

DERBYSHIRE SEND IMPROVEMENT AND ASSURANCE BOARD MINUTES

TUESDAY 21 APRIL 2026

MS TEAMS ONLINE MEETING, 13:00-16:00

MINUTES:

Item No:	Minutes:
DSIAB2425/113	<p>Declarations of Interest</p> <p>The Chair asked if there were any conflicts of interest or declarations of interest that needed to be noted. None declared.</p>
DSIAB2425/114	<p>Children and Young People’s Patient feedback</p> <p>The Board received direct feedback from children and young people through material gathered via a Youth Inclusion forum. This included a short film created by young people themselves, designed to reflect their experiences of services, participation and decision-making. The feedback was presented as an example of authentic engagement, with young people setting out their views in their own words and explaining the importance of being listened to and taken seriously within the SEND system.</p> <p>Young people described the forum as a safe, inclusive and supportive space where they feel understood by peers with similar experiences. They highlighted the value of being able to talk openly about issues affecting them, including mental health, education, transport, preparation for adulthood and access to employment. A strong emphasis was placed on the social and confidence-building benefits of participation, particularly for neurodivergent young people and those with additional needs.</p> <p>A central theme of the feedback was young people’s understanding that their views influence decision-making. They demonstrated awareness that their ideas are shared with senior leaders and Boards, and valued knowing that their contributions help shape future services. Board members noted this as evidence of meaningful participation and growing confidence among young people in their role as advocates for themselves and others.</p> <p>Further context was provided on wider participation activity, including young people’s involvement in senior leadership recruitment and upcoming engagement with commissioning leads. These activities were highlighted as examples of children and young people being embedded within core system processes rather than consulted in isolation.</p> <p>Board members welcomed the feedback and reflected on its quality and impact. The discussion reinforced the importance of continuing to invest in co-production, closing feedback loops, and using children and young people’s lived experience as a core element of assurance and service improvement. There was shared agreement that the voices heard through this feedback should continue to inform priorities, governance and system culture.</p>

Item No:	Minutes:
DSIAB2425/115	<p data-bbox="300 96 890 136">Priority Impact Area Progress Reports</p> <p data-bbox="443 136 831 176">A. Priority Impact Area 5</p> <p data-bbox="300 176 1508 412">The Board considered an update on Priority Impact Area 5, which focuses on communications, engagement and system confidence. It was reported that much of the foundational and “enabling” work under this priority area has now been completed. The emphasis has therefore shifted from strategy development to delivery and impact, including ensuring communication approaches are consistent, coordinated and reach the right audiences at the right time.</p> <p data-bbox="300 450 1508 723">Discussion highlighted ongoing challenges in generating and sharing positive and balanced messaging across the system. While significant work is taking place across services, Board members recognised that this is not always visible to families, schools or wider stakeholders. There was agreement that improving the flow of timely, accessible information remains critical to increasing confidence in the system. This includes better use of schools as communication channels and ensuring that information is translated into plain language that families can easily understand.</p> <p data-bbox="300 761 1508 954">The Board reflected on capacity pressures affecting communications, including workforce changes and vacancies, particularly within Health partner organisations. These pressures were acknowledged as a risk to maintaining momentum and consistency, and there was recognition that interim arrangements and prioritisation would be needed to ensure key communications activity continues.</p> <p data-bbox="300 992 1508 1305">Members discussed the importance of aligning communications activity with other system priorities, including the SEND Impact Plan, Local Area Reform Plan activity and engagement with children, young people and parent carers. It was agreed that communications should increasingly support transparency about pressures and demand while also clearly setting out what support is available, including through the Local Offer. Strengthening coordination between Council, Health and partner communications teams was seen as essential to avoid fragmented or conflicting messages.</p> <p data-bbox="300 1344 1508 1458">Overall, the Board was assured that Priority Impact Area 5 has progressed into a delivery phase but noted that sustained focus is required to demonstrate impact on family confidence, staff understanding and system reputation.</p> <p data-bbox="443 1496 831 1536">B. Priority Impact Area 6</p> <p data-bbox="300 1536 1508 1691">The Board received a comprehensive update on Priority Impact Area 6, which covers health-related SEND priorities, including neurodevelopmental pathways, mental health support, waiting lists and access to services. Progress was reported in several areas, alongside significant ongoing risks.</p> <p data-bbox="300 1729 1508 1883">In relation to CAMHS waiting lists, it was noted that activity has moved into a phase of active monitoring and oversight, with early indications of improvement. Work is underway to consolidate recovery trajectories from providers into dashboards to support clearer tracking of progress over time.</p> <p data-bbox="300 1921 1508 2047">For children’s wheelchair services, engagement with providers has taken place, with recovery plans and assurances now received. The intention is to bring a formal paper to the Board setting out next steps and moving this area into routine monitoring.</p>

