

DERBYSHIRE SEND IMPROVEMENT AND ASSURANCE BOARD

MINUTES

Tuesday 14th October 2025

MS Teams online meeting, 14:00-17:00

MINUTES:

Item No:	Minutes:
DSIAB2425/47	<p>Welcome, introductions and apologies</p> <p>The Chair opened the meeting and welcomed all attendees and thanked them for their time and commitment to the Board.</p>
DSIAB2425/48	<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. No conflicts of interest or declarations were reported by the attendees at that time.</p>
DSIAB2425/49	<p>Children and Young People Voices</p> <p>The Board received an update on engagement activities with children and young people. It was noted that the SEND young people's group had not met again since the last Board meeting, so there was no direct update from them. However, wider engagement work was highlighted, including a video project about the Derbyshire SEND Local Offer. This video was produced by young people from Ashgate Croft School, supported by the digital team, virtual school, and local steering group members. The project culminated in a film premiere event, where participants experienced a red carpet, were interviewed, and received certificates, which was reported as a positive and empowering experience. The Board watched the video.</p> <p>The Board discussed the importance of ensuring a broad range of young people's voices are heard, not just those from a small core group. Plans are in place to create "satellite" groups across the county, enabling more young people with additional needs from local schools to participate and share their views. This approach aims to improve representation, including young people from different geographical areas and educational settings.</p> <p>Efforts to link with the Adult services consultation group were also described, with the intention of helping young people understand the transition to adult services and identify common themes and issues. The current composition of the young people's group was outlined, with members from a variety of backgrounds, including those in work, college, mainstream, and special schools.</p>

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DSIAB2425/49 Continued	<p>The Board acknowledged the logistical challenges of engaging young people, particularly due to school and college commitments. Options such as rotating attendance, scheduling young people's contributions at the end of meetings, and holding Saturday sessions were discussed to improve participation.</p> <p>The Chair encouraged those leading on reports to include direct quotes from children, young people, and parents in future documentation, to ensure their voices are clearly represented. The importance of including both positive and negative feedback was emphasised, to provide a balanced and authentic picture. The Board expressed its appreciation for the ongoing engagement work and reaffirmed the importance of involving children and young people in all aspects of the Board's activities. It was noted that the move to quarterly reporting should allow more time for co-production and deeper engagement. The Board looks forward to further updates on this work.</p>
DSIAB2425/50	<p>Priority Impact Area Progress Reports</p> <p>A) Priority Impact Area 5 & 6</p> <p>The Board received an update on Priority Impact Area 5, which focuses on the development and delivery of a values workshop and the ongoing engagement with the Parent Carer Forum. Colleagues reported that progress in this area has been slower than anticipated, primarily due to challenges in coordinating with the Parent Carer Forum and aligning schedules for the workshop. Originally, the values workshop was intended to take place in June, but various logistical and communication issues have led to repeated delays. There was discussion about whether the workshop could be incorporated into other strategic events, such as the RISE workshop, but it was confirmed that this would not be possible, necessitating a separate arrangement.</p> <p>The Board expressed concern about the apparent drift in timelines, distinguishing between necessary re-setting of timeframes and unintentional delays. Members emphasised the importance of having a clear purpose and outcome for the values workshop, particularly as it is intended to be a co-produced event involving a broad range of stakeholders, including parents and carers. It was agreed that a renewed effort would be made to engage with the Parent Carer Forum, with a meeting scheduled for the coming Friday to discuss how best to move the workshop forward. Additionally, the Priority Area 5 working group would also be meeting to coordinate efforts and ensure momentum is regained. Claire Walsh confirmed the commitment to undertake this work.</p> <p>During the discussion, it was highlighted that the values workshop is a critical component for informing the wider communication and implementation strategies within the SEND improvement plan. Board members noted that the workshop's outcomes would be essential for shaping future communication sessions and ensuring that the voices of parents and carers are meaningfully embedded in service development. There was a consensus that, if the current approach with the Parent Carer Forum continued to face obstacles, alternative methods or groups should be considered to avoid further delays.</p>

