 **Transport**

- Young people are positive about the new concessionary bus pass for 16 and 17 year olds.
- Travel training has been a positive experience and more young people would like to have this option.
- More buses are needed at busy periods – it stops young people using public transport at busy times.
- There is a lack of disability awareness from transport workers and the general public.
- Young people think there is a lack of safety on public transport – this can cause anxiety.
- The barriers to transport make it difficult for young disabled people to be independent and travel independently.

3.15 We are arranging for the Changemakers to present to the Our Manchester Disability Plan Board, which has a transport workstream and to link into the work the Greater Manchester SEND Board is planning to do with Transport for Greater Manchester.
3.16 **Leisure**

- Young people mentioned a variety of leisure activities that they engage with, including sports, arts and youth clubs. Most of these are through groups of disabled young people.
- Young people enjoy these activities and they are very important part of the young people’s lives. They would like access to more variety, including cooking, canoeing, and mountain-biking.
- Very few young people that the Changemakers have spoken to engage in mainstream extracurricular activities.
- Many young people mentioned experiences around bullying and feeling unwelcome when attending youth activities.
- Lack of confidence and busyness of families were barriers to young people attending activities.
- The distance to travel can also sometimes be a barrier.
- It can be difficult to find out about things.

Young people would like there to be:

- A worker that you can ‘book’ at open access youth activities so that they can help you when you first start out at leisure activities.
- Awareness training for youth workers and the other young people attending the session.
- Accessibility information needs to be more comprehensive - including whether there is a quiet space.

3.17 We are using these findings to help improve our universal and targeted Short Breaks provision working with Young Manchester, the Youth Offer and Engagement teams.

3.18 Manchester is benefitting from gathering young people’s voice in a wealth of other ways:

- The Children’s Community Nursing team have devised a simple visual feedback form to ensure they capture the voice of the children they work with.
- Young people’s views have informed a Toolkit for use by schools on how to ensure the voice of young people influences their SEN Support plans, EHCPs and is at the heart of their annual reviews.
- Deaf pupils who attend Alma Park School resourced provision have created artwork at Levenshulme Train Station in British Sign Language.
• Students from Pioneer House School have worked with Digital Advantage to create a digital careers hub on Twitter @careers-hive for other young people with SEND.
• Special Needs Jungle website showcased Camberwell Park’s exemplary practice in pupil voice: https://www.specialneedsjungle.com/exemplary-practice-why-this-special-school-is-proud-of-its-pupil-voice/?utm_source=
• Colleges use feedback from students to inform course design and provision.

4. **Excellent Local Offer, Understood And Accessible To All, Leading To Improved Life Outcomes**

4.1 All local areas are required to set out their Local Offer (all of the services and support that is available to children and young people with SEND and their parents/carers) in a clear and accessible way. Manchester’s Local Offer website has been co-produced with families, schools, colleges, health staff and many other organisations. It is overseen by the Local Offer Review Board, which is co-chaired by Manchester Parent Carer Forum.

4.2 Over the last year The Local Offer website has had a major redesign from the home page to the results page. The intention was to make the contents easier to find. The number of hits the Local Offer over the first six months indicate this is working as intended:

4.3 The hits fell from 44,374 in 2018 to 39,643 which is a reduction in 10.66%. The reduction tells us that the audience are finding what they are looking for more easily, and so, reducing the number of pages they are clicking on to find the information.
Even though the number of hits has reduced, the number of New Users, Existing Users and Sessions have risen year on year. This year has seen a 32.77% rise in users, with 4,866 being new users.

The Local Offer website is promoted through postcards and school websites. All community health teams use the postcards to signpost families to the Local Offer. Health teams invite the Local Offer team to provide regular team briefings to keep staff up to date.

However, the Manchester Parent Carer Forum survey tells us that whilst a greater number of parents/carers say they are aware of the Local Offer, there are still far too many families that do not know about it, particularly those with
children at SEN Support level. It may also be that many parents are getting information from the Local Offer website without realising. Analysis of hits shows that most people now find their way to Local Offer pages through Google. Recently, the Local Offer team has run a social media campaign, which so far has over 300 followers.

4.7 The Local Offer and Engagement team, Parent Champions and MPCF run monthly Local Offer Drop Ins in community venues. This allows parents/carers without digital access, or those who prefer to get their information face to face, to come to an informal event where they are able to meet a wide range of services and other parents of disabled children. The highest attendance at a Drop In in 2019 was 70 people. Feedback from the Local Offer Drop Ins demonstrates the value to those parents who attend. Most parents report that they are welcoming, friendly and extremely informative. The feedback also indicates how much parents value the opportunity to talk to Parent Champions – many of whom speak community languages.

4.8 In summer 2019 the Local Offer team ran a promotional campaign, encouraging families to take part in a wide range of fun activities. A co-produced booklet ‘Fab Stuff To Do’ listed the activities running over the summer holidays. The feedback was overwhelmingly positive - families, schools and services have asked for similar listings for all school holidays.

4.9 The Council for Disabled Children is leading an Action Learning Set on describing ‘ordinarily available provision’ for Early Years children with SEND. This work has involved a wide range of parents and staff, including early years SENCOs, early years QA, Rodney House, Sure Start and the lead Health Visitor. The work will be disseminated in summer and is designed to help schools and settings understand what they are expected to provide for early years children with additional support needs and to help parents understand what should be available locally to support their child.

Information, Advice and Support Manchester (IAS)

4.10 IAS Manchester provides impartial, confidential information, advice and support to parents, carers and young people about all aspects of the special educational needs system. The service enables timely access through a confidential helpline which is staffed by experienced and IPSEA (Independent Provider of Specialist Education Advice) qualified caseworkers. Through the helpline, 90% of enquiries are resolved on the first contact. Where it is identified that parents need a higher level of support, a caseworker is allocated. The team are managing 80 open cases on average and deal with 200-300 helpline enquiries each month. Parents of primary aged pupils account for around half of all requests to the service, followed by calls/emails from parents of secondary age pupils. The service receives a significant number of calls relating to early years but fewer on Post 16 issues. The helpline also provides legal advice and support to schools and other practitioners to ensure they are meeting their legal duties.
4.11 Demand is increasing for IAS to support parents at meetings in schools. IAS caseworkers are also linked to the Early Help hubs to strengthen the early help SEND offer and attend drop ins and other events across the city. They have developed nearly 40 factsheets covering the most frequently asked questions. To increase service capacity, the team are working with Parent Champions, who have completed Independent Support training to provide support to other parents, with an IAS caseworker providing supervision.

4.12 The Council for Disabled Children provided grants to IAS in 2019 for a number of projects:

- Increase access to advice and support for young adults. IAS have trained all Connect staff to increase their capacity to advice and support the young people with SEND they are working with. The aim of this project is to improve employment and life outcomes for young disabled people.
- Lifted parent/carer group has been commissioned to undertake a long term evaluation of IAS.
- All Information, Advice and Support services have been required to develop stand-alone websites. IAS Manchester is working with Studio Twwo at the Sharp Project and a group of parents to design the site. There are plans to work with a group of young people to develop a young people section of the site.
- The grant has funded a comprehensive training programme, including an accredited IPSEA course for parents and professionals. This training will increase the capacity of staff across Manchester to support the SEND agenda. Some parents/carers are keen to get back into the labour market and being able to gain accreditation is important to them.
- A pilot is running in north Manchester to encourage partnership working between parents, voluntary organisations and schools. The group came together for three days of training on SEND. This led to follow up courses, including accredited IPSEA training and sessions on ‘how to get you message across’ for parents/carers.

5. Integrated Transparent Pathway Allows Parents And Young People To Access Services Across Education, Health And Social Care

5.1 Families have told us that pathways into services are too complicated, and that services need to be more joined up – so that families only have to tell their story once, rather than repeat it to every new worker they meet. Local Authority and health teams are working in co-production with parents on several pathways to improve ease and timeliness of access to services and support.

5.2 Community Health

Community Health staff led a co-production pathway redesign workshop in spring 2019 to look at families’ current experiences of using services in Manchester. The findings have fed into MHCC Children’s and Young People’s work programme in relation to SEND and transforming care. The programme of work aims to define what the current and future demand of need is in
relation to children and young people with SEND and complex and additional needs (0-25 years), and highlight any gaps in demand and supply in the city. Designed pathways and a model of delivery needs be flexible to meet the changing needs of the city’s population and services need to provide value for money and improved outcomes for children and young people with SEND.

5.3 The aim is to achieve this through a single defined/integrated pathway for children and young people with SEND across health, which can meet increasing demand. This will also include ensuring that adequate services are available for people aged 18-25, where they are in education.

5.4 To complement this wider work, staff from Health, Education and Social Care are working with parents as part of a multi-agency group to develop and design an About Me document which will make it much easier for families to share their child or young person's information with services. The group have been meeting on a monthly basis to agree the format for the document. More about Me is an extended version of the ‘passport’ for children with additional health and learning needs and will include more detailed information about health needs; communication skills and feeding information. The group are investigating digital solutions as well as paper based ones.

5.5 **Manchester Social Communication Pathway (SCP)**

The social communication pathway being piloted in south Manchester is already having a positive impact with families reporting high rates of satisfaction with the process. Staff from CAMHS, community health, education psychology, schools and the local authority, together with parents/carers from the Manchester Parent Carer Forum coproduced the new SCP which adheres to NICE guidelines for Autism Assessment. This multi-agency assessment pathway for children with suspected social communication difficulties both reduces the amount of time taken to diagnose children and provides a more holistic approach by also reducing the number of times families had to ‘tell their story’. The pilot is due to be extended to central and north Manchester in the coming year.

5.6 **Autism Intervention Pathway**

An initial consultation has been held with parents and representatives from health and education to look at current interventions provided for children/young people with autism and their families. The session focussed on starting to develop a clear and transparent pathway for families both pre and post diagnosis.

5.7 Families wanted a reduction in the waiting times for intervention. The pathway will ensure timely access to appropriate interventions that support children with autism to develop to their full potential. The pathway will ensure that all families are clear what interventions are available and will reduce replication.
5.8 Statutory Assessment

As a result of an increasing demand in requests for Education, Health and Care plans (EHCP) the number of EHCPs maintained by the Local Authority, a review of the statutory assessment team began early in 2019. The percentage of statutory assessments completed within 20 weeks has declined since 2018. In December 2019, 67% were completed within timescale. (The national completion figure for 2018 was 60%.) Workshops were held with the Statutory Assessment Team to gain a high level understanding of the existing ways of working and processes. A consultancy service produced recommendations and based on these it was agreed that a specific project was required to deliver the required improvements to the statutory assessment process and maintenance of EHCPs. A project board was established to oversee performance and a number of workstreams agreed; these included improved processes and panels and a redesign of the service with a focus on improving parental experience, improving quality of plans, in addition to increasing capacity and enabling improved ways of working.

5.9 The processes and panels work stream was informed by feedback from parents and carers who wanted more involvement in the process. Since September 2019 new and improved processes have been tested, which include improved communication pathways and increased parental involvement. Parents and carers are contacted from the start of the process and are influencing improved decision making. Recent quality assurance of EHCPs has shown an improvement in quality and plans are more person-centred.

5.10 The multi-agency statutory assessment panel and the short breaks panel have been aligned to improve joined up decision making and holistic outcomes. The improved panel has senior representation from health and social care and officers have the opportunity to present draft plans. This approach ensures any changes to draft plans are agreed at the panel avoiding any delays, plans are holistic and have multi-agency oversight.

5.11 Quality Assurance of Education, Health and Care plans

The Local Authority has developed a Quality Assurance Framework to drive improvement in both the quality and impact of EHCPs for Manchester children and young people. Moderation of plans demonstrates that the voice of the child/young person is more evident in an increasing number of EHCPs. However, overall this is an area for continuous improvement, alongside timeliness. Multi-agency moderation of EHCPs is embedded at the panel stage of the revised Statutory Assessment process. Senior officers moderate plans monthly and a group of parents/carers is being trained to carry out moderations. Manchester Local Care Organisation community services also quality assure the health advice submitted for the plans through their own internal assurance processes.
5.12 **Equipment pathway**

The Lancasterian Outreach and Inclusion Service provides outreach support to all Manchester's schools on the inclusion of pupils with physical disabilities and/or medical needs. In 2018-19 the service has been extended to include an Occupational Therapist and a Physiotherapist, each working one day per week. The team have carried out research on the moving and handling of pupils with mobility needs in Manchester schools and this has led to a programme of training for school staff. The team ran a coproduction event in summer 2019 and are working with Manchester Local Care Organisation, Manchester Service for Inclusive Living, parents, education and social care to streamline the assessment and provision of equipment for children with mobility needs, for use both at school and in the home.

5.13 **Transition**

Social care, health and education staff are actively working to improve transition into adulthood for young people with SEND and medical needs. Transition is one of the areas that parents/carers say they are most concerned about, with their main worry being not knowing what is available for their young people at 18+ and 25+. In response, the multi-agency Transition Board is further developing the transition offer across Manchester. Board membership includes representation from Manchester Parent Carer Forum, care, education and health services, including acute and community, mental health services. The Board has undertaken extensive consultation with young people, parents and staff in children’s and adults’ services and this has informed its shared principles and action plan. Adult Social Care has appointed a Transition Lead to drive the programme in the Local Authority.

5.14 The Board has approved a new policy and initiated work to develop better information for young people and carers; this will set the strategic direction for transitions, which is responsive to the views and wishes of parents/families. The information will be used at annual reviews from year 9. The Transition Team is piloting more proactive approaches to engage with schools to provide a more streamlined pathway to assessment and services. The team has recruited a link worker who will work closely with schools, including attendance at EHC reviews. This role will ensure the facilitation of clear communication across the partnership.

5.15 In 2019, the council’s children and adult care services implemented a new recording and reporting database (Liquid Logic). Planning is underway for the council’s education services to move onto this database in 2021. This will allow for much easier transfer of information between services and support a better understanding of demand to enable adult services to respond more effectively to changing needs. Adult social care is working with families and partner agencies to gain an understanding of what types and locations of accommodation options may be required in the future for young adults in Manchester including a number of new build developments.
5.16 There is a health transition group led by Manchester Foundation Trust with membership from across services, including CAMHS and Manchester Local Care organisation, who are looking at transition between children’s and adult health services. This work complements the work of the transition board with cross membership. A CAMHS to adult mental health transition group is already in place, which looks at those young people who will need to transition to adult mental health services.

5.17 **Neuro rehabilitation transition**

Royal Manchester Children’s Hospital have established a Greater Manchester transition steering group, to design a neuro rehabilitation pathway that provides for the individual needs of young people and their families from across Greater Manchester who are transitioning from children’s to adult health, education and social care services. This pathway will cover young people aged 11 to 19 with an identified neurological impairment which includes one or more of the following:

- Physical impairment
- Cognitive impairment due to an acquired brain injury
- Behavioural impairment due to an acquired brain injury
- Degenerative condition

The aim of the steering group is to:

- Develop a young person centred Neuro Rehabilitation Transition Pathway
- Improve the function, quality and safety of young people transitioning into adult services
- Remove geographical and commissioning inequalities
- Ensure that all transitions are successfully coordinated
- Ensure continued access to therapies, skills, equipment, social care and education whilst transitioning through services
- Ensure that young people are transferred in a timescale that meets their developmental needs and that they are transferred to an adult service that meets their holistic needs
- Realise the lifelong potential of the young people of GM

6. **Children And Young People With Send Have Their Needs Met Through Excellent Education, Health And Care Services Jointly Commissioned Where Appropriate**

6.1 **Early Years**

The Early Years Delivery Model (EYDM), is now embedded as an integrated pathway for all children from pre-birth to five years of age supported by health care and Early Years professionals, leading to earlier identification of need for an increasing number of children. The Early Help Assessment (EHA) is used to access additional Early Years support.
6.2 The EYDM is a universal offer of the national Healthy Child Programme delivered by the Health Visiting Service, which include a new birth visit to every child and health developmental assessments at 6-8 weeks, nine months and 2 years. Each health development assessment includes the completion of an Ages and Stages Questionnaire, in partnership with the parent/carer. If children are found to have additional needs they can be directed into evidenced based interventions which are sequenced and support development at family level.

6.3 The Population Health Plan’s priority on giving children the best start in life is largely dependent on a high quality Health Visiting service that is able to work with all families and identify those needing additional support, early help and intervention. The Manchester Health Visiting Service offers a New Birth Visit, Maternal Mental Health Assessment and Developmental Assessments which include the completion of the Ages and Stages Questionnaire (ASQ3) at 6-8 weeks, 9 months and 2 years to 100% of children resident in Manchester, delivered via home visits or clinic appointments.