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<p data-bbox="70 98 276 159">DSIAB2425/115 Continued</p>	<p data-bbox="301 98 1508 331">The Board discussed the “support while waiting” offer in detail. Documentation covering mental health and neurodiversity support is now available, but it was acknowledged that further work is required to make this information accessible and family-friendly, and to publish it clearly on the Local Offer. Board members emphasised the importance of ensuring families are supported meaningfully while waiting for assessment or advice, and that expectations are managed transparently.</p> <p data-bbox="301 371 1508 680">A substantial part of the discussion focused on the neurodevelopmental pathway business case. It was acknowledged that progress has been slower than originally planned, due to workforce pressures, recruitment freezes, sickness and significant governance change across health partners. The Board recognised the scale and complexity of the proposed pathway redesign and the need to secure full partner alignment to mitigate the risk of unsuccessful implementation. Members noted that these risks may require re-rating to reflect the potential impact of delays and system instability.</p> <p data-bbox="301 721 1508 954">The Board also discussed the wider system context, including NHS restructuring at local, regional and national levels, and the impact this is having on decision-making, workforce capacity and pace of delivery. There was strong acknowledgment that these factors present real risks to delivery timelines but also agreement on the importance of clearly capturing and articulating this context within reports and risk registers to support assurance and inspection readiness.</p> <p data-bbox="301 958 1508 1070">Overall, the Board recognised strong commitment and progress within Priority Impact Area 6 but noted that it remains a high-risk area, requiring continued scrutiny, clear communication with families, and regular review of risks and recovery plans.</p> <p data-bbox="448 1115 719 1151" style="text-align: center;">C. KPI Data Pack</p> <p data-bbox="301 1155 1508 1348">The Board reviewed the KPI Data Pack and discussed both its strengths and areas for further development. Members welcomed the breadth of data provided, including trend information and national comparisons, noting that this represents a significant improvement in the quality and transparency of performance information available to the Board.</p> <p data-bbox="301 1388 1508 1621">However, it was acknowledged that the data pack is extensive and can be difficult to interpret at a strategic level without additional narrative context. While descriptive commentary is included against many indicators, Board members consistently emphasised the need for clearer explanations of why performance is changing and what actions are being taken in response. The importance of linking KPIs directly to Priority Impact Areas and improvement actions was highlighted.</p> <p data-bbox="301 1662 1508 1935">The discussion explored how data should be used to present a balanced picture of performance, including celebrating areas of improvement while also being honest about pressures and unintended consequences. For example, reductions in exclusions and suspensions were noted as positive, but members cautioned against viewing individual indicators in isolation, recognising that issues such as elective home education and part-time timetables may mask underlying challenges for children and families.</p>

