

Highlight Report for Strategic Management Group

Report of	SENDIASS	Date of Report	17/01/24
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Key to RAG	At risk: There is a risk that this priority is not progressing as expected and this requires escalation from SMG to SEND OB. A mitigation plan may be required.		Vulnerable: The priority area is vulnerable due to lack of progress in some areas and may have implications for improvements. This may require escalation to SMG		On track: The priority area is on track for improvements and there are no issues raised.	
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Highlights	Challenges	RAG Rating
<p>Case Work – Reporting over 2 Quarters</p> <p>Quarter 2 1/7/23 – 30/9/23 - 313 Cases Manager 34, Assistant Case Officer 66, Case Officers 211</p> <p>Quarter 3 1/10/23 – 31/12/23 - 369 Cases Manager 31, Assistant Case Officer 86, Case Officers 252</p>	<p>Case work demand increased, and case officers are reporting their case load as too high. Due to issues in other areas of SEND its not possible to close cases so interventions are prolonged. For example, a tribunal appeal hearing is up to 1 year in wait,</p>	



annual review processes following meeting is not within the prescribed time frame for completion, children out of education and source alternative placements are taking time.

Areas to note:
 Rise in referrals from early years through to KS4 and Q3 shows a decrease in post 16 -25.

We continue to see high demand around SEMH, picking up higher number of referrals around mental health issues. This is proving to be a growing trend and is possibly unsustainable for IAS in terms of level 3 case work support.

Triage – 1 month snapshot of profile of referrals between 1/12/23 – 31/12/23

TRIAGE 168 Emails/46 Online Referrals

20 Signposted From Practitioners

15 Voice Mails Through Phone Line

Key Challenge areas coming through via referrals are:

Increased Mental Health Issues for Children and YP affecting attendance.

School Exclusion continues to rise.

EHCP processes for Annual Review and placements (section I EHCP) requests is high.

First responders when other areas within SEND don't respond to service users timely.

Parents carers seeking support for behaviour management of their children at home.

Tribunal processes lengthy – not able to close cases.

Q3 Referral Trends

- 103 returned/70 word of mouth
- 17 Education
- 14 Health
- 38 Social Care
- 42 Social Media
- 19 Unknown

Q2 Referral Trends

- 227 Returned/42 word of mouth
- 22 Education
- 16 Health
- 24 Social care
- 21 Social Media
- 17 Unknown

Increase in social care referring parents to service.

High return of previous service users

What we are achieving

TRIAGE – waiting time, referral turnover – 1-3 days on average 24 hours turn around. Assistant case officer managing high. number of cases at level 1/2 of intervention levels.

Joint working – partnerships with others, surgeries etc

Workshops – providing IAS in groups.

Strategic Networking and partnership working.

CRM – data story boarding.

Service development – collective responsibilities.

<p>Develop practice standards based on challenges/success. Refreshed publicity leaflets. Refreshed webpages. Annual report completed and published. SMG review and completed – dates forecast for 2024-2025. Development Plan in place.</p>		
<p>Work Underway Outlining our Joint Commissioning arrangements with ICB and publishing this on web pages.</p> <p>Development planning to look at smarter working to reduce high case work demand to case officers.</p>	<p>This needs careful thought and conversations as it may mean the service has to reduce its offer at level 4 of case work intervention level and this will impact on families.</p> <p>1 case officer reduction in hours by 7.30 hours per week from 1/4/24 currently funded from some underspend within budget will have an impact on other case officers' caseloads.</p>	

<p>Support and develop SMG members.</p> <p>Hybrid working arrangements – looking at how we connect as a team more.</p> <p>Develop our data story to contribute to the SEND data Dashboard.</p> <p>Become OfSTED/CQC Inspection ready.</p>		
<p>2.3 The IASS works with local partners, <u>including local parent and young people forums</u> to inform and influence policy and practice in the local area.</p>		
<p>Service Development The team met for a development session on 22/1/24.</p> <p>Reflective Practitioner Each member shared three examples where over last 6 months they have felt conflicted as to whether they think this is work the service should have been doing and considerations for this are capacity of the service, the standard we work to and the corporate principles we follow as BMBC employees.</p> <p>Outcome By the end of the session, we will have had a reflective practitioner CPD session where we developed a two-page profile report with our development direction mapping out our identity.</p> <p>Next Steps Share the two page profile for comments.</p>		