6.4 As part of Early Years Delivery Model the Speech and Language Therapy Service offers a comprehensive training programme to Early Years settings. The focus has been the early identification of speech, language and communication needs by increasing access to the Wellcomm language screen. A total of 2,301 Wellcomm screens were performed in the last twelve months which is an increase of 26% on the 2018-19 figures.

- For the 12 month period October 2018 to September 2019, 82% of Early Years settings/schools who currently provide two year funded places have attended Wellcomm training. This is a 7% increase on the previous year’s figures.
- 88% (n=2214) of two year olds who are in receipt funded places have access to Wellcomm screening. This is 9% increase on previous year’s figures.

6.5 The current pathway is continuing to identify far more children, much earlier who can then go on to receive an appropriate intervention earlier from the Speech and Language Therapy Service and prior to transitioning to school. This has a positive impact on children’s school readiness and good development outcomes.

6.6 In the six month period April 2019 to September 2019, 125 parents were referred to Parent Child Interaction groups compared to eleven parents referred in the previous twelve month period. This is a significant increase of number of parents referred, together with the increase in positive language strategies used by parents to encourage speech and language development during interactions with their children, as a result of the group sessions.
6.7 The ‘Call to Action 2011-15’ doubled the number of health visitors in Manchester, reducing health visitor caseloads, but they still remain above the recommended levels given the high levels of deprivation and complexity in Manchester. Options to provide further increased Health Visitor capacity are being considered by Manchester City Council and an additional £100k has been made available in 2019-20 to support increased Health Visitor training places. There is however a national shortage of Health Visitors and to mitigate this in the short-term, additional Community Nursery Nurses have been recruited into the service, to support the delivery of Developmental Assessments at 9m and 2yrs. This has seen a significant improvement in performance which has risen to 76.5% and 75.5% respectively and is now close to the England averages of 76.7% and 77.6%. Initiatives continue to be employed to further improve performance with more home based appointments being offered at times suitable to parents/carers and the use of publicity via posters and social media to inform families about the offer.

6.8 The Health Visiting Service have introduced a Specialist Disability Lead post to train and support the Health Visiting teams to offer an improved and sensitive service to SEND children and their families. A bespoke approach to the Health Development assessment is offered at 9 months and 2 years for children with SEND, tailored to meet their specific need rather than the standard assessment of their chronological age.

6.9 The Special Needs School Nursing service provide a nursing service to preschool children who have been identified with SEND. The team work closely with health visitors, social workers, CAMHS services, social workers and commissioners. This ensures a full nursing assessment takes place, early help
strategies are identified and families are supported with the transition into school and appropriate services.

6.10 Rodney House Outreach and Inclusion Service for Early Years (RHOSEY) support both families and settings to meet the needs of children who have a significant developmental need. RHOSEY staff work with education psychologists and the Statutory Assessment team to identify children’s needs and appropriate provision. There are 222 children in the 2020 cohort on the Early Years Pathway. RHOSEY are currently providing outreach support to 259 families.

6.11 Education

Manchester has a continuum of educational provision for children and young people with SEND aged 0-25. This starts with the expectation that there should be excellent universal provision and quality first teaching. Manchester’s Matching Provision to Need Tool, co-produced with parents, schools and settings, describes the provision educational institutions are expected to put in place for pupils at universal and SEN Support level, and the provision schools/settings, the Local Authority, health and other services should provide for pupils with EHCPs. The tool is designed to ensure consistency and transparency; helping families have informed discussions with schools/settings about the support being provided for their child.

6.12 The continuum works well for the majority of children and young people with SEND, however parents are telling us that support is variable across Manchester. The Authority employed a Senior Schools SEND Quality Assurance Officer to work with schools where practice is variable and to offer challenge and support through school to school working. This has led to improved provision mapping, identification and outcomes. Comments in Ofsted reports of many schools inspected in 2019 demonstrate the impact of this intervention.

6.13 In October 2019 85.1% pupils at SEN Support and 88.1% of pupils with EHCPs were attending Manchester schools judged by Ofsted to be Good or Outstanding, compared to 85.8% of the total school population.

6.14 The continuum of provision ensures that the majority of children and young people have their needs met in their local community. However, special schools and resourced provisions in mainstream schools are reaching capacity in their existing accommodation, despite a programme of expansions over several years. Currently a number of pupils with EHCPs are placed in special schools in other local authority boundaries within Greater Manchester and an increasing number are placed in independent specialist provision. In 2020-21, the council is providing £5.124m from the High Needs Block to increase the number of special school places by 134, resourced provision places by eight and fund an additional 362 EHCPs in the city. The expansion mirrors that of mainstream growth and does not increase the proportion of children attending a special school or resource provision in Manchester.
6.15 In 2017-18, the Department for Education funded the Local Authority to carry out a Strategic Review of SEND provision. The DfE have provided £4.8m capital funding over three years to implement the findings from the review. In addition, Manchester City Council Executive agreed to commit £20m of basic need capital funding from the DfE to create additional specialist SEND provision to meet the demand for places. All but one of Manchester’s special schools has a good or Outstanding Ofsted judgement. An element of the DfE Special Capital Fund is being used to build a new sixth form for North Ridge High School, on the Abraham Moss campus. This will allow North Ridge to further develop its employment, community and independence opportunities for sixth form pupils, ensuring students achieve excellent preparation for adulthood outcomes. In addition, a new special school, funded through the DfE’s free school programme, is due to open in north Manchester in 2021.

Figure 12: Type of school attended by pupils in Manchester, January 2019

6.16 This graph shows the distribution of pupils with SEND in Manchester schools. A much lower proportion of Manchester pupils with moderate learning difficulties, hearing impairment, visual impairment, and speech, language and communication needs attend special schools compared to nationally.

6.17 Special school funding model

In 2019 the Local Authority has undertaken a review of the special school funding formula to establish an equitable and efficient funding system that aligns funding to individual pupil needs. Special school places are currently funded at £10k per place, plus top-up based on the primary needs of children in their school. The authority has worked with the schools and re-classified top-up values based on all the needs of the child, as set out in the Matching Provision to Need document, instead of their primary diagnosed need.
6.18 Independent specialist provision

There is a year on year trend of increasing numbers of pupils being placed in independent specialist schools, though numbers in residential schools remains low. In 2020-21 an additional £3.059m is being provided from the High Needs Block for out of city placements to meet increasing demand while capital programmes are completed.

*Figure 13: Pre 16 independent school placement*

<table>
<thead>
<tr>
<th>Type of provision</th>
<th>2016-17</th>
<th>2017-18</th>
<th>2018-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day</td>
<td>67</td>
<td>77</td>
<td>94</td>
</tr>
<tr>
<td>Residential</td>
<td>9</td>
<td>13</td>
<td>12</td>
</tr>
</tbody>
</table>

6.19 The main primary needs for pupils in independent specialist provision are autism and social, emotional and mental health needs.

6.20 Multi Agency Panel

A multi-agency panel of senior officers from education, health and children and adults’ social care meets monthly to make decisions about placements and joint commissioning for children and young people with the highest level of need. In addition to agreeing multi-agency packages of support for individuals, the panel identifies gaps in provision in the local area which need to be jointly commissioned. This is leading to a reformed commissioning strategy. The panel is currently developing a dynamic support database to provide an overview of the children and young people with the highest level of need, with the aim of preventing needs escalating to the level that they require residential or hospital provision.

6.21 Outreach

The Local Authority commissions outreach support for early years settings and mainstream schools from special schools. This support is designed to help staff identify need, develop strategies and practices to better support pupils with SEND. The outreach offer includes advice on strategies to support individual pupils, training for teachers and teaching assistants, learning walks, SENCO cluster groups. Outreach support is annually evaluated and is regarded as highly effective.

6.23 As well as providing peripatetic teaching and monitoring for pupils with hearing and visual impairment in Manchester schools and settings, Manchester Sensory Support Service provides advice and training to mainstream teachers and other staff on approaches and strategies to meet the needs of pupils with sensory impairments. In 2019 the Sensory Service began a pilot programme of extending their advice and training offer to post 16 providers.

6.24 School staff tell us that their priority training need is social, emotional and mental health needs (SEMH). The Hospital School have developed a
comprehensive outreach offer to mainstream schools on supporting pupils with mental health needs. Additional outreach support for primary schools in north Manchester on supporting pupils with SEMH has been commissioned from Bowker Vale Primary School to add capacity to the current outreach offer from Bridgelea School.

6.25 Inclusion strategy

The Manchester Inclusion Strategy is a response to the Children’s and Education Service’s priority to reduce exclusion and works towards the Our Manchester Our Children vision ‘building a safe, happy, healthy and successful future for children and young people’. The strategy has been developed through discussions and workshops with key partners, including headteachers, SENCOs, governors, children and young people, parents/carers, Greater Manchester Police, social care and early help staff and Thrive programme leads.

6.26 The Inclusion Strategy was launched in November 2019 at an event attended by over 300 delegates. One of the key points arising from the strategy consultation was that schools, colleges and other services want a toolkit and a list of services and resources that are available across the city to assist them in supporting young people. In acknowledgement of this, delegates had the opportunity during the launch event to visit a market place of 26 different providers who offer wide ranging services which can help to support inclusion.

6.27 A strategy implementation plan has been developed based on the ‘we will’ statements which run throughout the strategy. There will be a strong focus on the following priority areas between January and July 2020. Working with education and other partners to:

- define what good inclusive practice and provision looks like in Manchester,
- produce and disseminate a toolkit of services, resources and interventions to support the inclusion of children and young people,
- develop and pilot guidance to ensure transition processes are robust and children are supported as they move from primary to secondary school,
- further develop the RONI (at Risk of NEET Indicator) tool to ensure positive transition to post 16,
- work with school leaders and providers to review the continuum of provision for pupils with additional needs, to ensure there is an appropriate range of high quality provision across the city.

6.28 The Manchester Inclusion Strategy - Preventing Exclusion and Supporting Children and Young People to Thrive and the Inclusion Strategy on a page documents are available on the Manchester City Council website via the following link:

https://secure.manchester.gov.uk/directory_record/376574/manchester_inclusion_strategy/category/1479/childrens_services
6.29 Joint commissioning

In addition to the joint funding decisions being made by the Multi-Agency panel, the Local Authority and Manchester Health and Care Commissioning are jointly commissioning a number of programmes to support children and young people with SEND.

- Lancasterian Outreach and Inclusion service has been able to extend its outreach support to schools by the addition of part-time Occupational Therapist and Physiotherapist. This has enabled the team to run seventeen manual handling training programmes for mainstream and special school staff. As mentioned above, the team are also involved in streamlining the equipment assessment pathway.
- The Speech and Language Therapy Service, Local Authority and special schools have established the Augmentative and Alternative Communication (AAC) group in Manchester. Special school staff and speech and language therapists are trained to carry out assessments of pupils with AAC need in mainstream schools and then to recommend appropriate strategies and equipment to meet the pupil’s needs. Staff are also able to identify which children will meet the threshold for high tech equipment funded through NHS England.
- Bridgelea School has been jointly commissioned to provide assessments and interventions for children who display problematic and sexualised behaviour. This service allows children to understand their behaviours and understand how to form positive and appropriate relationships with peers and adults. It is effective in supporting children to remain in mainstream schools.

6.30 Community Health Services

Delivering services which meet the health needs of children and young people with SEND and providing support to parents and carers in managing the health of their child, Community Health Services provide safe, effective and high quality care and advice in the community through appropriately trained and skilled staff. Working out of both schools and child friendly environments the therapy staff, namely occupation therapists, physiotherapists and speech and language therapists work collaboratively with their nursing and paediatric colleagues.

6.31 Special needs school nurses are based in every school attended by children with complex fluctuating and complex long term health needs attend. Other nursing teams providing universal services such as the School Health Screening Team offer vision and hearing screening at school entry age so any problems are identified early and appropriate referrals made. School nurses meet with SENDCOs termly to identify any children with additional needs and refer onto services.
6.32 **Emotional health and wellbeing**

MHCC, MFT CAMHS and key stakeholders have designed a ‘THRIVE’ model of care that will be implemented across Manchester localities, in line with the Local Care Organisation configuration, to ensure the all Mental Health and Emotional and Wellbeing services are available to children and young people in a wrap-around provision model. This will ensure a ‘single point of access’ and minimise blockages in accessing the right service at the right time for all children and young people across the city. The strategic vision is to establish a Manchester ‘M-THRIVE Hub’ as a single point of entry, a front door, to Manchester’s Emotional Wellbeing and Mental Health services. This will involve having a Manchester THRIVE Hub Team based in three locality THRIVE Hubs across Manchester, i.e. Central, North and South, locally covering all the neighbourhoods in that specific locality.

6.33 As part of the innovation, Manchester will look to expand the successful social communication pathway pilot (currently in the south) to the whole of the city as well as an expansion of Attention Deficit Hyperactivity Disorder provision across the city, a new school nurse and occupational therapist (assigned to LCO) to deliver a robust integrated offer to the hospital school and the wider community children and young people’s mental health system. The M-THRIVE ‘wrap-around provision model’ will also encompass the current pilots (Integrated Community Response, KOOTH Digital offer and the NHS nationally mandated Community Eating Disorder Service).

6.34 These proposed developments are currently undergoing approval through the MHCC governance processes with an aim to start the implementation and roll out of schemes during 2020/21.

6.35 **Short Breaks**

Parents/carers of children with SEND are entitled to a break from their caring responsibilities. There is a continuum of short break provision in Manchester. Families are encouraged to use the Local Offer or attend the Local Offer drop ins to find out about local universal provision. The Our Manchester Disability Plan has a focus on enabling disabled people to be able to access facilities within their local community.

6.36 Manchester has been investing in improving the universal short break offer and has partnered with Young Manchester to increase the funding available for provision and training. The Local Authority provided a £50k grant to Young Manchester, to support the development of universal youth and play services to become more accessible to young people with SEND. Young Manchester has sourced additional funding to bring the total investment to £87k. MHCC has also funded Young Manchester to increase inclusive provision. The partnership is working on innovative ways to support the transition of children and young people from targeted short break services to universal services. This will allow the young people to be able access a wider range of activities in
their local communities, whilst also allowing their parents to have a break from their caring responsibilities. Developments include:

- Providing an Innovation Fund.
- Commissioning training providers to design disability awareness courses so that the participants can cascade within their own settings, through the development of tool kits and other support resources. This is coupled with the opportunity for voluntary sector providers to apply for funding to cover the cost of sending staff on the training.
- Two SEMH pilots have attempted to address some of the barriers young people identified such as transport. Parents also report that some children and young people with SEMH are very marginalised and that coping in busy youth settings can be difficult. Young people regularly find themselves in situations where they get barred. A pilot study was commissioned in response which has led to the development of the ‘Build A Bike’ Project. Young people are trained to understand the mechanics of a bike, put together a bike and once complete, with a safety session built in, they get to keep the bike, which they can then use to get to youth activities in their local community.
- The Film-Makers Travel Project involves young people as film makers in the creation and editing of Travel Training videos. These projects are still underway but staff report how excited and motivated the young people are.
- Barnardo’s are supporting young people with SEND to access universal provision, including travel training support. Barnardo’s will work with the youth provider to offer advice on making reasonable adjustments and provide training, such as writing social stories. The young people will be provided with a personalised self-management app called Brain In Hand.

All of these projects are being evaluated and a report will be ready in May 2020.

6.37 Manchester is currently providing 1,256 targeted Short Breaks and 271 specialist Short Breaks. These include summer playschemes, evening and weekend youth and play activities, care support at home, befriending and a small number of children receive overnight short breaks. A high proportion of families choose to take a Direct Payment to pay for their short break. For some types of short break, demand currently exceeds supply, so staff from the specialist resource team are working with parents, social workers and commissioners to review the short break offer. Commissioners have identified additional providers who are able to offer targeted and specialist services.

6.38 Early Help

The three Early Help Hubs continue to provide a coordinated response to a targeted need for early help, wrapping services around a family. IAS ensures good connectivity with the three hubs via co-location for part of their time in the hubs, via attendance at weekly multi-agency partnership allocation meetings and ensuring Early Help Hub staff are familiar with the SEND offer. Early Help Hub staff have attended drop in sessions as part of the co-production work with parents and have promoted information and awareness
raising on the role and function of the hubs. The Early Help Practitioners (EHPs) are delivering targeted support to an increasing number of families in relation to SEND, especially autism. In recognition of this, all EHPs received additional training by Autizma who were commissioned to ensure front line staff were up to date with advice, information and with strategies to support families. This has significantly increased practitioner confidence and skills and a number of families’ experience of receiving support from early help services in relation to SEND was included as part of the refresh of the Early Help Strategy and Annual Evaluation Event.