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<p>DSIAB2425/115 Continued</p>	<p>There was agreement that the data pack should remain available in full for detailed scrutiny, but that additional summary views or dashboards aligned to key priorities would strengthen Board-level assurance. The Board supported plans to further develop the data offer, including linking indicators more clearly to outcomes for children and young people, and ensuring consistency of data sources across health and local authority reporting.</p> <p>Overall, the Board welcomed the direction of travel on performance reporting and confirmed that the KPI Data Pack is an essential component of assurance. Further refinement was encouraged to ensure it supports clear strategic oversight, informed challenge and evidence-based decision-making.</p> <p>ACTION - DSIABA197 - DSIAB Terms of Reference to be reviewed against the Engagement and Participation charter to ensure alignment. Due 13/05/2026</p> <p>ACTION - DSIABA198 - Participation & engagement Charter to be added to the Local Offer. Due 13/05/2026</p> <p>ACTION - DSIABA199 - PIA6 - New Risk relating to increased caseload in Childrens Social Care and impact of this on comms. Due 13/05/2026</p> <p>ACTION – DSIABA207 - Data pack to be reviewed to ensure data is aligned to PIA KPIs and context is provided. Due 16/06/2026</p> <p>ACTION – DSIABA201 – Review use of language for polices and guidance in relation to support whilst waiting with footprint group and report back on timescales. Due 13/05/2026</p>
<p>DSIAB2425/116</p>	<p>Inclusion Support Fund update</p> <p>The Board received an update on delivery through the Inclusion Support Fund, focusing on how the funding has been used to strengthen capacity and accelerate progress across the SEND Improvement Programme. It was explained that the funding has been structured around four main strands to ensure it supports both immediate delivery needs and longer-term system change.</p> <p>A significant portion of the funding has been used to increase transformational capacity, particularly through additional programme and project management support. This has enabled improved coordination of the SEND Improvement Programme and the Operational Delivery Group, supporting tighter grip, clearer tracking of actions and more consistent escalation of risks and issues to the Board. Members noted that this additional capacity has been particularly valuable given the scale and pace of change currently underway.</p> <p>The update also covered investment in data and technology. Funding has been used to commission specialist support to develop system-wide data profiling, helping the partnership better understand demand, capacity and pressures across education, health and care. This work is intended to inform strategic decision-making, underpin the SEND Strategy and Local Area Reform Plan, and provide stronger evidence for future workforce and sufficiency planning. Further outputs from this work are due to be brought back to the Board.</p>

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<p data-bbox="70 98 276 159">DSIAB2425/116 Continued</p>	<p data-bbox="301 98 1506 253">A further strand of the Inclusion Support Fund has supported specialist expertise within the EHC assessment and quality assurance system. This has included additional professional capacity to review processes, test future operating models and strengthen quality assurance arrangements.</p> <p data-bbox="301 286 1506 400">The Board was advised that this work is helping to shape thinking about future structures and workforce requirements, including how the system needs to evolve to remain sustainable and compliant over the next few years.</p> <p data-bbox="301 439 1506 674">The Board also discussed a pilot using artificial intelligence tools to support more efficient EHC assessment processes. This pilot demonstrated positive potential to streamline aspects of the assessment pathway and improve productivity. However, it was noted that procurement timescales meant that full implementation within the current funding period may not be achievable, and therefore expenditure in this area may be lower than initially anticipated.</p> <p data-bbox="301 712 1506 947">In terms of finance and assurance, it was confirmed that not all of the available Inclusion Support Fund allocation had been spent, largely due to the challenges of recruiting and procuring at pace within fixed timescales. The funding position has been reported to national partners, and finance teams have confirmed the agreed expenditure envelope. The Board noted that the funding programme is now coming to a close, with final financial information being submitted.</p> <p data-bbox="301 981 1506 1178">Overall, the Board welcomed the impact of the Inclusion Support Fund and recognised its value in supporting accelerated delivery during a critical phase of improvement. Members acknowledged that while the funding was time-limited, it has helped build momentum, strengthen infrastructure and provide learning that will inform future investment and system design.</p>
<p data-bbox="70 1218 276 1243">DSIAB2425/117</p>	<p data-bbox="301 1218 675 1243">Stocktake Letter reports</p> <p data-bbox="301 1254 930 1285">- Revised Communications strategy</p> <p data-bbox="301 1294 1506 1485">The Board considered an update on the revised communications strategy developed in response to issues and expectations set out in the SEND Stocktake Letter. The discussion focused on how communications activity is being strengthened to support transparency, rebuild confidence and ensure clearer, more consistent messaging across the SEND system.</p> <p data-bbox="301 1525 1506 1798">It was reported that work on the revised communications strategy has moved beyond initial development and is now focused on implementation and impact. The strategy is intended to bring together messaging across education, health and care partners, ensuring that communications are coordinated rather than fragmented. Board members noted that this aligns with stocktake expectations around clarity, consistency and accessibility of information for families, professionals and wider stakeholders.</p> <p data-bbox="301 1839 1506 2096">A key element of the revised approach is improving how progress and improvement activity are communicated. While significant work is taking place across the system, the Board acknowledged that this is not always visible externally. The revised strategy aims to better balance openness about pressures and demand with clearer communication about what is improving, what support is available, and where families can access help. Schools were identified as a particularly important channel for reaching families, alongside the Local Offer and partnership communications.</p>