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<p>DSIAB2425/50 Continued</p>	<p>The Board also discussed the need for robust mechanisms to measure the impact of improved communication with parents and carers. While some positive feedback had been received, it was acknowledged that it was too early to assess the full impact of recent changes. Members stressed the importance of establishing clear timelines and milestones for all actions under Priority Impact Area 5, and ensuring that any outstanding actions are tracked and reported back to the Board with specific deadlines.</p> <p>In summary, the Board reaffirmed its commitment to progressing Priority Impact Area 5, recognising the importance of co-production and timely delivery. It was agreed that a renewed focus on engagement, clearer timelines, and regular updates would be essential to provide assurance that this area is moving forward as intended.</p> <p>The Board received a detailed update on Priority Impact Area 6, which focuses on data and performance, particularly in relation to neurodiversity assessments, waiting lists, and service access for children and young people. Nicky Smith led the discussion, highlighting that the main areas of focus within this priority are the tracking of waiting times for Neurodevelopmental (ND) assessments, CAMHS (Child and Adolescent Mental Health Services), and wheelchair services. It was acknowledged that while some progress has been made, significant challenges remain, especially in the aggregation and analysis of data from multiple providers. A key barrier identified was the difficulty in obtaining consistent, accurate, and timely data from all relevant Health providers. The Board heard that there are currently multiple providers delivering assessment services, each with their own data systems and reporting methods. This fragmentation makes it challenging to produce a clear and comprehensive picture of waiting times and service access across the county. The team is working towards the development of a standard data template and is aiming to move towards patient-level data collection, which would allow for more precise tracking and reporting. However, this transition is complex and will take time to implement fully.</p> <p>The discussion also addressed the contractual and organisational barriers to data sharing, particularly with NHS Foundation Trusts, which operate with a degree of autonomy and are not always contractually obliged to provide the level of data required. Senior leaders have engaged in conversations with provider organisations to stress the importance of data provision, especially in light of ongoing improvement plans and anticipated inspections. The Board was informed that work is underway to review contracts and strengthen requirements for data sharing, but it was recognised that organisational sovereignty can still present obstacles.</p> <p>Board members expressed concern about the current length of waiting times for assessments, with average waits reported at around 1.5 years across the Midlands and some cases extending up to four years. The Board agreed that these figures are unacceptable and emphasised the need for both immediate and long-term solutions but need to understand the statistics for Derbyshire rather than the broader cohort of children and young people across the region. There was a strong consensus that, while improvements in data collection are essential, there must also be a focus on what support is available to children and families while they are waiting for assessment or intervention. Members requested that providers be asked to detail their support offers for those on waiting lists and to share any evaluations of the effectiveness of these interim supports.</p>

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DSIAB2425/50 Continued	<p>In summary, the Board reaffirmed its commitment to addressing the challenges in Priority Impact Area 6, recognising the urgent need for better data, clearer accountability, and improved support for children and families. Regular updates, a focus on both quantitative and qualitative evidence, and ongoing engagement with providers were identified as key next steps to ensure progress in this critical area.</p> <p style="text-align: center;">Data in regard to impact areas 5&6</p> <p>The Board engaged in an in-depth discussion regarding the ongoing challenges and progress in the area of data and business intelligence, particularly as it relates to service access, waiting times, and performance monitoring for children and young people's services. It was acknowledged that the current data landscape is fragmented, with multiple providers each using different systems and reporting methods, making it difficult to aggregate and analyse data consistently across the county.</p> <p>A significant focus was placed on the difficulties in obtaining accurate and timely data from all relevant providers, especially for neurodevelopmental assessments, CAMHS, and wheelchair services. The team is working towards the development of a standardised data template to be used by all providers, with the longer-term goal of moving towards patient-level data collection. This would enable more precise tracking of waiting times, service access, and outcomes, and would support the creation of a Power BI dash board for more responsive and transparent reporting.</p> <p>The Board also discussed contractual and organisational barriers to data sharing, particularly with NHS Foundation Trusts, which have a degree of autonomy and are not always contractually required to provide the necessary data. Senior leaders have been engaging with provider organisations to stress the importance of data provision, especially in light of improvement plans and anticipated inspections. Work is underway to review contracts and strengthen requirements for data sharing, but it was recognised that organisational sovereignty can still present obstacles.</p> <p>To improve transparency and accountability, it was agreed that more granular, provider-level data would be brought to the Board at the next meeting. The Board also discussed the value of using case studies and qualitative tracking to better understand the lived experiences of children and families navigating long waits for services. Additionally, there was support for the idea of a drop-in session or workshop to help Board members deepen their understanding of the data landscape, the challenges involved, and the implications for service planning and delivery.</p> <p>In summary, the Board reaffirmed its commitment to addressing the challenges in data and business intelligence, recognising the urgent need for better data, clearer accountability, and improved support for children and families. Regular updates, a focus on both quantitative and qualitative evidence, and ongoing engagement with providers were identified as key next steps to ensure progress in this critical area.</p> <p>ACTION - Chair to send a letter re: attending DSIAB to the four main NHS Providers in Derbyshire</p> <p>ACTION - Quality Group (inspection Readiness) to look at undertaking case study of wait time journey</p> <p>ACTION - Provider data for NHS Waiting Times to be provided at Derby & Derbyshire level at November Board</p>