6.39 There are a number of examples of individual case studies where Early Help intervention has led to improved outcomes for children and young people. For example an 11 year old child who was attending a Wythenshawe Primary school was on a limited timetable of two hours a day and had received a police caution for criminal damage prior to an Early Help Parenting Team request from their social working. Following the intervention from the Early Help team the family was enrolled on Talking Teens (parenting workshop which helps manage disruptive teenage behaviour); enrolled on the nurture programme (which focuses on emotional health of parent and child). The impact of intervention has been ‘Mum has begun to listen to me more’ (child’s voice); young person’s timetable slowly increased ahead of end of school year and they were on full timetable by end of Year 6. The case is now closed to social work, there is no more police involvement and the young person has started mainstream secondary school who are pleased with progress.

6.40 Children with Disabilities Team

Manchester’s Children with Disabilities team provides a social work service for families with children with the most complex needs. The team also provide training and advice to colleagues in locality and permanence social care teams who have less expertise in working with children with SEND.

6.41 In the past year the team had a Special Guardianship Order and an adoption. They are working with two other children who are going to be adopted by their foster carer. This is as a direct result of the team pushing for a permanence plan for the children and believing that disabled children need the same opportunities as all children. The team have identified a number of children on the edge of care being supported at home and ensured they get high support and that the multi-agency team is working together. This has prevented some disabled children going into care.

6.42 Youth Justice

The Youth Justice Service have recently achieved a national SEND Quality Leadership Award for their work to develop better understanding, partnerships and interventions to respond to the needs of children with learning difficulties. Practitioners and managers have been working with SEND partners to improve early intervention with young people with SEND and prevent escalation into the criminal justice system. A team manager who has led this
work was awarded with a prestigious Butler Trust Award by Princess Anne last year.

6.43 All Youth Justice workers have received training to support early identification of SEND and young people can benefit from Speech and Language Therapy and Drama Therapy interventions. In addition, Educational Psychology professionals are piloting new approaches to working with young people with SEND. The Service is currently developing a Youth Justice Virtual School so that each child will have an individual Pathway Plan setting out how their education and training needs will be addressed and support to link them into employment.

6.44 Greater Manchester

The Director of Education chairs the Greater Manchester SEND Board, which reports to the GM Children and Young People’s Board. There is representation from the 10 local authorities, health commissioners and parent/carer Forum members. Since October 2019, a full time officer supports the work of the board jointly funded by the 10 Local Authorities and a contribution from Health.

6.45 The agreed purpose of the board is to improve outcomes for children and young people with SEND 0 – 25 years by addressing the following priorities:

- Working in partnership with parents/carers
- Reducing the variation in practice, provision and quality in Greater Manchester
- Ensuring equality by streamlining systems, improving consistency and transparency for SEND across Greater Manchester for health, education and care
- Being cost effective, utilising and releasing Greater Manchester resources through collective commissioning to deliver best value and impact
- Developing a learning community across Greater Manchester with a highly skilled workforce working in collaboration, providing peer support and challenge to improve services and performance and share practice.

7. Preparing For Adulthood (PfA) Is Embedded In Manchester From The Earliest Years

7.1 Preparing for Adulthood (PfA) was one of the themes introduced by the Children and Families Act 2014. The PfA programme includes four strands:

- Education, employment and training
- Health and wellbeing
- Having friendships and relationships and being part of the community
- Developing independence

7.2 Young people with SEND tell us that it is important to them to have a job and be part of their local community. They want to be as independent as possible, have friends and relationships and an ‘ordinary life’. Helping young people
achieve these outcomes requires strong partnership working between families and services. ECHP annual reviews from age 11 at the latest should focus on actions and provision that will help young people achieve their Preparing for Adulthood outcomes.

7.3 **Education and training**

Manchester young people with SEND have a wide range of high quality 16 education and training provision to choose from. Within Manchester this includes:

- Mainstream school sixth forms
- Sixth form colleges
- General further education college
- Independent training provider in creative industries
- Manchester Adult Education Service
- Special school sixth forms
- Independent specialist college
- Supported internships
- Study programmes and Traineeships
- Apprenticeships
- Short courses with voluntary sector providers such as Princes Trust
- Individualised programmes, sometimes with more than one provider.

7.4 Manchester provides high needs funding to support 16-25 year olds with EHCPs in over 40 sixth forms, colleges and training providers. Manchester post 16 provision is inclusive and popular with students across the sub-region. In 2018-19 more non-Manchester students with SEND attended post 16 provision in Manchester than the number of Manchester students who chose to study outside the city.

7.5 There has been a significant growth in the number of young people remaining in education and training, since the Children and Families Act extended the entitlement to an EHCP to young people aged up to 25 if they had not already achieved their educational outcomes. This growth in demand has put pressure on the high needs budget and in January 2020, Schools Forum agreed to an increase in post 16 high needs funding of £1.7 million.

7.6 Colleges and training providers are responding very creatively in the way they are progressing young people into their Preparing for Adulthood outcomes. Provision is also becoming more inclusive. Over three years, The Manchester College has decreased the proportion of students attending discrete entry level courses and increased the proportion studying mainstream courses and Supported Internships.

7.7 Preparing for Adulthood is a focus of annual reviews from Year 7 and school and college staff are helping young people with SEND identify what a ‘good week’ would look like for them as they move into adulthood. Manchester’s specialist support schools have excellent careers and work related learning
programmes and offer students many opportunities to learn independence skills in their local community.

7.8 In 2019 eight special schools took part in an exciting initiative – Digital Inc. Digital Advantage, funded through a Careers and Enterprise Company grant and additional support from Manchester City Council, delivered a programme of digital employability and business start-up skills to 80 pupils. Business mentors worked with pupils, teachers and parents to open up routes into digital and media industries for disabled young people. This culminated in a graduation ceremony, showcasing the work students created. These included an app to help children and parents manage pocket money, an app linked to the Skills For Life challenges, and counterintuitively, an app designed to help young people spend less time on their digital devices. This programme is being run again in a number of schools in spring and summer 2020. Digital Advantage is currently developing a Supported Internship in digital skills to give progression into the industry for the stars of the Digital Inc programme. https://www.digitaladvantage.org.uk/digital-inc-2/

7.9 Supported Internships continue to be a success in Manchester. Internships are a partnership between employers, colleges, supported employment providers and the Local Authority. They are the best route into employment for young disabled people as they allow young people to learn skills in real work environments with the support of tutors and job coaches. The Manchester College and Pure Innovations support the largest number of interns – working in Manchester City Council, Manchester Foundation Trust, Manchester Airport and Media City. Loreto and Bridge College also run internship programmes and Manchester now has over 70 interns.

7.10 Over seven years, 80% of interns have moved into work and 91% are still in employment. A small number of students choose to work as volunteers rather than take paid work, either because of benefit issues or for health reasons. Some young people want to volunteer alongside having a part-time paid job, as part of their ‘good week’. Manchester Foundation Trust and The Manchester College are currently devising a protocol to streamline the route from an internship into becoming a hospital volunteer.

Weblinks to internship case studies:
- Airport - https://www.youtube.com/watch?v=EECBS0GOvXg
- Manchester Hospitals - https://www.youtube.com/watch?v=_j81I9Gl9co
- Supported Internships Wythenshawe Hospital - https://www.pureinnovations.co.uk/2018/10/11/supported-internship-extends-wythenshawe-hospital/
- Alchemist cocktail bar - https://www.youtube.com/watch?v=a_yXhmYILHM

7.11 Manchester Adult Education Service runs two programmes for young adults with EHCPs who need longer in education to achieve their Preparing for Adulthood outcomes: The STEPS course includes the opportunity to gain accreditation in functional skills, but the course focuses on employability and
independence skills and includes work placements and community activities, sourced by Pure Innovations staff.

7.12 The Personal Education Programme is designed for young people who need a personalised approach to achieve their outcomes. Many of the young people on this programme have social, emotional and mental health difficulties and may have struggled to achieve their potential at school. The programmes can include: employability training, job coaching, independent travel training, work and community placements and functional skills to ensure young people have the skills to move into employment or further learning at the end of the programme.

7.13 In autumn 2019, Manchester Adult Education Service, work and skills, commissioners and SEND staff ran a workshop with young people, parents, social workers, teachers and other stakeholders to gather information to inform future employment support commissioning. Weblinks to Manchester Adult Education case studies:

- https://www.pureinnovations.co.uk/2018/11/07/premier-inn-opens-doors-steps-students

7.14 There is a growing range of programmes that support disabled adults into employment. Manchester City Council commissions the My Futures programme from The Manchester College. A number of disabled young people have successfully completed the programme and moved into paid work. The Authority has employment support contracts with Breakthrough UK and Pure Innovations for disabled adults. From April 2020, Remploy have been commissioned by the Combined Authority to run a new Greater Manchester supported employment service for people with learning disabilities, autism, and mental health difficulties.

7.15 The Our Manchester Disability Plan employment workstream is leading a programme of work designed to help disabled people prepare for work, get into work and progress in work. A disabled people’s jobs fair held in spring 2019 resulted in five disabled people moving into paid work.

7.16 Employers across Greater Manchester are working to improve routes into work for disabled people. KPMG is a Disability Confident leader and runs an employer Ability Forum. Manchester City Council is working towards becoming a Disability Confident level 3 employer. Talk Talk has linked with Ambitious about Autism to help more people with autism get into and stay in work.

7.17 Greater Manchester Autism Consortium is running an Enabling Employment campaign to promote positive employer and employee stories and open up employment opportunities for people with autism. Link to the first story: https://www.youtube.com/watch?v=NrktdB3fCA&feature=youtu.be
7.18 All of these initiatives are required because disabled people are far more likely to be workless. In Manchester, the Connect Service has been recommissioned to focus their work on preventing vulnerable young people, including those with SEND, becoming NEET (not in education, employment and training). The NEET figure for 16 and 17 year olds with EHCPs remains high at 8.6%, but strong partnerships are in place, to reduce numbers of young people becoming NEET, with Connect staff based in the Endeavour Federation, the PRU, The Manchester College and with the Virtual School and Youth Justice teams.

7.19 The Work and Skills and SEND teams have produced a Preparing for the Future booklet to help young people and their parents better understand the routes they can take after school.

7.20 **Health**

Annual reviews of EHC plans allow aspirations to be reviewed and updated. Transition workshops have been attended and a representative from the community nursing service attends the Trust transition meetings. Special Needs School Nurses offer therapeutic support to young people to support managing change / transitioning to college / workplace.

8. Improved Outcomes And Standards Across Education And Training

8.1 Manchester has high expectations and aspirations for children and young people with SEND. Improving educational outcomes for children and young people with SEND continues to be a priority for Manchester.

8.2 Manchester City Council has an embedded Quality Assurance process in place; this process was revised in September 2019 and includes assurance of provision and outcomes for children with SEND and this year Manchester has commissioned an additional Quality Assurance spring term visit for all schools with a focus on inclusion. Ofsted reports for both primary and secondary schools in Manchester generally provide positive assurance in regard to SEND provision. However where overall judgements and SEND outcomes have been judged to be less than good or where Manchester’s own Quality Assurance processes has identified that SEND provision is variable, targeted support has been put in place. This support has included brokered school to school support with NLEs from special schools working with mainstream school leaders; whole school SEND reviews; equalities training for staff from parent champions and whole school inclusion training from parent champions. Identified schools have also been invited to attend Support and Challenge Boards with the Director of Education and the Strategic Director of Children and Education Services. SEND reviews and attendance at Support and Challenge Boards have led to a ‘Team Around the School’ approach in some schools, in which a multi-agency team including the Statutory Assessment team and in some cases Early Help, Educational Psychologists and CAHMS work together to understand the context of the school and to remove any barriers to ensure the very best outcomes for the most vulnerable pupils including those with SEND.
8.3 Educational outcomes for children and young people with SEND in Manchester continue to show an inconsistent picture with a decline in outcomes in Key Stage 2 in 2019.

8.4 Early Years Outcomes for Children with SEND

Early Years Foundation Stage outcomes for pupils with an EHC plan improved slightly with a one percent increase of pupils achieving a Good Level of Development (GLD). However, Early Years Foundation Stage outcomes for pupils receiving SEN Support declined in 2019 with 4% fewer pupils meeting the Good Level of Development (GLD) standard. In 2019 far fewer pupils identified with SEMH and those identified with speech, language and communication needs achieved GLD. This further widens the gap in attainment between pupils receiving SEN Support and those without SEN and is a priority for targeted work. To address this Manchester has invested in every primary school receiving Elklan, communication and language training.

8.5 These early years foundation stage outcomes are against a background of sustained improvement in Early Years PVI settings with 96% of settings judged to be good or better in January 2019 and the Early Years Delivery Model which has led to earlier identification of need.

*Figure 14: Early Years children achieving Good Level of Development*

8.6 Phonics and Key Stage 1 outcomes for children with SEND

Phonics outcomes for children with SEND have improved in 2019 and are now the same as for children with SEND nationally.
8.7 At Key Stage 1, 2019 outcomes for children with SEND at SEN support and those with an EHCP improved in all subjects at the expected and higher standard with the exception of writing for children with EHCPs.

8.8 Outcomes for children identified as having social, emotional and mental health needs (SEMH) improved in all subjects, children identified with speech, language and communication needs (SLCN) improved in all subjects with the exception of Maths. Children identified as SEMH achieved broadly in line with their cohort nationally for writing, reading and science, and are above the national cohort in Maths. However, despite these improvements children with SLCN and those with autism (ASD) continue to achieve below the same cohort nationally in all subjects. Manchester pupils with moderate learning difficulties continue to perform better than the same cohort nationally at Key Stage 1 despite a slight decline in outcomes in 2019.

*Figure 15: Key Stage 1 outcomes*

8.9 Key Stage 2 Outcomes for Children with SEND

Following the improvements for outcomes for children with SEND at the end of Key Stage 2 in 2018, in which outcomes were above national for SEN Support pupils and at national for those with an EHCP, 2019 outcomes show a decline in KS2 outcomes for pupils with SEND. Manchester KS2 reading outcomes declined for all pupils with school leaders citing the increased word count as having an impact on reading outcomes. This is reflected in the significant drop for SEN Support pupils at reading of 9% which has impacted on Reading, Writing and Maths combined outcomes for pupils with SEN Support and EHCP, both now are below national for those pupils achieving the expected standard and the higher standard. When analysing individual groups Key Stage 2 SEND outcomes have been impacted by a 20% and a 10% drop, respectively, in pupils identified with autism (ASD) and moderate learning difficulties (MLD) achieving the expected standard in reading. This reflects the decline in Reading across all pupils in Manchester in 2019.
8.10 Although outcomes at KS2 for children with identified SEND were generally disappointing, outcomes for pupils whose primary need is social, emotional and mental health (SEMH) improved in all subjects other than reading and this cohort achieved at national or higher in all subjects when compared with the cohort of pupils with the same primary need. Pupils with autism (ASD) or speech, language and communication needs (SLCN) as their primary need, on average, achieved below the national averages for all subjects when compared with pupils with a similar level of need.

*Figure 16: Key Stage 2 outcomes*

![Graph showing KS2 outcomes](image)

8.11 **Key Stage 4 outcomes for young people with SEND**

At Key Stage 4 in 2019, the percentage of SEND pupils who achieved a grade 4 or above in 2019 has remained the same as 2018 with improvements for SEN Support and a slight decline for those pupils with an EHCP. However KS4 outcomes for all SEND, SEN support and those pupils with an EHCP are below SEN outcomes nationally in all accountability measures. Of particular concern is the Manchester SEN support progress 8 score of -0.81 in 2019 compared to a national progress 8 score of -0.43 for the same cohort.

8.12 There were significant improvements in the performance of pupils with autism (ASD) and those with identified social, emotional and mental health (SEMH). There was a 12 % increase in pupils with autism achieving a grade 4 to 9 in English and Maths and there was also a 3% improvement in young people with achieving a grade 4-9 in English and Maths.
The percentage of SEN Support pupils who have achieved a grade 5 or above in English and Maths, has remained the same as 2018 with a similar gap to national. However, there was a decline of pupils with an EHC plan achieving a grade 5 or above in both Manchester and nationally. There has also been an increase in the percentage of pupils with social, emotional and mental health needs achieving a 5 or above in English and Maths.

Figure 18: Key Stage 4 achieving grades 9-5 English and Maths
8.14 Improving outcomes for children with SEN support and children with an EHCP remains a priority for Manchester, particularly at Key Stage 4. As previously stated Manchester commissions special schools to provide outreach support to mainstream schools and early years settings. This ensures that education professionals are supported in making their provision inclusive for children with a wide range of SEND and medical needs. Outreach leads and the Sensory Service also help schools with the graduated response – identifying pupils’ needs and putting in place appropriate interventions. In addition, Manchester has developed a school SEND data base and this has been used to identify schools for support. To improve the consistency of schools’ accuracy and timeliness in identification of SEND, as previously stated, the Local Authority employed an experienced SEND professional to offer challenge and to improve practice through school to school support. This has resulted in bespoke packages of support and has included using outstanding special schools to improve inclusive practice in mainstream schools. As stated in paragraph 8.2, where there are significant concerns around practice Education Services has completed SEND reviews in collaboration with the school, schools have been invited to attend Support and Challenge Boards and this has also resulted in a Team Around the School approach with representatives from the Statutory Assessment Team, Educational Psychologists, CAMHS and Early Help all supporting schools in ensuring the removal of barriers and identification of best practice.