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<p>DSIAB2425/117 Continued</p>	<p>The Board discussed the importance of ensuring communications are written in plain, accessible language and avoid professional jargon, recognising feedback from families that complex or technical language can be a barrier to understanding. The revised strategy is therefore intended to support more empathetic and family-focused communication, particularly for families waiting for assessments or navigating multiple services.</p> <p>Capacity and workforce pressures affecting communications delivery were acknowledged, particularly within health partners, and recognised as a risk to consistent implementation. Interim arrangements and prioritisation have been put in place to ensure critical communications activity continues, with a focus on high-impact areas linked to the stocktake letter and improvement priorities.</p> <p>Members also emphasised the need for the Communications Strategy to align closely with wider system priorities, including the SEND Improvement Plan, Priority Impact Areas, and emerging local area reform activity. The Board agreed that communications should actively support inspection readiness by demonstrating how improvement activity is understood, coordinated and shared across the system.</p> <p>Overall, the Board noted positive progress in revising the communications strategy in response to the Stocktake Letter, while recognising that sustained effort will be required to evidence impact on confidence, understanding and engagement among families, schools and professionals.</p> <p>ACTION - DSIABA201 - discuss use of language for polices and guidance in relation to support whilst waiting with footprint group and report back at May Board on timescales. Due 13/05/2026</p>
<p>DSIAB2425/118</p>	<p>Children’s Social Care Communications</p> <p>The Board noted that a planned update on Children’s Social Care Communications did not take place in detail at this meeting. It was reported that the scheduled contributor for this agenda item was unable to attend, and as a result, a substantive presentation or discussion was deferred.</p>
<p>DSIAB2425/119</p>	<p>Delivery Group update</p> <p>The Board received a verbal update from the Delivery Group, focusing on progress, emerging risks and areas requiring escalation to support delivery of the SEND Improvement Programme. The update emphasised the Delivery Group’s role in providing operational grip, monitoring delivery across workstreams and ensuring that issues are escalated appropriately to the Board where strategic oversight or intervention is required.</p> <p>It was reported that the Delivery Group has continued to review risks arising from Priority Impact Areas, particularly those associated with health delivery, capacity pressures and the pace of progress against recovery trajectories. Issues discussed earlier in the meeting, including pressures within Priority Impact Areas 5 and 6 and challenges relating to workforce capacity and system change, were confirmed as having been considered by the Delivery Group and recorded within the risk framework.</p>

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<p>DSIAB2425/119 Continued</p>	<p>A significant issue escalated to the Board concerned the increasing number of requests for Education, Health and Care (EHC) assessments, with a notable rise since autumn 2025. This increase was linked to national policy signals and anticipated SEND reforms, mirroring trends seen elsewhere. The Delivery Group highlighted that this rise presents a material risk to recovery plans, timescales and capacity across education, health and care partners, due to the knock-on impact on assessment teams, health advice contributions and review activity.</p> <p>The Board was advised that mitigations are being actively explored and implemented to manage this demand, including internal prioritisation, capacity planning and partnership discussions. However, the Delivery Group was clear that the scale of demand poses ongoing risk and requires continued Board-level oversight. Members agreed that this risk should be formally recognised as escalated to the Board, with further updates expected in future reports.</p> <p>The update also confirmed that the Delivery Group is working to strengthen the relationship between risk management, performance data and recovery planning. This includes ensuring that emerging pressures identified through operational delivery are reflected consistently within reporting, dashboards and risk logs, and that learning is fed back into strategic decision-making.</p> <p>The Board noted that the Delivery Group continues to provide effective operational oversight and escalation, particularly in relation to system pressures and demand. Members agreed that the issues raised reinforced the need for coordinated, multi-agency responses and ongoing scrutiny at Board level to ensure risks are managed and progress maintained.</p> <p>ACTION - DSIABA203 - PIA 3/4 Reports to reference impact of SEND Reforms. Due 16/062026</p> <p>ACTION - DSIABA204 - establish meeting with operational service leads on impacts of SEND reforms. Due 13/05/2026</p> <p>ACTION - DSIABA206 - discuss LGA SEND scrutiny toolkit and report back on position. Due 13/05/2026</p>
<p>DSIAB2425/120</p>	<p>Local Partnership Updates</p> <p>A. Parent Carer Forum update</p> <p>The Board received an update on recent engagement activity led by the Parent Carer Forum, including a programme of face-to-face and online sessions held across Derbyshire. These sessions have enabled parents and carers to engage directly with professionals, share experiences and access support. A particular focus has been placed on emotional-based school avoidance, with emerging themes being captured to inform wider system understanding of attendance, pressure points and unmet need.</p> <p>The Forum highlighted that many families continue to experience frustration and distress, particularly those facing delays or uncertainty within the SEND system. It was noted that these concerns are often expressed strongly via social media, contributing to heightened perceptions of system failure. The Forum outlined its efforts to manage this tension by increasing transparency about its role, how feedback is escalated, and how participation feeds into strategic discussions, while maintaining constructive relationships with partners.</p>