8.15 Exclusions

Reducing both permanent and fixed term exclusions has been a long standing priority for Manchester Children and Education Services. However in 2017/18, following a four year increase in permanent exclusions there was an acknowledgement of the need to approach reducing exclusions differently and a commitment to a multi-agency response. As a result of this Manchester’s Inclusion Strategy was launched on November 8th 2019.

8.16 Throughout the development of the Inclusion strategy, detailed in 6.25, there has been an increased focus on the use of exclusions and the unvalidated data for Manchester in 2018/19 shows a significant decrease in the use of exclusion. The number of permanent exclusions has fallen to a point lower than it has been for the past four years. This reduction is due to a number of actions taken which included a series of workshops highlighted the over representation of vulnerable groups in exclusions including those children identified with Special Educational Needs and Disabilities (SEND). These workshops and discussions appear to have increased reflective practice and have impacted positively in the reduction of permanent exclusions. The consultation and workshops have also provided an opportunity to share examples of strong leadership and good practice which already exists in many of Manchester early years' settings, schools and Post 16 provisions where there is robust evidence of strong inclusive practice.

8.17 The 2018/19 data for Manchester shows a reduction in the rate of permanent exclusions amongst pupils with SEND. Pupils with SEND remain more likely to be excluded than their peers, with 52 (58.4%) of the pupils permanently
excluded having SEND in 2018/19. However, this difference has reduced in comparison with 2017/18, when 84 (63.2%) of the pupils permanently excluded had SEND.

Figure 19: Permanent exclusions

8.18 The rate of pupils with SEND who have at least one fixed term exclusion is around three and a half times that of pupils with no SEND. Pupils with an EHC plan continue to have the highest rate of exclusions, at almost four times higher than pupils with no SEND, while pupils receiving SEN support is three and a half times higher than pupils with no SEND. Nationally the trend is similar to Manchester, as pupils with an EHC plan have an exclusion rate of almost four times higher than those without SEND, while pupils receiving SEN support have an exclusion rate which is just over three and a half times higher.
8.19 Reducing the use of both fixed term and permanent exclusions for those children with identified SEND and ensuring Manchester schools are inclusive remains a priority for Manchester as detailed in the Inclusion Strategy section.

8.20 School attendance

School attendance in Manchester remains a strength as it has been at or below national averages in both primary and secondary phases for the last five years. In 2018/19 overall school absence was 4.81% an improvement from 4.88% the previous year due to a further decline in absence in primary schools. However school attendance in special schools and PRUs remains an area of focus and absence increased in 2018/19. This is most significant for pupils with SEMH as a primary need. This is being targeted through direct work with these schools.

8.21 Results for the full academic year for 2018-19 have not yet been released by the DfE but Manchester data shows that although absence for all pupils has remained at similar levels and is therefore likely to be better than national absence, there has been a slight increase in absence for children with identified SEND.

8.22 In 2018/19 overall absence for children with identified SEND was 7.8% compared to 4.2% for pupils without SEND. There was a percentage point increase in absence for those pupils with SEN Support whilst the absence rate of children with an EHC plan remained the same. Persistent absence for children with SEND remained the same as the previous year. In 2019 17.9% of pupils with SEN Support were persistently absent which is slightly below national levels and 26.3% of pupils with an EHC plan were persistently absent.
which is slightly above 2019 national levels. Children with profound and multiple learning disabilities have the highest persistent absence rate of 37%, which is a significant improvement from the previous year. The second highest group is children with physical disabilities where persistent absence has again improved when compared with last year. The next cohort is children with SEMH whose level of persistent absence has increased in 2019/19.

**Figure 21: Overall absence of SEND population by type of school and primary need**

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th></th>
<th>2018</th>
<th></th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pri.</td>
<td>Sec.</td>
<td>Spec.</td>
<td>All</td>
<td>Pri.</td>
</tr>
<tr>
<td>ASD</td>
<td>6.2%</td>
<td>9.9%</td>
<td>7.3%</td>
<td>7.4%</td>
<td>6.54%</td>
</tr>
<tr>
<td>SEMH</td>
<td>5.7%</td>
<td>10.2%</td>
<td>28.8%</td>
<td>9.2%</td>
<td>6.29%</td>
</tr>
<tr>
<td>HI</td>
<td>4.5%</td>
<td>6.7%</td>
<td>5.3%</td>
<td>4.75%</td>
<td>6.43%</td>
</tr>
<tr>
<td>MLD</td>
<td>5.4%</td>
<td>7.5%</td>
<td>29.0%</td>
<td>6.1%</td>
<td>5.36%</td>
</tr>
<tr>
<td>MSI</td>
<td>4.8%</td>
<td>5.3%</td>
<td>6.08%</td>
<td>6.95%</td>
<td>4.82%</td>
</tr>
<tr>
<td>PD</td>
<td>7.5%</td>
<td>10.7%</td>
<td>14.9%</td>
<td>9.7%</td>
<td>7.42%</td>
</tr>
<tr>
<td>PMLD</td>
<td>8.5%</td>
<td>10.8%</td>
<td>14.4%</td>
<td>13.6%</td>
<td>9.46%</td>
</tr>
<tr>
<td>SLCN</td>
<td>4.7%</td>
<td>5.9%</td>
<td>14.4%</td>
<td>5.0%</td>
<td>4.82%</td>
</tr>
<tr>
<td>SLD</td>
<td>7.9%</td>
<td>5.4%</td>
<td>6.7%</td>
<td>6.7%</td>
<td>5.75%</td>
</tr>
<tr>
<td>SpLD</td>
<td>5.0%</td>
<td>7.0%</td>
<td>12.4%</td>
<td>5.8%</td>
<td>5.25%</td>
</tr>
<tr>
<td>VI</td>
<td>5.1%</td>
<td>6.4%</td>
<td>5.5%</td>
<td>5.31%</td>
<td>5.15%</td>
</tr>
<tr>
<td>OTH</td>
<td>6.3%</td>
<td>8.0%</td>
<td>7.1%</td>
<td>6.83%</td>
<td>7.27%</td>
</tr>
<tr>
<td>NSA</td>
<td>5.9%</td>
<td>5.8%</td>
<td>5.8%</td>
<td>5.61%</td>
<td>6.39%</td>
</tr>
<tr>
<td>SEN Support</td>
<td>5.3%</td>
<td>7.7%</td>
<td>22.4%</td>
<td>6.1%</td>
<td>5.45%</td>
</tr>
<tr>
<td>EHC Plan</td>
<td>6.7%</td>
<td>8.5%</td>
<td>11.4%</td>
<td>9.5%</td>
<td>6.66%</td>
</tr>
<tr>
<td>All SEND</td>
<td>5.4%</td>
<td>7.8%</td>
<td>11.7%</td>
<td>6.7%</td>
<td>5.57%</td>
</tr>
<tr>
<td>No SEN</td>
<td>3.8%</td>
<td>4.7%</td>
<td>4.1%</td>
<td>3.84%</td>
<td>4.77%</td>
</tr>
<tr>
<td>All pupils</td>
<td>4.1%</td>
<td>5.1%</td>
<td>11.7%</td>
<td>4.6%</td>
<td>4.10%</td>
</tr>
</tbody>
</table>

**Source**: DfE and ONE system

8.23 Improving attendance and reducing persistent absence for children and young people identified as receiving SEN Support and for those pupils will an EHCP remains a priority for schools and the Manchester attendance team. Local Authority officers have completed attendance audits with identified schools; they have offered attendance clinics and bespoke packages of support. There is evidence of the impact of this work; with individual schools demonstrating either overall improved attendance or specific case studies which show improved attendance on an individual level. One school has clear evidence of the impact on their processes with young people identified as having social, emotional and mental health needs having improved attendance the longer the pupil attended the establishment. The Manchester Attendance team held a very successful conference in September 2019 focusing on children with SEND with an input from Autizma, an organisation of Manchester parents raising awareness of autism.
9. **A Highly Skilled Workforce Across All Stakeholders Improves Outcomes For Children And Young People**

9.1 Implementing the SEND reforms requires a change in culture; organisations are moving to a way of working that starts with the voice of children and their families. The Local Authority and health have run a comprehensive programme of training since before the Children and Families Act was enacted.

9.2 In education, health and social care, SEND has been a key aspect of workforce development. This is now embedded in Community Health Services and as early as 2016 CQC identified that ‘The special needs nursing team had developed a multiple health needs training package that was delivered to the local authority and education to educate all staff, including transport, youth group workers and local initiatives who came into contact with a child with complex health needs. This ensured they knew the signs to look for if a child’s condition deteriorated and what immediate support the child or young person would need. At the time of the inspection several hundred people had gone through this training.’ This training has continued. Manchester Children’s Services identified SEND as a priority for workforce development in 2018 and improving the quality of EHCPs has been a focus of staff engagement days and a Social Care conference on SEND was held in January 2019 which received positive feedback.

9.3 Manchester Parent Champions co-produce workforce development training and are trained as facilitators so that they can co-deliver training to MCC and NHS staff. Parent Champions work in partnership with a range of agencies to develop a strengths based approach to the Manchester workforce. Champions are filmed for the virtual reality training element of the MCC strengths-based way of working.

https://www.youtube.com/watch?v=RdRif127DEE&feature=youtu.be

9.4 The Local Authority commissions outreach support for mainstream schools from all special schools, and schools are able to buy additional training from Special Schools. The authority provides termly SENCO network meetings. 130 schools attended these networks in 2019. MCC runs termly Preparing for Adulthood networks for staff from schools, colleges, training, careers, and voluntary organisations who work with 14-25 year olds. Schools, colleges and other partners have been able to access training on person centred planning, funded by the Local Authority. New SENCOs can access SENCO accredited training which is delivered on behalf of the Local Authority by Manchester Metropolitan University through a formal agreement. This has led to an increased understanding of identification of special needs but is still an area for further development in mainstream settings.

9.5 Rodney House Outreach and Inclusion Service for Early Years (RHOSEY) promotes the inclusion of early years children in settings and schools, through workforce capacity and confidence building. The service runs early years SENCO networks and outreach support for settings and schools. Between
September 2019 and February 2020 RHOSEY provided outreach to 135 early years settings and 70 school nurseries. An early years senior quality assurance officer has delivered accredited NASENCO training to 50 SENCOs from early years settings. This training has been very popular and is leading to greater consistency in identification of needs and inclusive practice.

9.6 The IAS team offer a range of training for parents/carers and professionals. Recent courses include IPSEA training for parents and EHCP bite sized workshops.

9.7 Connect has been commissioned to run accredited training in information, advice and guidance and eleven parents/carers from the Working Together for Manchester group are attending this programme. Attendees include Parent Champions who regularly attend Local Offer drop ins.

9.8 Speech, language and communication difficulties is the highest primary need of pupils in Manchester. The Local Authority has commissioned the Speech and Language Therapy service to deliver ELKLAN training to all Manchester schools, to equip at least one member of staff to become a Communication Champion. Over 120 mainstream schools, all special schools and two colleges have already benefited from this training. The Community Safety Partnership has part-funded the programme, allowing the training to extend to 2021. The majority of participants have rated the course as having a high impact on their work. Improvements were seen in: staff pupil interactions; enhanced learning, retention and recall; improved behaviour, participation and emotional well-being; increased independence and resilience; and improvements in spoken and written language. Focus on communication is a key aspect of the Inclusion Strategy.

9.9 Healthy Schools, part of School Health, deliver a programme of training for school staff and any professional working with children with SEND. The training covers a range of different topics; such as Autism, ADHD, and eating disorders. The training sessions are delivered by CAMHS; Community Health and third sector staff. Healthy Schools have recently run a workshop with families and a multi-agency team to plan Autism training sessions to be delivered in schools to all staff, following requests from schools for training on Autism.

9.10 Manchester has eleven Mentally Healthy Schools and MHCC are funding mental health training for all schools in 2020-21.

10. **Financial consequences – Revenue**

10.1 In 2019-20 the Local Authority has a planned £76.9m budget from the High Needs Block of the Dedicated Schools Grant for the educational provision for children and young people with high levels of special educational needs and disabilities. The Department for Education has allocated an additional £0.7bn to the High Needs Block nationally. Manchester’s allocation for 2020-21 is £88.9m a 15.6% increase on 2019-20.
10.2 This block of funding is for pupils and students who require provision that would not normally be available within the delegated resources of a mainstream educational setting. It is also for pupils who require additional resources to have their needs met in a mainstream or specialist setting, such as a resource provision in a mainstream school or a specialist school or college. This funding enables local authorities and providers to meet their statutory duties under the Children and Families Act 2014. High needs funding is also intended to support good quality alternative provision for pre-16 pupils who cannot receive education in schools.

10.3 The £11.994m increase in the high needs block funding will pay off the current deficit and be used to meet the current and future increase in demands from additional special school places, change in special school funding formula, increases in the number of education, health and care plans and change in central services.

10.4 In addition to High Needs funding, there is a budget of £2.387m for Short Breaks and a £6m budget for home to school travel, which is under pressure due to increased demand for this service.

10.5 Financial Consequences – Capital

Manchester has been allocated £4.8m capital funding over two years to improve and increase education provision for children and young people with SEND. The plan for this capital funding is published on the Local Offer website. In addition, in May 2018, Executive Committee approved the use of £20m from the Local Authority’s Basic Needs capital funding allocation to increase special school places through expansions of existing special schools. In future this will enable Manchester to provide special school places more locally and limit the need for out of area places.

11. Conclusions and Next Steps

11.1 The SEND reforms are being embedded in Manchester through multi-agency working and a strong partnership approach from the outset, with Manchester CCG, LCO, parents/carers, young people, schools, colleges and settings. This has included strategic leadership, where there has been strong governance through the SEND Board, chaired by the Director of Education and which has senior representation from a range of partners and services including the Designated Clinical Officer for health; Strategic Lead for Children’s social care; headteacher; parent representative from Manchester Parent Carer Forum; Adult Services manager. This board reports to the Children’s Board; and also through progress reports to the Children and Young People Scrutiny Committee and the Health and Wellbeing Scrutiny Committee. These arrangements have ensured that there is effective strategic leadership of the SEND agenda and robust scrutiny and challenge of multi-agency working and joint commissioning arrangements.

11.2 Manchester continues to make good progress in identifying, assessing and meeting the needs of children and young people with SEND. Parents have
acknowledged the progress made and continue to work in partnership with us to make further improvements.

11.3 Our key priorities in 2020 are to continue to improve:

- the statutory assessment process: including improving the timeliness of statutory assessments; improving the review process and further improving the child/parental experience of EHCPs through the adoption of the new statutory assessment process and the increase in capacity following a restructure.
- The quality of EHCPs, including strengthening the young person’s voice and outcomes by embedding the co-produced Quality Assurance framework for EHCPs.
- Inclusion throughout Manchester’s education system, including the reduction of exclusions through the implementation of the Manchester Inclusion Strategy - Preventing Exclusion and Supporting Children and Young People to Thrive.
- The attendance and educational outcomes of children and young people with SEND at every key stage, with a particular focus on reading at Key Stage 2 through a targeted intervention strategy and with a renewed focus on Key Stage 4 outcomes.
- Transition to adult health and care services through the work of the Transition Board and by improving the clarity of information provided to young people and parents on services and support for 14-25 year olds and beyond.
- Ensuring sufficiency for Manchester’s growing child population, reduce pressure on special school places and reduce waiting times for specialised health services through the implementation of the special school places plan and the further development of the co-designed social communication pathway.
Improving children’s outcomes through collaboration and working in partnership in a locality
Context

Manchester City Council Children Services locality programme update - slides 3 - 6

Locality programme guiding principles - slide 7

Integration vs collaboration and partnerships - slide 8 -9

Organisations vision and priorities - slide 10

Agreeing common purpose and developing a proof of concept for a transferable delivery model - slides 11 - 13

A case for change - tobacco addiction - slide 14

The agreed test pilot - slides 15 - 21

Proposed governance - slide 22

Future partnership pilot opportunity - Foetal Alcohol Spectrum Disorder slide 23

Next steps - slide 24
The Children's Locality Model Programme is reforming Children’s Services to deliver local, place based services on a 1-3-13 footprint; aligned with Bringing Services Together and Manchester’s Multi Agency Safeguarding Arrangements (MMASA).

The aim of the programme is to change the way services are provided to achieve the vision and objectives set out in the Our Manchester, Our Children plan. Changing how services are delivered with partners committing to an integrated, multi agency place based teams centred around locality partnerships and understanding and resolving of the specific complexities of each geographical area.

The vision for the programme is:

“Practitioners working together in a locality, having conversations to agree effective, right and timely interventions resulting in positive change for our children to have safe, happy, healthy and successful lives.“

The “Our Manchester” behaviours underpin integrated working practices with a focus on person (child and family) centred outcomes.
Introduction

Citywide

Permanence Teams

Leaving Care Service

Complex Safeguarding Hub

Single point of contact - public

1

3

North Locality

Central Locality

South Locality

3 x Early Help Hubs

3 x Social Work Locality Teams

Single point of contact - Advice and Guidance Service for professionals N, C, S

Youth Justice Service

13

North 1

Central 1

South 1

North 2

Central 2

South 2

North 3

Central 3

South 3

North 4

Central 4

South 4

Central 5

12 x School Clusters

*No schools in city centre neighbourhood

12 x Early Years Clusters

Item 6
Programme Update - Workstreams

<table>
<thead>
<tr>
<th>Workstream 1 - Complex Safeguarding:</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Complex safeguarding hub has been operational since October 2018 with operational practice overseen by the Manchester Safeguarding Executive</td>
</tr>
<tr>
<td>● ACT model has been implemented with small cohort of young people and evidences good impact</td>
</tr>
<tr>
<td>● LGA Peer Review completed and positive feedback from Ofsted inspection</td>
</tr>
<tr>
<td>● Increased disruption and number of investigations</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Workstream 2 - Front Door Reform</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Advice and Guidance Service with colocated multi agency teams operating in localities since July 2019. Operational practice now overseen by the Manchester Safeguarding Executive.</td>
</tr>
<tr>
<td>● Multi agency audit processes agreed and in place to ensure consistency of practice</td>
</tr>
<tr>
<td>● David Thorpe model evidencing stronger partnership working and approximately 20% reduction in unnecessary referrals to social care.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Workstream 3 - Early Help / Early Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>● Start Well Board established providing the strategic partnership approach to first 1,000 days, with work underway to develop risk stratification model.</td>
</tr>
<tr>
<td>● Early Years refocused to a place based approach, delivering to the 13 neighbourhoods.</td>
</tr>
<tr>
<td>● Development of thrive approach to service delivery</td>
</tr>
<tr>
<td>● LCO, Early Years and Early Help Task and Finish Group has identified potential theme to develop partnership pilot.</td>
</tr>
</tbody>
</table>
### Programme Update - Workstreams

#### Workstream 4 - Social Work Delivery
- Engagement with social workers in review of practice and workflow in to inform resource modelling against outcomes for children.
- Team structures and resource allocation model for localities agreed according to need based on analysis of caseloads and caseload complexity.
- HR succession planning underway to map social workers to roles in Duty and Assessment / Court and Locality and Permanence Teams under new structure.

#### Workstream 5 - School Clusters
- 12 school cluster groups established with the first meetings of 10 clusters having taken place by January 2020.
- Presentation at next special schools heads to discuss membership of city wide school cluster for special schools / PRUs
- Development of Bridging the Gap - effective in south locality, re-established in central and commenced in north in January 2020.

#### Workstream 6 - Youth Justice
- Staff and service user consultation has been completed and will be ongoing including a focus on strengthening and engagement and participation with young people.
- Design of new delivery and practice model
- Vision and communication plan completed.
- Refurbishment of accommodation at Commercial Wharf underway.
Locality Programme: Guiding Principles

Work to date has aligned to the principles of the Children’s Services Locality Programme:

- Our Manchester behaviours underpin integrated working
- Focus on person (child and family) centred outcomes across all sectors
- Improved communication and joint working; removing duplication
- Strengthen relationships to support practitioners to work effectively together
- Develop seamless access to services for children and their families to receive a timely and ‘right’ intervention, reducing unnecessary escalations and long term conditions developing
- Engage our workforce to engender investment/ownership
- Deliver of a safe effective and efficient service

These principles will be tested across the Partnership to develop a shared set of principles around partnership working including defining relationship between commissioning and service providers.
Delivering a targeted Children’s Services ‘together’ in a locality

“Practitioners working together in a locality, having conversations to agree effective, right and timely interventions resulting in positive change for our children to have safe, happy, healthy and successful lives.”

Improving resilience with families and Outcomes

Reduces Unnecessary Demand
An enhanced partnership that collaborates to improve children’s outcomes

‘Integration must be about much more than the structures that support it. The behaviours of [...] members and officers of the parties must reflect these values. It is only by improving the way we work together that we can in turn improve our services and the outcomes for individuals who use them.’

Integration between Glasgow City Council and NHS Greater Glasgow and Clyde, Feb 2018

Date: 12/02/20
Organisational Vision and Priorities

“Our Manchester – building a safe, happy, healthy and successful future for children and young people. ...that partners across the city work together with children and young people to improve people’s lives. ...developing and embedding new ways of working... along with genuine co-production.”

Our Manchester, Our Children: Manchester’s Children and Young People’s Plan 2016-2020

“Working together to enable every child to have the best health possible. Community Health Services, together we make a difference.”

Children’s Community Health Services Directorate Strategy 2015 – 2020

“...every woman has access to information to enable her to make decisions about her care... she and her baby can access support that is centred around their individual needs and circumstances.

...staff to be supported... in organisations which are well led and in cultures which promote innovation, continuous learning, and break down organisational and professional boundaries.”

Better Births: Improving Outcomes for Maternity Services in England
A common purpose and aim to test proof of concept

Following the session on the 19th November 2019 a task and finish group was established to develop an approach to test strengthened partnership working across Maternity services, Children’s Community Health, Early Help and Early Years services to inform future relationships, by:

- Identifying a **thematic** approach using **one issue** where partners can work together differently
- Enabling and empowering the **workforce** to make changes
- Improving **outcomes** for children across the system

The group has met three times to date and has taken an Our Manchester approach, putting service boundaries aside and focussing on the needs of residents and families to identify opportunities to improve outcomes, rather than service structures and governance.
Timeline: Senior leadership & Task & Finish Group sessions

(19th)
Collaborating for Outcomes for Children Workshop

(3rd)
Integrating Health and Social Care session with David Williams

(13th)
1st Task & Finish Group Meeting

(24th)
2nd Task & Finish Group Meeting

(3rd)
3rd Task & Finish Group Meeting

Overview of current partnership working & future ideas: Start Well Board, Thrive, Hertfordshire Model

Jointly agreed
✔ Co-design shared vision
✔ Adopt thematic approach to a shared Health and Social Care objective (ie. obesity) and shape services around this
✔ Develop by working group

Jointly agreed
✔ Identify shared strategic priorities and common purpose
✔ Identified potential thematic area
✔ Strengthened partnership working
✔ Explored wider service determinants that required joint consideration

Learning from David Williams, Director Health & Social Care Integration, Glasgow

Jointly achieved
✔ Extended membership
✔ Mapped pathway and support services
✔ Identified potential windows of opportunity to develop pilot on smoke free family / homes
✔ Explored feasibility for linking key messages from pilot into professional record: Maternal Health Record
✔ Identified new Ways of Working in partnership and enablers

Jointly achieved
✔ Explored learning from GM Smoking in Pregnancy Programme
✔ Agreed training and cross service workforce development incl. Very Basic Advice (VBA)
✔ Explored options for place based or cohort pilot
✔ Explored feasibility for linking to PHE: Maternal Health Record pilot
✔ Developed logic model
An agreed set of priorities

Agreed shared areas of focus/priorities

Agreed initial priority was to focus on smoking addiction

Wider considerations

Whole-family approach: parental engagement (e.g. aspirations, pathways to employment and training) and capturing family feedback

Collaboration with wider partners (e.g. housing), communities and enhancing social prescribing (Bringing Services Together)

Strengths-based

Lead practitioner approach

Locality Programme

Maternity

Children’s Community Health

Early Years & Early Help

Start Well Strategy

Support Inclusion Strategy

Substance misuse

Governance

Signs of Safety

Immunisation

Infant mortality

Smoking addiction and smoke free homes

Perinatal Mental Health
Link: ACEs

Breastfeeding
Links: Bonding, attachment, obesity)

Early Identification and Prevention
Links: 1,000 days, Start Well Strategy

Improve antenatal contacts
Links: Health visiting, seamless postnatal transition

Effective and wider response areas: adolescent mental health, criminality and ASB, criminal exploitation, child exploitation, neglect, Domestic Violence and Abuse, Obesity, Mental Health, Substance misuse
Improving outcomes and long-term health conditions: Tobacco Addiction

Case for Change: Impact on Manchester residents

- Reducing smoking in pregnancy is the single most important factor in reducing infant mortality, with most infant deaths occurring in the first 28 days in Manchester.
- Smoking is the single largest cause of health inequalities in Manchester. Manchester has above-average rates of smoking in all age groups and the highest premature mortality rate in the country for the three major smoking-related conditions: lung cancer, heart disease and stroke.
- Alongside health effects of smoking, a small scale report undertaken by Early Help in 2013 showed the impact of smoking on budgeting and finances. Since 2013, price of cigarettes have increased significantly which has led to an increase in the illegal tobacco market.
- Reducing smoking and creating smoke free homes is a significant strategic priority for the health and social care system in Manchester. Featuring within the Manchester Population Health Plan, Reducing Infant Mortality Strategy, Saving Babies Lives and Manchester’s Tobacco Plan.

Current provision:

- There is current a GM Smokefree Pregnancy Programme operating across Manchester which is a gold standard programme that has had a positive impact on Smoking at the Time of Delivery statistics, which have decreased to below the national average. In addition a new smoking addiction service is due to start in April 2020 this provides support for residents in the community.
- Although smoking rates in Manchester have decreased, every neighbourhood is above the national average.
- Although smoking at the time of delivery has reduced there are a high number of women who will restart after finishing the programme.
- Messages about Smoke Free Homes are not consistently understood across professionals.

Raising awareness of smoke free homes across professionals and increasing uptake and engagement with the commissioned support services presents potential opportunities to take a whole system partnership approach through a thematic area.
Proof of concept
Proof of concept: Smoke Free Family

**Aim:** to test an improved, partnership approach that builds on and strengthens work already taking place across maternity, health visiting, early years and early help services. Developing a pilot that touches on each service, targeting a point where working together will improve the offer for families and improve outcomes.

Thematic area identified so far as a potential cross cutting priority area; tackling smoking to create smoke free homes.

As part of the partnership approach, the pilot will link and signpost to the new **Manchester Tobacco Addiction Treatment Service** once this service ‘goes live’ April 2020. Complementing the current gold standard, GM Smoking in Pregnancy programme.

The future pilot will involve **joint workforce development and training**. Including a **trauma informed** approach via (Adverse Childhood Experiences), for more targeted cohort alongside, **Very Basic Advice** module to support effective behaviour change techniques around reducing smoking. Alongside this the GM Smoking in Pregnancy Programme lead has offered to provide all professionals on Baby Clear key messages.

‘**Smoke free home / Smoke free family:** Will involve a **whole family approach** to ensure a smoke free home environment for babies and young children.

This will include an **Our Manchester approach** including working with dads-to-be, significant others and family friends. Buzz Service has offered to undertake engagement specifically with dads. This will inform the approach to identify the ways of working or approach that might best engage dads in the pregnancy and stopping smoking. This could also be expanded to other members of the extended family e.g. grandparents.

**Cohort:** The pilot will have a narrow focus to begin with, starting small to test and learn, potentially:

**To target specific neighbourhood** where there is higher than average smoking rates, where pregnant women have been referred to the Smoking in Pregnancy Programme and identify Sure Start Centres within that Neighbourhood.
The group shared the current ‘touchpoints’ where services will interact with families, the pathway below demonstrates some of the many interactions between services and families during this time. This also highlighted some of the key transition points between services and the potential opportunities to take a more joined up approach across services.

**Current pathway**

This pathway illustrates the various stages and services involved in family support during the first 1,000 days. It includes preconception, conception, birth, infancy (12 mths), and early years (24 mths). The diagram highlights key touchpoints such as antenatal care, birth registration, and Sure Start Centre services. Early Help is also emphasized, offering targeted support for families with greater need beyond universal support.
Approach to test and develop and embed a more collaborative and partnership approach to improving children’s outcomes.

Three potential points, along the first 1,000 days current pathway, have been identified to test a strengthened partnership approach:

1. Following 1st booking with women testing positive on CO test
2. Targeting 25% who do not engage with course
3. Engagement post-delivery around sustaining non-smoking as the norm in the home
Potential benefits

**First Booking**
- Partnership workforce development
- Broader and better informed evidence base
- Whole system approach to thematic area

**Midwifery**
- Our Manchester approach collectively adopted
- Joint messaging and communications across services
- Improved reach of service and engagement with families
- Engagement with dads, wider family and friends
- Increased connectivity into Targeted interventions
- Increased access to community offer

**Health Visiting**
- Our Manchester approach Trauma informed ACE’s workforce
- Whole system approach to thematic area
- Joint messaging and communications across services

**Early Help**
- Our Manchester approach Trauma informed ACE’s workforce
- Whole system approach to thematic area
- Improved reach of service and engagement with families
- Engagement with dads, wider family and friends
- Increased connectivity into Targeted interventions
- Increased access to community offer

**Sustainability post-delivery**
- Strengthened trusted relationships through Partnership working
- Engagement with dads, wider family and friends
- Increased connectivity into Targeted interventions
- Increased access to community offer

25% non-engagement with Smoking in Pregnancy Programme
Partnership pilot: Smoke Free Family Logic model (examples used are illustrative)

**Opportunities / aims:**
- Test an improved partnership approach that builds on and strengthens work already taking place across maternity, health visiting, early years and early help services in a neighbourhood.
- Add value to the work of the current Smoking in Pregnancy offer alongside the introduction of the newly introduced Tobacco Addiction Service (April 2020) with support and interventions aimed at whole-family approach to develop smoke free families.
- Develop universal and targeted offer from point of First Booking / first scan where working together will improve the offer for families and improve outcomes.

**INPUTS**
- Multi agency Task and Finish Group
- Senior Multi agency strategic Support and Challenge group providing feedback
- Critical friends, Public Health commissioning providing feedback

Once Neighbourhood identified:
- Surestart Centre
- Maternity service
- Children’s Community Health Service (Health Visiting, School Nurse)
- Buzz
- Integrated Neighbourhood Team Lead
- School
- GP

**ACTIVITIES**
- Delivery of training and workforce development to all relevant staff identified within this Neighbourhood. To include, Baby Clear / Very Basic Advice.
- Development of short course to be provided in Children’s Centres to engage families that includes smoke free homes messaging alongside other key developmental messages to encourage behaviour change.
- Engagement activity with dad’s to be and wider family members to inform approach
- Develop methodology to capture impact

**OUTPUTS**
- Joint workforce development and training plan for services in a neighbourhood
- Engagement approach with Dads / significant others
- Short course for families involving multi agency input into key messages that includes smoke free homes to encourage behaviour change.
- Key learning about a partnership approach that adds value to maternity, health visiting, early years and early help, to inform future models of working.
- Draft - Further detail TBA, dependant on preferred option.

**OUTCOMES – what we measure**
- Workforce in neighbourhood trained in key messages, including smoke free homes and Very Basic Advice
- Workforce understand offer & confident in key messages
- Families engaged with short course that includes smoke free homes messages.
- Increased uptake in the Smoking in Pregnancy Programme
- Increase in numbers of smoke free homes
- Increase in Tobacco Addiction Service referrals for wider family members [TBC]
- Draft - Further detail TBA, dependant on preferred option.

**IMPACTS - potential wider impact**
- Improved partnership working in a neighbourhood
- Earlier identification of families who might need support
- Workforce across partners trained consistently
- Business processes across partners are strengthened to supplement the Smoking in Pregnancy Programme and facilitate wider support offer
- Trend developing in smoke free families and communities
- Preventing avoidable hospital admissions
Proposed Governance Arrangements

Learning from the future pilot will help to inform future governance and accountability. This learning will be reported into the strategic partnership forum of the Start Well Board. This Board can respond to key learning and system challenges highlighted from the pilots with a collaborative citywide approach.

In addition to this, learning from the pilots can be communicated to each organisation’s relevant internal service governance.
Key learning: Partnership co-production

Achievements through partnership co-production

- Multi agency Task and Finish Group includes representation from Maternity, Children’s Community Health, Early Years and Early Help. New relationships have been built and strengthened from the Task and Finish Group.
- Developed a shared agreement of advantages of working in partnership and identified potential areas to test this.
- Gained insight into how service delivery can be more effective through system-wide collaboration. More opportunities for co-production will be developed by partners.