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<p>DSIAB2425/120 Continued</p>	<p>An update was also provided on work to strengthen the Forum’s capacity, including recruitment of additional representatives and development of surveys and consultation activity. This includes plans to align parent-carer feedback more closely with public health and system intelligence, ensuring lived experience is increasingly used alongside performance data to support improvement and assurance.</p> <p style="text-align: center;">B. Derbyshire County Council</p> <p>The Board was updated on the continued pressure facing Derbyshire County Council, particularly within SEND operational services, driven by sustained increases in demand. Workforce capacity remains a challenge; however, some improvement in stability has been observed, including a reduction in sickness levels, which was recognised as a positive development.</p> <p>Members were advised that preparatory work is underway in relation to potential Local Government Reorganisation (LGR), with national decisions expected later in the year. While details remain uncertain, it was acknowledged that any changes could have significant implications for governance, commissioning and service delivery, including SEND. The Board agreed that further updates should be brought back once greater clarity is available.</p> <p>An update was also provided on senior leadership recruitment within Children’s Services, with the process nearing completion. The Board noted the importance of leadership continuity and stability in sustaining SEND improvement activity alongside other major transformation programmes.</p> <p style="text-align: center;">C. Derby and Derbyshire Integrated Care Board</p> <p>The Board received an update on developments within the Integrated Care Board, including the impact of ongoing NHS restructuring and consultation at local, regional and cluster levels. It was reported that the volume of consultation feedback has delayed confirmation of final structures and appointments, with interim arrangements in place to ensure continuity and support key portfolios, including SEND.</p> <p>Members were reminded that Derby and Derbyshire now operates within a wider cluster arrangement alongside neighbouring systems. While organisations remain sovereign, leadership and decision-making are increasingly coordinated at cluster level. The Board agreed that future ICB updates should reflect this structure, particularly where risks, capacity issues or strategic decisions are shared across systems.</p> <p>The Board acknowledged that the scale and pace of NHS reorganisation presents a significant contextual risk to SEND delivery and decision-making. However, reassurance was provided that SEND remains a priority and that interim leadership arrangements are intended to maintain momentum and partnership working during this period of change.</p>
<p>DSIAB2425/121</p>	<p>Minutes of the meeting of 17th of March</p> <p>The minutes from the previous meeting on the 17th of March were accepted as an accurate record with an amendment made to a member’s name.</p> <p>The minutes will be anonymised and placed on the Local Offer website.</p>

Item No:	Minutes:
DSIAB2425/122	<p>Action Log</p> <p>Reviewed in the meeting and updated.</p> <p>ACTION - DSIABA205 - Share RAID log link with Board papers going forward. Due 13/05/2026</p>
DSIAB2425/123	<p>Any Other Business</p> <p>The Board discussed meeting format and future arrangements, noting that recent meetings had been held virtually. Members reflected that, while in-person meetings remain preferable, the partnership now works effectively online. It was agreed that flexibility would continue, with a proposal to hold upcoming meetings in person where possible, while retaining the option for virtual meetings during periods of high pressure or competing commitments.</p> <p>An update was also provided on Integrated Care Board (ICB) cluster arrangements, noting that SEND business is increasingly being managed within a wider cluster context. It was agreed that future ICB updates to the Board should reflect this cluster-level governance, while recognising the continued sovereignty of individual organisations.</p> <p>The Board further noted changes to attendance and representation, with agreement that some senior officers will attend meetings specifically when they are leading agenda items, rather than routinely. This was framed as a pragmatic approach to capacity pressures, with assurance that appropriate senior oversight and escalation routes remain in place.</p>