Lessons learned

- Timescales have been extremely tight. This has placed restrictions in terms of involvement of clinicians whose contribution and knowledge would be invaluable to developing an approach.
- Further time could be spent understanding and developing a shared purpose and priorities with all relevant stakeholders. This would also support building stronger relationships and trust.
- Work has not yet involved any front line or residents engagement on approach, this is partially due to timescales but also approach. This could be something to explore for future pilots.
- Clarity around roles and interface between providers and commissioners and where collaboration sits.
Future partnership pilot opportunity - Foetal Alcohol Spectrum Disorder

It is estimated that 1,195 children a year are born with Foetal Alcohol Spectrum Disorder (FASD) in Greater Manchester.

£1.6m GM transformation funding is being used to develop a 2 year ‘proof of concept’ programme to reduce alcohol exposed pregnancies and aim to end FASD.

Phase 1 started in April 2019 across 2 GM Foundation Trust footprints, covering 4 of the 10 GM localities - Bury, Oldham, Rochdale and Tameside.

Work includes:

● Raising public awareness of the harm associated with alcohol consumption during pregnancy and FASD through public awareness campaign
● Raising awareness amongst workforce through training
● Preventing alcohol exposed pregnancies through interventions prior to pregnancy,
● Providing specialist support during pregnancy for vulnerable women at increased risk

Future opportunity for Manchester to learn from phase 1 and use our partnership model to reduce alcohol-exposed pregnancies. Start Well Board will explore further in April 2020.
Next Steps:

March - April 2020:

- Identify place focus and cohort: 6th March 2020
- Agree measures of success and key milestones - 6th March 2020
- Engagement with parents, residents in March/April via focused collaboration
- Develop an agreed Leadership and Accountability framework
- Partnership planning session - mid March 2020

Following April: Indicative timescales included below, will be informed by input from the partnership

- Undertake pilot (potentially 6 month period)
- Identify key learning to inform future approaches and outcomes
- Develop integrated programme of activity based on learning from pilot, data and evaluation
Discussion

● How can Children and Young People’s Scrutiny Committee continue to support and challenge to ensure the successful delivery of the programme of work?

● What do you consider to be the opportunities and risks around working together across Manchester Local Care Organisation and Manchester City Council on outcomes for children?
Summary

Further to the report submitted on the 4th September 2019 to the Children and Young People Scrutiny Committee, this report provides a further update on the strategic and operational priorities in relation to Early Years.

It can be seen that through the Early Years Quality Assurance arrangements in place we have continued to improve the quality of provision across the City ensuring that there is a strong early years sector supporting children to achieve the best possible outcomes.

In addition as outlined throughout the report a focus on the performance and outcomes in relation to the Early Years Delivery Model (EYDM) and the Healthy Child Programme has contributed to an increase in the uptake of developmental reviews at 9 months and 2 years and highlights good impact on child and family outcomes through our parenting and communication and language pathways.

Finally, whilst there remain challenges and areas for further development, an external peer review undertaken by the Local Government Association (LGA) validated the positive impact of Manchester’s Early Years services and interventions. These subsequent findings and that of our self assessment will be used to contribute to our strategic ambition to collaborate and develop an even greater partnership between early years, help and health service so that together Manchester’s children have the best start in life.

Recommendations

Scrutiny Committee members are invited to:

1) Consider the findings from the LGA Early Years Peer Review in October 2019

2) Consider the Early Years quality assurance arrangements and identified actions to improve Good Level of Development.(GLD)

3) Consider the progress and impact being achieved by the early years offer and delivery arrangements.
**Wards Affected:** All

<table>
<thead>
<tr>
<th>Manchester Strategy outcomes</th>
<th>Summary of the contribution to the strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities</td>
<td>A strong Early Years sector will allow parents to continue in further education or employment opportunities. A good start in life is essential to enable our children and young people to achieve their full potential and contribute to the city.</td>
</tr>
<tr>
<td>A highly skilled city: world class and home grown talent sustaining the city’s economic success</td>
<td>Improving educational outcomes is essential for young people to gain qualifications and contribute to Manchester’s economic success.</td>
</tr>
<tr>
<td>A liveable and low carbon city: a destination of choice to live, visit, work</td>
<td>An outstanding Early Years system will be attractive for parents to choose to live and work in Manchester and will contribute to the city’s success.</td>
</tr>
<tr>
<td>A connected city: world class infrastructure and connectivity to drive growth</td>
<td>Early Years services support families to be successful who are then able to deliver continuing growth in the City</td>
</tr>
</tbody>
</table>

Full details are in the body of the report, along with any implications for –

- Equal Opportunities Policy
- Risk Management
- Legal Considerations

**Financial Consequences – Revenue**

The Early Years Core offer is made up of £14.7m Council budget (this includes the Health Visitor contract of £10.3m) and a £1.8m contribution from the Dedicated School Grant.

Early Years resourcing requirement is contained within the budgets outlined above and there are no financial changes arising from this report.

**Contact Officers:**

- **Name:** Paul Marshall  
  **Position:** Strategic Director of Children and Education Services  
  **Telephone:** 0161 234 3804  
  **E-mail:** p.marshall1@manchester.gov.uk

- **Name:** Sean McKendrick  
  **Position:** Deputy Director Children’s Services
Name: Julie Heslop  
Position: Strategic Head of Early Help  
Telephone: 0161 234 3942  
E-mail: Julie.heslop@manchester.gov.uk

Name: Nasreen King  
Position: Early Years Strategic Lead  
Telephone: 0161 234 1864  
E-mail: n.king1@manchester.gov.uk

Name: Tracey Forster  
Position: Lead Manager (Health Visiting, Vulnerable Baby & Child Health Services)  
Telephone: 0161 946 9404  
E-mail: Tracey.Forster@mft.nhs.uk
1.0 Introduction

1.1 Further to the report presented to the Children and Young People Scrutiny Committee in September 2019, this report will provide an update on the strategic priorities for Early Years, and will summarise the performance and outcomes in relation to the Early Years Delivery Model, the Healthy Child Programme and our quality assurance arrangements. The report also includes an overview of the recent LGA Peer Review of Early Years and identifies how we are utilising the Greater Manchester Early Outcomes Fund (GAME OF) to further develop and progress the early years communication and language pathway.

2.0 Background and Context

2.1 In September 2019, we reported to Children and Young People’s Scrutiny Committee on the strategic priorities for Early Years with a focus on the first 1,000 days, the development of the Start Well Strategy and the developing work on locality working and our collaboration with the Local Care Organisation. Since September, progression of these priorities has continued at pace with the Start Well Partnership leading the work in relation to 1,000 days and there is now a clear articulation of the contribution of the early years offer linked to place and neighbourhoods.

2.2 Our strategic priorities for early years continue to be driven via the Start Well Partnership. It was agreed at a board meeting in November 2019 that the City would benefit from a clear articulation of our Start Well priorities with the aim of developing a strategy that outlines the priorities for the City’s approach towards Start Well and 1001 days. A task and finish group is in place and will develop a Start Well Strategy by June 2020. Parental and community participation are being planned in April and May to inform the priorities and focused campaigns.

2.3 To strengthen our response in the first 1,000 days we are developing a risk stratification approach to ensure that not only we have broader reach, but that we also target, from the initial analysis, children who are highlighted as being at risk of not achieving a lower good level of development (GLD). Greater Manchester Combined Authorities (GMCA) have acquired funding to secure time from a co-production expert who will work with Manchester to ensure our risk stratification approach is effective for both residents and practitioners.

2.4 A redesign of the Early Years Services is underway and will involve moving to a neighbourhood and community based offer of Early Years by October 2020. This is being achieved through a more integrated, place based delivery with clear links and pathways to Early Help, Health Visiting and Social Work services. This approach supports the aligned work being undertaken in partnership with Manchester’s Local Care Organisation (MLCO) to develop the ‘integration’ of services to ensure there is multi-agency ‘think family’ approach and a strong focus on effective delivery. Our collective focus and objective is to deliver improved outcomes and to close the gap in relation to a good level of development.
2.5 To support this work a specific task and finish group has been established to develop further the collaboration and partnership working between MCC and MLCO Services. This group will report at the end of February on the progress and new ways of working being tested to improve outcomes for children and families. Further details are included in the ‘Improving Children’s Outcomes through collaboration and working in partnership in a locality’ presentation to the Children and Young People Scrutiny Committee.

2.6 Our aspiration is for the Early Years service to work across neighbourhoods to deliver a collaborative offer alongside Early Help Services. As part of this work a conceptual model has been developed taking a “Thrive like approach” so that families experience smooth transition through the types and levels of support they require throughout their family journey i.e. a moving away from having thresholds, and thinking whole family. As part of this work we have revisited the locality and neighbourhood governance arrangements and the current Sure Start Advisory Boards are reforming into Start Well partnership groups to ensure connectivity with the locality and to drive the four sub groups of the partnership board.

2.7 The diagram below illustrates the proposed governance arrangements across the neighbourhoods and how these link to our priorities.
2.8 There is a strong focus via the Start Well Partnership Board on fully understanding school readiness and outcomes being achieved in relation to ‘a good level of development’ (GLD) which currently remains at 66%; adrift of the national average at 71.8%. The Start Well Board has agreed a risk stratification approach to target GLD specifically in relation to key areas of literacy and numeracy. Writing is a key area as in some settings there is insufficient focus on writing with a consequent 8% gap between communication and literacy. The board will oversee specific targets and actions to improve GLD that will link into the school cluster arrangements.

2.9 The early years strategy recognises the importance of school readiness and as such there are robust quality assurance arrangements in place that have improved the quality of provision across the City. This is evident in that 96% of settings are judged to be good or better. The 2019 Childcare Sufficiency Assessment reveals that Manchester has sufficient childcare to meet the needs of both working families and vulnerable children entitled to free early learning and childcare. Currently, 79% of 2 year olds and 90% of 3 year olds are taking up their free entitlement offer in a setting or school.

2.10 The Early Years Delivery Model (EYDM) forms part of a wider early years offer delivered through Sure Start Children’s Centres. The model makes use of an 8 stage framework supporting work to increase school readiness by increasing the effectiveness of universal and targeted early years services. The robust use of evidence based assessments and interventions that support speech and language and parenting show evidence of improved outcomes for families and children. This is reported in more detail in section 6 and 7 of this report and demonstrates the impact being achieved from the Healthy Child Programme and pathways.

2.11 The first 5 stages of the model are predicated on the Healthy Child Programme delivered by the Health Visiting Service and have been rolled out across the City. The model takes a system wide approach and involves partnership working between midwives, health visitors, nursery nurses, early years practitioners and other services such as speech and language therapists and the Child and Parents Service (CAPS). The planned work through the Early Outcomes Fund (EOF) outlined later in this report will focus on closer collaboration with schools and settings which will help to inform the development of stages 6-8 of the model.

2.12 This work will involve building on the current communication and language pathway to introduce an approach that will focus on literacy outcomes. The early years workforce will be trained to deliver a programme called Raising Early Achievement in Literacy (REAL) which will involve working closely with parents and will impact positively on the home learning environment. Stages 5 and 6 of the current delivery model are being targeted to strengthen joint working across this key transition and to inform learning to embed stages 7 and 8.
3.0 LGA Early Years Peer Review

3.1 A Local Government Association (LGA) peer review of Early Years Services was completed between the 8th October and the 11th October 2019. The overall outcome was very positive with partnership working, our approach, and the strength and diversity of the early years offered highly commended by the review team. Areas for further consideration were highlighted including our joint commissioning arrangements and ensuring consistency in relation to parental and community engagement and the sharing of learning from pilots.

3.2 Scope and Focus of the Peer Review

3.3 Manchester identified three primary areas of focus for the peer review that were agreed at the beginning of the scoping process; this was via a partnership workshop and self-assessment completed using the Early Years, Speech, Language and Communication Maturity Matrix. Our key areas of focus were:

- Have we got the right integration and partnership arrangements to improve early years outcomes and school readiness?
- How well embedded and effective is the speech, language and communication pathway?
- How effective is our current approach to parental and community engagement?

3.4 These areas of focus align to the LGA challenge themes: Partnership and Strategy; Services and Interventions and Community Ownership, as well as incorporating aspects of commissioning, partnership, leadership and information and data.

3.5 Main Findings

3.6 Partnership and Strategy

3.7 Early Years services in Manchester were confirmed as being good and provide a sound basis to achieve improved outcomes for children and families.

3.8 The peer support team recognised that there was senior level commitment from the Politicians, Officers and Partners, to deliver high quality early years services. This was evident through the commitment to invest in and maintain our early years provision across the city. It was noted that our delivery has a strong alignment to Greater Manchester priorities, plans and innovation whilst focusing on the needs and diversity of children and families living in Manchester.

3.9 The team was impressed by the passion and commitment displayed by the wide range of early years practitioners seen during the peer challenge. There were many pockets of good practice, but practitioners commented that there was insufficient sharing of practice across the different localities.
3.10 The team observed different commissioning approaches and intentions across the Council, Health and Education and felt it was difficult to understand how these aligned. The Early Years service commissions early intervention services, including WellComm which has led to improved outcomes for many children. However, data shows an increase in children referred for specialist speech and language services and it was felt that the commissioning process should be strengthened system wide to ensure better alignment and to reflect commissioning needs across the partnership.

3.11 Services and Interventions

3.12 The strong priority and commitment to speech, language and communication across the partnership at all levels was recognised along with the clear investment in early intervention. This is evidenced by the retention of 30 Sure Start centres which were recognised as strength in the City. The Peer team felt the focus on early intervention and universal service provision had enabled services to be targeted to children who require additional support.

3.13 There is more to do and and the analysis of data is beginning to highlight where resources should be focused. Accordingly the review team suggested that there are opportunities to strengthen the analysis of data and intelligence to further improve the outcomes for children. This would enable achievements to be more fully recognised within the early years community at locality level.

3.14 Community Ownership

3.15 There was strong and creative evidence of engagement with parents at a local level with active parent forums; parents as volunteers; groups that involve extended families and engagement with fathers.

3.16 Good engagement of parents has resulted in parents being involved in volunteering and eventually into employment and supporting other parents. The review team highlighted that the challenge is to ensure there is an overview across communities to ensure there are equitable and consistent opportunities for engagement.

3.17 There was recognition of diversity but there is a lack of a consistent strategy for engaging black and minority ethnic organisations and local community groups including those who may present as newly arriving in Manchester.

3.18 The findings from the review have been shared widely with all stakeholders and are informing future service priorities and planning. An action plan has been developed incorporating the areas outlined by the peer review team. This plan has been shared with partners ensuring a joined up approach and progress and impact will be monitored by the Start Well Partnership Board.
4.0 Overview of Early Years Quality Assurance Arrangements

4.1 Early Years OFSTED outcomes

4.2 Good progress has been maintained in relation to settings; in January 2020 96% of early years settings are good or better and 88% of childminders are good or better. Published inspections of settings and childminders that have taken place under the new Education inspection framework show that settings previously rated as “outstanding” now have a reduced grade of “good”. Settings with a previous grade of “requires improvement” or lower show improving grades with most achieving a “good” outcome. To support settings in preparation for OFSTED inspections the Early Years Quality Assurance team have re-drafted Quality Assessment Framework documentation, taking into account key changes in the OFSTED handbook. The Quality Assurance team has also offered additional readiness for inspection training events and bespoke support if needed.

4.3 Another change under the new framework is the Ofsted judgement of out of school provision which is rated as having ‘met or not met’. However, the inspection report produced is still detailed and gives recommendations on how the establishment can improve further. Out of school provision performs strongly across the city with 100% good or above, of which 37% were outstanding.

4.4 Currently, nurseries who are located in MCC tendered sites are facing significant cost pressures. Increased budget pressure linked to business rates, living wage changes and building maintenance costs have all reduced the amount of money available to invest in learning environments. This is coupled with a reduction in 2, 4 and 4 years old in a number of localities has made some sites unsustainable.

4.5 This is an area of concern and resolving this has political support of the executive member and a resource has been identified in the budget to assist with this issue. Furthermore a review is underway to look at the lease arrangements, building site surveys and reviewing the procurement arrangements for all tendered day care sites across the city. A report on all arrangements will be produced by the end of April 2020.

4.6 Good Level of Development (GLD) Outcomes

4.7 In 2019 ‘good level of development’ outcomes decreased by one percentage point; this is the number of children achieving a good level of development. This means that Manchester’s gap in comparison to national performance has widened to six percentage points.

4.8 There are 12 areas that make up GLD and writing is the element which, for at least the past two years, has the fewest pupils achieving the expected standard. All of these measures saw a decrease in the percentage of pupils achieving the expected standard. The greatest decrease being in Numbers
(1.3 percentage points) and Listening & Attention and Writing (1.2 percentage points).

4.9 There are several pilot projects underway to develop practical ways to close the GLD gap. The work with schools in relation to Early Outcomes Fund (EOF) has targeted 9 schools with low literacy outcomes at the end of reception. Martencroft Maintained Nursery, is leading a pilot project ‘moving forward with literacy’ with the aim of generating closer working between schools, looking at literacy rich environments and the development of early reading strategies including the development motor skills for writing.

4.10 Finally we are trying to support Early Years settings with the identification of special educational Needs and disability (SEND) and how children can be supported more effectively when a need is identified. Working with the National Association of Special Education Needs, we have trained 42 nursery practitioners in SEND to Level 3. This will enable practitioners to identify children with communication and language difficulties and other SEND traits for earlier intervention. Funding has been provided by the local authority and feedback has been very positive. The intention is to continue this offer for 40 Manchester nursery practitioners every year.

5.0 Early Outcomes Fund

5.1 In 2019, the Greater Manchester Combined Authority (GMCA) was successful in an application to the Department of Education (DfE) for funding to support the scale up and implementation of the Speech, Language and Communication Pathway of their Early Years Delivery Model over 12 months (2019/2020).

5.2 The priorities for Manchester were identified following the completion of a locality baseline evaluation which highlighted the need to improve children’s literacy outcomes. The raising early achievement in literacy (REAL) intervention will be introduced as part of our communication and language pathway and will involve:

- Increasing the engagement of schools offering sequenced interventions delivered through the communication, language and literacy pathway.

- Make better use of intelligence to target support to schools with the greatest numbers of children not achieving a GLD.

- Support schools with improving the quality of the home learning environment and parental engagement.

- Target 2 year olds who are not accessing provision to receive an intervention.

5.3 This approach promotes closer collaborative working with schools and settings. The pathway will increase its reach and will target those children who are not accessing services and are at risk of not achieving a GLD. The funding will
also support a workforce development programme that builds on the
communication and language pathway but also incorporates the REAL
approach which supports practitioners to develop skills that support children to
achieve positive outcomes in literacy and improves the home learning
environment.

## 6.0 Performance and outcomes for the Healthy Child Programme and the
Early Years Delivery Model (EYDM)

### 6.1 The Healthy Child Programme

### 6.2 The offer of a New Birth Visit, Maternal Mental Health Assessment and
Developmental Assessments which include the completion of the Ages and
Stages Questionnaire (ASQ3) at 6-8 weeks, 9 months and 2 years is made to
100% of eligible children resident in Manchester and is delivered via a home
visit or clinic appointment by the Manchester Health Visiting (HV) Service.

### 6.3 The table below details the uptake of the Developmental Assessments up to
2019-20 Q2

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6-8wk (GM only) Health Developmental Assessment (HDA)</td>
<td>Contact with every baby between 6-8wk to assess development and identify needs including an ASQ,</td>
<td>89%</td>
<td>90%</td>
<td>91%</td>
<td>89%</td>
<td>90%</td>
<td>92%</td>
<td>N/A</td>
</tr>
<tr>
<td>9 month Health Development Assessment (HDA) received by 12 months of age</td>
<td>Appointment for every child at 9m old to assess development and identify needs including ASQ. Reported as uptake achieved by 12m old</td>
<td>59%</td>
<td>69%</td>
<td>67%</td>
<td>68%</td>
<td>69%</td>
<td>76%</td>
<td>76.7%</td>
</tr>
<tr>
<td>9 month Health Development Assessment (HDA) received by 15 months of age</td>
<td>Appointment for every child at 9m old to assess development and identify needs including ASQ. Reported as uptake achieved by 15m old</td>
<td>60%</td>
<td>63%</td>
<td>71%</td>
<td>69%</td>
<td>71%</td>
<td>76%</td>
<td>82.3%</td>
</tr>
<tr>
<td>2 year Health Developmental Assessment (HDA)</td>
<td>Appointment for every child at 2yrs old, to assess development and identify needs including an ASQ. Reported as uptake by 2.5yrs.</td>
<td>56%</td>
<td>62%</td>
<td>68%</td>
<td>66%</td>
<td>67%</td>
<td>72%</td>
<td>77.6%</td>
</tr>
</tbody>
</table>
6.4 The following points to note:

- The take up of the 9 month reviews, offered by Health Visitor teams completed by the time children reach 12 months was 76% in Quarter 2. This shows an increase of 7% from Quarter 1 2019/20 and a 17% increase respectively from Quarter 1 2018/19.

- The take up of reviews for 2 year olds, offered by Health Visitor teams, measured when they reach 30 months, was 72% in Quarter 2; a 16% increase since Quarter 1 2018/19.

- The take up of the 9 month review is now 0.7% below the England average whilst for the 2 Year review there is a 5.6% gap.

- The Health Visiting service will offer a flexible approach for Health Developmental Assessments which will include home visits or clinic appointments. All Health Visitor Teams follow a ‘missed appointment algorithm’ when children are not brought for a clinic appointment which includes ringing the parent, checking addresses and offering a new appointment / home visit. This ensures there are multiple approaches in place to ensure children are reviewed.

- The Health Visiting Service continues to ensure publicity posters are displayed in Children’s Centres, GP Practices and Community Clinics etc, with contact details for local Health Visitor Teams, to support awareness raising. Collaboration with GP’s is being strengthened to ensure that professionals are promoting the uptake of the developmental review at key points of contact.

- Use of social media e.g. Health Visitor Facebook page and directorate Twitter is now being used to champion / promote attendance of development checks. The Directorate has posted over 100 Tweets and there are now close to 200 followers. The Health Visitor Facebook page is now up and running and the 9 month and 2 year posters have been posted on their facebook page.

- Health Visitor recruitment continues to be difficult due to a national shortage of trained Health Visitors to fill vacant posts. The service has been working closely with commissioners and Manchester Metropolitan University / Health Education England with a full cohort of experienced nurses entering Health Visitor training in October 2019.

6.5 Health Visitor (HV) Service

6.6 The HV service continue to experience staffing pressures that impact on performance. Caseloads across teams are weighted according to ward deprivation data between 1:250 in the most deprived areas and 1:350 in the least deprived areas. Other areas in Greater Manchester, operate at 1:150 to 1:400 Health Visitor caseload ratio.
6.7 A review of provision has been undertaken by Population, Health and Well-Being and options to address capacity issues have been identified. In response, £100,000 funding has been secured in 2019/20 from Manchester Health and Care Commissioning to provide seven additional Health Visitor training places but further investment is needed, to fill existing vacancies and begin to increase the current establishment of posts. Training, recruitment and retention of health visitors in Manchester remains a priority.

7.0 Ages and Stages (ASQ3) Results

7.1 Data from 1st April 2019 – 30th Sept 2019 has highlighted the following outcomes based on the ASQ assessments:

- At 6-8 weeks 77% of children show typical development in all areas of learning; 14% require targeted support and 9% specialist attention.
- At 9 months 62% of children are developing typically in all areas of learning whilst 25.5% require targeted attention and 12.5% specialist attention.
- At 2 years 70.5% of children show typical development in all areas of learning; 14% require targeted support and 15.5% specialist attention.

7.2 Please see table below demonstrating the above results:

7.3 In summary ASQ data collated shows that the greatest area of need for children across the various stages are:

- 6-8 weeks communication skills
- 9 months gross motor skills
- 2 Years communication skills and personal / social development
8.0 Communication and Language Pathway

8.1 WellComm Screen Activity

8.2 The Early Years Communication and Language pathway supports language development for young children at risk of language delay and includes delivery of a standardised language screening tool known as WellComm. Where there is a suspected language delay a Wellcomm screen is completed.

8.3 During the 12 month period (1/10/18 – 30/9/19)
- 2,301 children in total received a WellComm screen, of the children screened
- 892 children scored amber and
- 496 children scored red.
- 913 children scored green

8.4 This indicates that 60% of all children screened showed a delay in their language skills; those children scoring amber are offered group therapy sessions and those scoring red are referred to the NHS specialist service. Children who scored green are signposted to universal provision.

8.5 The table below demonstrates the above results:

<table>
<thead>
<tr>
<th>WellComm Screening Results - 1st October 2018 - 30th September 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of screens</td>
</tr>
<tr>
<td>Red</td>
</tr>
<tr>
<td>Amber</td>
</tr>
<tr>
<td>Green</td>
</tr>
</tbody>
</table>

8.6 WellComm Reviews

8.7 The WellComm review takes place 3 months post intervention and assesses whether children who score as red (requiring specialist support), amber (requiring targeted intervention from the EYDM) or green (universal support) post intervention. All children have previously been assessed as amber or red at the point of referral. Review information demonstrated at 3 months post intervention:

- 37% of Children were sign posted to universal services.
- 22% of Children continued in the intervention.
- 41 % of Children were referred to specialist services.
8.8 Following the review, children who continued to be assessed as having amber needs were offered further support from the Communication and Language Pathway.

8.9 In addition to WellComm activities, parents are given the opportunity to attend Parent Child Interaction (PCI) groups to increase their understanding of language development and communication strategies which support their child’s communication development. Pre and post questionnaires show a 92% increase in positive language strategies used by parents to encourage speech and language development during interactions with their children.

8.10 The early identification of children has led to a rise in the number of referrals to specialist services. The current pathway has been amended so that all children that score red up to the age of 18 months are now offered interventions through the pathway. These children are reviewed in line with the intervention and will only be referred to specialist services if their score remains red. A review is being undertaken with partners of the current commissioning arrangements, this is taking a system wide approach and will inform future delivery arrangements.

9.0 Parenting Pathway

9.1 The Children and Parenting Service (CAPS) is a multi-agency, early intervention service delivering high quality, evidence based interventions to Manchester’s most vulnerable children and their families. All CAPS interventions are delivered to targeted families with clinically significant problems such as poor attachment, child conduct, parental depression, parental anxiety or lack of confidence and risk of harm or neglect. There is overwhelming evidence that failing to tackle these problems early on in preschool leads to poorer life chances.

9.2 Take up of Incredible Years (IV) Parent Training Programme, Webster-Stratton (Parent Survival Courses in Manchester)
9.3 From October 2018 – Sept 2019 Children and Parents Service has reported on the delivery of interventions to 874 children from birth to 5 years.

- CAPS was scaled up effectively from 2014 to ensure that by the end of 2019 20% of the pre school population approx. 7,800 had benefited from receiving a CAPS evidence based intervention.
- There was over 70% retention rates on parenting courses.
- Higher levels of increased parenting confidence and mental health were reported post intervention.

9.4 Outcomes for Parents and Children

Eyberg Child Behaviour Inventory, before intervention 201 children out of 349 were in clinical ranges for conduct disorder behaviour problems. Within one month 132 children moved from clinical to non-clinical ranges on a standardised measure of child behaviour problems. This represents 66% of the cohort; by three months 100% of children moved to non-clinical ranges.

Beck Depression Inventory, before intervention 158 parents out of 328 were deemed in clinical range. 112 (71%) parents moved from clinical to non-clinical ranges on a standardised measure of clinical depression.

Karitane Parenting Self Confidence Scale, before intervention 72 parents were clinically low in parenting confidence; 54 parents (75%) moved from clinical to non-clinical ranges on parenting confidence.

10.0 Planned Evaluation of the Early Years Delivery Model

10.1 The Early Years delivery model has been embedded for almost five years which means we have data from interventions that show a positive impact on families and children. We are now in a position to start using the data to track outcomes for children and to evaluate the implementation and effectiveness of the model.

10.2 The evaluation will take place in three phases and will be completed towards the end of 2020 and will track a cohort of children who have progressed through the entirety of the EYDM for their full first five years. Following this, we have plans in place to undertake a longitudinal evaluation to understand the impact of the EYDM on children as they progress past the five year point and on through school and beyond.

11.0 Summary of Key Early Years Outcomes

11.1 The LGA Early Years Peer Review highlighted that Manchester delivers high quality early years services that demonstrate good impact on child and family outcomes. Following the peer review we have worked with partners to implement an action plan that focuses on key areas such language, literacy and numeracy to improve our ‘good level of development’. A targeted approach of working with schools and settings which focused on these key
areas will help to close the gap for children identified as requiring this additional support.

11.2 Our early years model is an evidence based practice model which utilises research and learning to inform delivery and development. This means we are continually developing our approach and delivery. We are incorporating risk stratification to enable a targeted approach to improve outcomes for children at risk of not being school ready; this will include co-production with practitioners and parents.

11.3 Our focus on the 1,000 days has gained momentum and is being driven by the Start Well Partnership Board with broad membership and a clear focus on delivering the Start Well priorities. The development of a Sure Start Strategy 2020-2023 is underway and will be presented to the Children’s Board in July followed by a launch event later in the year.

11.4 Partnership work across midwifery, health visiting, early years and early help services are being strengthened by testing out greater collaboration in relation to achieving Smoke Free Families; a significant factor in reducing infant mortality. The learning from this thematic focus will then inform and influence integrated working at a neighbourhood level. The accompanying presentation ‘Improving Children’s Outcomes through collaboration and working in partnership in a locality’ provides more detailed information regarding the pilot.

12.0 Forward Plan and Priorities

12.1 The Early Years Service is progressing plans to move to a neighbourhood delivery model and this will strengthen collaboration between Manchester Local Care Organisation, Early Years and Early Help Services. We are focusing on developing a shared language, assessment and workforce development including use of the ‘thrive approach’, adverse childhood experiences (ACES) and brief advice.

12.2 We will work with wider partners to progress and address the areas for consideration identified through the LGA Peer review.

12.3 We will ensure that targeted approaches supporting school readiness are implemented and the learning and impact is shared across early years services.

12.4 The service will continue to work with a range of partners to increase the uptake of services, provision and interventions to ensure that the needs of vulnerable children are identified and supported at the earliest opportunity. We will strengthen our collaborative approaches with schools and settings to embed stages 6-8 of the model.

13.0 Conclusion

13.1 The redesign of Early Years services and the move to a neighbourhood delivery model will ensure better alignment with other services such as Adult
Social Care and Health Visiting services who have already aligned their services to this geographical footprint. The benefits of bringing services together across these localities will have a positive impact on families as this will reduce duplication and support collaborative working at a local level.

13.2 The strengthened focus on the first 1000 days and risk stratification approach will enable the earlier identification of children at risk of not achieving a GLD and by working with families in thrive way families will be supported to access seamless services and a range of interventions that support a whole family approach to school readiness.

13.3 This will be underpinned by the EYDM and a strong Early Years sector, children will continue to have access to a universal pathway and high quality provision. We have evidence we are achieving good impact on child and family outcomes through our communication and language and parenting pathways. However, challenges still remain to deliver year on year improvements and actions have been identified to achieve this.

14.0 Recommendations

1) Consider the findings from the LGA Early Years Peer Review in October 2019

2) Consider the Early Years quality assurance arrangements and identified actions to improve GLD.

3) Consider the progress made in increasing the uptake of the 9 month and 2 year developmental reviews and impact being achieved by the early years offer and delivery arrangements.
Manchester City Council
Report for Information

Report to: Children and Young People Scrutiny Committee – 4 March 2020
Subject: Overview Report
Report of: Governance and Scrutiny Support Unit

Summary

This report provides the following information:

- Recommendations Monitor
- Key Decisions
- Items for information
- Work Programme

Recommendation

The Committee is invited to discuss the information provided and agree any changes to the work programme that are necessary.

Contact Officer:

Name: Rachel McKeon
Position: Scrutiny Support Officer
Tel: 0161 234 4997
Email: rachel.mckeon@manchester.gov.uk

Wards Affected: All

Background Documents (available for public inspection):

None
1. **Monitoring Previous Recommendations**

This section of the report contains recommendations made by the Committee, responses to them, if they will be implemented, and if it will be, how this will be done.

<table>
<thead>
<tr>
<th>Date</th>
<th>Item</th>
<th>Recommendation</th>
<th>Action</th>
<th>Contact Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 September 2017</td>
<td>CYP/17/40</td>
<td>To request further information on the number of siblings who have been allocated places at different schools.</td>
<td>A response to this recommendation has been requested and will be reported back to the Committee via the Overview report.</td>
<td>Michelle Devine, Interim Head of Access</td>
</tr>
<tr>
<td></td>
<td>School Place Planning and Admissions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 November 2018</td>
<td>CYP/18/55</td>
<td>To request that information on the final destination of pupils who attended the Secondary PRU following permanent exclusion be circulated to Members of the Committee.</td>
<td>A response to this recommendation has been requested and will be circulated to Members by email.</td>
<td>Amanda Corcoran, Director of Education</td>
</tr>
<tr>
<td></td>
<td>Promoting Inclusion and Preventing Exclusion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 January 2019</td>
<td>CYP/19/05</td>
<td>To request the needs analysis ranking information for the 32 wards in Manchester.</td>
<td>A response to this recommendation has been requested and will be circulated to Members by email.</td>
<td>Amanda Corcoran, Director of Education</td>
</tr>
<tr>
<td></td>
<td>Youth and Play Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 October 2019</td>
<td>CYP/19/39</td>
<td>To request that the Council work to ensure that, as far as possible, all settings are involved in Skills for Life, including independent schools, and that officers look into how Skills for Life could be incorporated into the contracts when Our Children are placed in non-Council-owned residential settings.</td>
<td>A response to this recommendation will be reported back to the Committee via the Overview report.</td>
<td>Amanda Corcoran, Director of Education</td>
</tr>
<tr>
<td></td>
<td>Skills for Life</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 October 2019</td>
<td>CYP/19/40</td>
<td>To request that when the validated outcomes at primary</td>
<td>A response to this recommendation has been requested and will be circulated to Members by email.</td>
<td>Amanda Corcoran, Director of Education</td>
</tr>
<tr>
<td></td>
<td>Attainment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td>Ref</td>
<td>Department</td>
<td>Item</td>
<td>Description</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------</td>
<td>-------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>6 November 2019</td>
<td>CYP/19/46</td>
<td>Education/ Isobel Booler, Head of Schools Quality Assurance and Strategic SEND</td>
<td>Ghyll Head Outdoor Education Centre</td>
<td>To recommend that officers look into how Ghyll Head could be used by families whose children are on the edge of care.</td>
</tr>
<tr>
<td>6 November 2019</td>
<td>CYP/19/46</td>
<td>Neil Fairlamb, Strategic Lead (Parks, Leisure, Events and Youth)</td>
<td>Ghyll Head Outdoor Education Centre</td>
<td>To request that consideration be given as to how Members and the Friends of Ghyll Head can be engaged in the work of the Stakeholder Board.</td>
</tr>
<tr>
<td>6 November 2019</td>
<td>CYP/19/47</td>
<td>Neil Fairlamb, Strategic Lead (Parks, Leisure, Events and Youth)</td>
<td>Youth Strategy and Engagement</td>
<td>To request demographic information on the young people accessing youth services, particularly the youth hubs, including by ward.</td>
</tr>
<tr>
<td>6 November 2019</td>
<td>CYP/19/48</td>
<td>Neil Fairlamb, Strategic Lead (Parks, Leisure, Events and Youth)</td>
<td>Youth and Play Services - Young Manchester</td>
<td>To request that clear information on the availability of toilet facilities, for example, in park cafes, be included on signage in parks.</td>
</tr>
<tr>
<td>5 February 2020</td>
<td>CYP/20/11</td>
<td>Amanda Corcoran, Director of Education</td>
<td>The Council's Updated Financial Strategy and Budget reports</td>
<td>To request a short note in a future Overview Report on the tendering process for the Educational Psychology service.</td>
</tr>
</tbody>
</table>
2. Key Decisions

The Council is required to publish details of key decisions that will be taken at least 28 days before the decision is due to be taken. Details of key decisions that are due to be taken are published on a monthly basis in the Register of Key Decisions.

A key decision, as defined in the Council's Constitution is an executive decision, which is likely:

- To result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council's budget for the service or function to which the decision relates, or
- To be significant in terms of its effects on communities living or working in an area comprising two or more wards in the area of the city.

The Council Constitution defines 'significant' as being expenditure or savings (including the loss of income or capital receipts) in excess of £500k, providing that is not more than 10% of the gross operating expenditure for any budget heading in the in the Council's Revenue Budget Book, and subject to other defined exceptions.

An extract of the most recent Register of Key Decisions, published on 21 February 2020 containing details of the decisions under the Committee's remit is included below. This is to keep members informed of what decisions are being taken and, where appropriate, include in the work programme of the Committee.

**Register of Key Decisions:**

<table>
<thead>
<tr>
<th>Subject / Decision</th>
<th>Decision Maker</th>
<th>Decision Due Date</th>
<th>Consultation</th>
<th>Background documents</th>
<th>Officer Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Investment in schools</td>
<td>City Treasurer (Deputy Chief</td>
<td>Not before 1st</td>
<td>Business Case</td>
<td>Amanda Corcoran,</td>
<td></td>
</tr>
<tr>
<td>Ref: 2016/02/01D</td>
<td>Executive)</td>
<td>Mar 2019</td>
<td></td>
<td>Director of Education</td>
<td><a href="mailto:a.corcoran@manchester.gov.uk">a.corcoran@manchester.gov.uk</a></td>
</tr>
<tr>
<td>The approval of capital expenditure in</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>relation to the creation of school</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>places through new builds or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>expansions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subject / Decision</td>
<td>Decision Maker</td>
<td>Decision Due Date</td>
<td>Consultation</td>
<td>Background documents</td>
<td>Officer Contact</td>
</tr>
<tr>
<td>-------------------</td>
<td>----------------</td>
<td>-------------------</td>
<td>--------------</td>
<td>---------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td><strong>Ghyll Head - Refurbishment of the outdoor education centre facility (2020/01/10C)</strong>&lt;br&gt;Approval of capital expenditure for the purpose of the essential refurbishment of the outdoor education centre facility to improve the asset condition and enable the site to improve outcomes and maximise occupancy and revenue.</td>
<td>City Treasurer (Deputy Chief Executive)</td>
<td>Not before 10th Feb 2020</td>
<td></td>
<td>Checkpoint 4 Business Case</td>
<td>Neil Fairlamb <a href="mailto:N.Fairlamb@manchester.gov.uk">N.Fairlamb@manchester.gov.uk</a></td>
</tr>
<tr>
<td><strong>Young Manchester Funding (2019/12/06A)</strong>&lt;br&gt;To finalise the contract value for the continuation of funding to Young Manchester</td>
<td>City Treasurer (Deputy Chief Executive)</td>
<td>Not before 4th Jan 2020</td>
<td></td>
<td>Manchester Youth Offer Strategy</td>
<td>Lisa Harvey Nebil <a href="mailto:lisa.harvey-nebil@manchester.gov.uk">lisa.harvey-nebil@manchester.gov.uk</a></td>
</tr>
<tr>
<td><strong>Youth Offer Strategy (2019/12/11B)</strong>&lt;br&gt;To agree a Youth Offer Strategy for the next 3 years and complete the production of the strategy document</td>
<td>Strategic Director (Neighbourhoods)</td>
<td>13 Jan 2020</td>
<td></td>
<td>Manchester Youth Offer Strategy</td>
<td></td>
</tr>
<tr>
<td><strong>Contract for the Provision of Young Person’s Housing Related Support - TC1048 (2019/12/06B)</strong></td>
<td>Executive Director of Adult Social Services</td>
<td>Not before 4th Jan 2020</td>
<td></td>
<td>Report &amp; Recommendation</td>
<td>Samantha Wilson <a href="mailto:samantha.wilson@manchester.gov.uk">samantha.wilson@manchester.gov.uk</a></td>
</tr>
<tr>
<td>Subject / Decision</td>
<td>Decision Maker</td>
<td>Decision Due Date</td>
<td>Consultation</td>
<td>Background documents</td>
<td>Officer Contact</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------</td>
<td>---------------------------------------------</td>
<td>-------------------</td>
<td>--------------</td>
<td>----------------------</td>
<td>------------------------------</td>
</tr>
<tr>
<td>To agree the appointment of a Provider to deliver the service</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q20347 Consultant for EYES data Migration. 2019/04/25A</td>
<td>City Treasurer (Deputy Chief Executive)</td>
<td>Not before 1st Jun 2019</td>
<td></td>
<td>Report and Recommendation</td>
<td>Jon Nickson <a href="mailto:j.nickson@manchester.gov.uk">j.nickson@manchester.gov.uk</a></td>
</tr>
<tr>
<td>Contract is to support Manchester City Council with the migration of their Education Management System away from Capita One towards the Liquidlogic EYES solution.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Children and Young People Scrutiny Committee

## Work Programme – March 2020

### Wednesday 4 March 2020, 10.00am (Report deadline Friday 21 February 2020)

<table>
<thead>
<tr>
<th>Item</th>
<th>Purpose</th>
<th>Executive Member</th>
<th>Strategic Director / Lead Officer</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Educational Needs and Disability (SEND) Annual Report</td>
<td>To receive the SEND Annual Report.</td>
<td>Councillor Bridges</td>
<td>Amanda Corcoran</td>
<td></td>
</tr>
<tr>
<td>Children’s Services and the Manchester Local Care Organisation (MLCO)</td>
<td>To receive a presentation which provides an update on the development of the Children’s Services Locality Model and partnership working with the MLCO. This report will include information on Foetal Alcohol Spectrum Disorder.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall</td>
<td>Invite Chair of Health Scrutiny Committee</td>
</tr>
<tr>
<td>Early Years</td>
<td>To receive a quarterly update.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/Sean McKendrick/ Julie Heslop</td>
<td></td>
</tr>
<tr>
<td>Overview Report</td>
<td>The monthly report includes the recommendations monitor, relevant key decisions, the Committee’s work programme and any items for information.</td>
<td></td>
<td>Rachel McKeon</td>
<td></td>
</tr>
</tbody>
</table>

### Wednesday 27 May 2020, 10.00am (Report deadline Thursday 14 May 2020)

<table>
<thead>
<tr>
<th>Item</th>
<th>Purpose</th>
<th>Executive Member</th>
<th>Strategic Director / Lead Officer</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children and Young People’s Services -</td>
<td>To receive an oral report on the upcoming issues and challenges within</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/ Amanda Corcoran</td>
<td></td>
</tr>
<tr>
<td>Overview and key issues</td>
<td>the Committee’s remit.</td>
<td>Councillor Rahman</td>
<td>Amanda Corcoran</td>
<td>See 30 January 2018 and March 2019 and October 2019 minutes</td>
</tr>
<tr>
<td>-------------------------</td>
<td>-----------------------</td>
<td>-------------------</td>
<td>----------------</td>
<td>-------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| School Attainment       | To receive regular reports regarding attainment and attendance. Future reports to include:  
  • information on the use of flexi-schooling in Manchester and on children who are not included in the school attendance figures because they are waiting for a school place or are being home schooled  
  • information on the performance of pupils with SEND in special schools compared to those in mainstream schools and further information on the progress and outcomes for children from ethnic groups which are currently performing less well, including white British children  
  • Wythenshawe Education Board and the work taking place to support the four secondary schools in Wythenshawe and improve the educational outcomes for the pupils, including any good practice which can be shared with other areas of the city  
  • what percentage of Manchester schools are achieving the | | | | |
national average results or better and what is being done to support schools which aren’t achieving this
- further details on the population-related issues facing the city’s schools, including population growth, international new arrivals and the traveller population.

<table>
<thead>
<tr>
<th>Children and Young People’s Strategy and Looked After Children Strategy</th>
<th>To consider the refreshed strategies.</th>
<th>Councillor Bridges</th>
<th>Paul Marshall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sufficiency Report</td>
<td>To receive a report on the commissioning and arrangement of provision for children in need of care and protection including those with high and complex needs.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall</td>
</tr>
<tr>
<td>Child and Adolescent Mental Health Services (CAMHS)</td>
<td>In light of the proposal for the Council to reinvest £500k that was committed to CAMHS to responding to the needs of children with high/complex needs, to consider the scope of the revised CAMHS specification, locality transition plan and the benefits and impact for Manchester’s looked after children and care leavers.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/David Regan/Darren Parsonage</td>
</tr>
<tr>
<td>Overview Report</td>
<td>The monthly report includes the recommendations monitor, relevant key decisions, the Committee’s work programme and any items for</td>
<td></td>
<td>Rachel McKeon</td>
</tr>
</tbody>
</table>
Annual Work Programming Session

The meeting will close for the annual work programming session where Members determine the work programme for the forthcoming year.

<table>
<thead>
<tr>
<th>Item To Be Scheduled</th>
<th>Purpose</th>
<th>Executive Member</th>
<th>Strategic Director/ Lead Officer</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concealed Pregnancy</td>
<td>To receive a report which includes information on concealed pregnancy.</td>
<td>Councillor Bridges</td>
<td>David Regan/Sarah Doran</td>
<td>See November 2019 minutes Invite Chair of Health Scrutiny Committee</td>
</tr>
<tr>
<td>Edge of Care</td>
<td>To request a further report in the new municipal year to update Members on the progress and impact of this work.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/Sean McKendrick/Julie Heslop</td>
<td>See February 2019 minutes</td>
</tr>
<tr>
<td>Independent Reviewing Officer (IRO) Service</td>
<td>To receive a progress report in six months’ time which provides an update in relation to the service position on driving permanence and practice improvement.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/Julie Daniels</td>
<td>See December 2019 minutes</td>
</tr>
<tr>
<td>Leaving Care Service</td>
<td>To receive a further report in 12 months’ time.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/Abu Siddique/Nick Whitbread</td>
<td>See October 2019 minutes</td>
</tr>
<tr>
<td>Population Health Needs of Manchester Children</td>
<td>To request an update report in 12 months’ time.</td>
<td>Councillor Bridges</td>
<td>David Regan/Sarah Doran/Paul Marshall</td>
<td>See December 2018 minutes Invite Chair of Health Scrutiny Committee</td>
</tr>
<tr>
<td>Promoting Inclusion and Preventing</td>
<td>To receive a further report in 12 months’ time on how this work is progressing, linked in with the 2019/2020</td>
<td>Councillor Bridges</td>
<td>Amanda Corcoran</td>
<td>See January 2020 minutes</td>
</tr>
</tbody>
</table>

Rachel McKeon
<table>
<thead>
<tr>
<th>Exclusion</th>
<th>figures on the number of permanent and fixed-term exclusions.</th>
<th>Invite a representative from the primary sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skills for Life</td>
<td>To request a progress report in a year’s time.</td>
<td>Councillor Rahman</td>
</tr>
<tr>
<td>Support for Families, Children and Young People Affected by Homelessness</td>
<td>To receive a report on the work taking place to better co-ordinate services to support families, children and young people affected by homelessness.</td>
<td>Councillor S Murphy</td>
</tr>
<tr>
<td>Update on the Youth Justice Service</td>
<td>To request an update report in 12 months’ time to include anonymised case studies and information on the issues that Members raised at the meeting on 17 July 2019, including children with SEND and Black and Minority Ethnic (BAME) children in the Youth Justice system.</td>
<td>Councillor N Murphy</td>
</tr>
<tr>
<td>Youth and Play Services - Young Manchester</td>
<td>To recommend that a further report be brought back to Members in November 2020, which focuses on qualitative and quantitative data, evidence of impact, outcomes and young people’s feedback relating to the Youth and Play Fund 2020/2022.</td>
<td>Councillor Rahman</td>
</tr>
</tbody>
</table>

**Regular items**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Years</td>
<td>To receive a quarterly update.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/Sean</td>
</tr>
<tr>
<td>Item</td>
<td>Description</td>
<td>Councillor/Officer</td>
<td>Notes</td>
</tr>
<tr>
<td>------</td>
<td>-----------------------------------------------------------------------------</td>
<td>--------------------</td>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>8</td>
<td><strong>Our Children and Corporate Parenting (Annual Independent Reviewing Officer Report)</strong> To receive an annual report on the work of the Corporate Parenting Panel. To include an update on recent developments in respect of Our Children (Looked After Children) and corporate parenting. To include the future role/best use of existing children’s homes including best practice within other local authorities and models of practice.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall</td>
</tr>
<tr>
<td>9</td>
<td><strong>Manchester Safeguarding Children Board (MSCB)</strong> To receive the MSCB’s Annual Report. To include the report of the Local Authority Designated Officer (LADO).</td>
<td>Councillor Bridges</td>
<td>Paul Marshall / Julia Stephens-Row</td>
</tr>
<tr>
<td>10</td>
<td><strong>Proxy Indicators</strong> To receive quarterly presentations of the proxy indicators outlined in the report considered by the Committee in June 2018 and to request that these presentations also include information on school attendance and exclusions.</td>
<td>Councillor Bridges</td>
<td>Paul Marshall/Sean McKendrick/Amanda Corcoran</td>
</tr>
<tr>
<td>11</td>
<td><strong>School Attendance and Attainment</strong> To receive regular reports regarding attainment and attendance.</td>
<td>Councillor Bridges</td>
<td>Amanda Corcoran</td>
</tr>
<tr>
<td>12</td>
<td><strong>School Governance</strong> To receive a yearly report on school governance.</td>
<td>Councillor Bridges</td>
<td>Amanda Corcoran</td>
</tr>
<tr>
<td>13</td>
<td><strong>Special Educational Needs and Disability (SEND)</strong> To receive regular reports on SEND.</td>
<td>Councillor Bridges</td>
<td>Amanda Corcoran</td>
</tr>
</tbody>
</table>