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DSIAB2425/51	<p data-bbox="355 91 1249 125">Children and Young Peoples Workforce Overview – Health</p> <p data-bbox="355 165 1525 456">The Board received an overview of the children and young people’s health workforce in Derbyshire, focusing on data from mid-September. The review covered the health workforce across Chesterfield Royal Hospital (CRH), Derbyshire Community Health Services (DCHS), Derbyshire Healthcare Foundation Trust (DHcFT), and University Hospitals of Derby and Burton (UHDB). It was noted that the data is based on the 2025/26 workforce plan submitted to NHS England, which assumes zero growth in whole-time equivalent staffing costs, except for a few special cases.</p> <p data-bbox="355 497 1493 860">It was highlighted that NHS occupational codes are complex and do not distinguish between children’s and adults’ roles, making it difficult to get a clear picture of the workforce dedicated to 0-25 services. Additionally, some services, such as health visiting and school nursing, are provided by different trusts in the city and county, which affects how workforce data is presented and interpreted. The Board discussed recent changes, including the consolidation of paediatric speech and language therapy staff within DCHS to strengthen what had previously been a fragile service. Some anomalies in workforce reporting were noted, such as Chesterfield Royal counting community paediatric nurses as hospital nurses.</p> <p data-bbox="355 900 1517 1077">Significant challenges were reported regarding workforce controls. There are now strict limits on the use of bank and agency staff, and vacancy controls have been implemented across all organisations, making it more difficult to fill staffing gaps. The overall trend is a decrease in staffing levels, despite increasing demand for services.</p> <p data-bbox="355 1117 1525 1263">The reduction in workforce was linked to impacts on service delivery, particularly in universal services like health visiting and school nursing, which are essential for early identification and support for children and families. The Board noted that reduced staffing contributes to longer waiting times for services.</p> <p data-bbox="355 1303 1517 1520">It was acknowledged that the NHS planning cycle and funding are centrally mandated, limiting local flexibility. Concerns were raised about the potential loss of local expertise and relationships due to regionalisation and restructuring, which could further impact service effectiveness. The Board agreed on the need for greater transparency, improved data, and a solution-focused approach to ensure support for children and families while they wait for services.</p>
DSIAB2425/52	<p data-bbox="355 1559 762 1592">SIAB Evaluation Feedback</p> <p data-bbox="355 1632 1509 1778">The Board received feedback from the recent SIAB evaluation survey, which had a response rate of approximately 50%. The survey asked members to rate various aspects of the Board’s effectiveness and to provide free-text comments on strengths, challenges, and opportunities for improvement.</p> <p data-bbox="355 1818 1517 1964">Key strengths identified included a growing strategic focus, strong commitment to improving outcomes for children, and positive relationships among Board members. There was recognition that the Board is moving towards a long-term, sustainable approach rather than seeking only quick fixes.</p>

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DSIAB2425/52 Continued	<p>Challenges highlighted by respondents included ongoing gaps in performance data, dash boards, and key performance indicators, which make it difficult to provide assurance on progress. There were also concerns about limited school engagement at the operational level, inconsistent understanding of Board members' roles, and the need for clearer escalation structures.</p> <p>Opportunities for improvement included broadening stakeholder involvement, particularly from schools and carers clarifying roles and expectations for Board members, and improving the measurement and communication of impact. The importance of maintaining a balance between Board development and progressing priority areas was discussed, with several members cautioning against spending too much time on Board processes at the expense of delivery.</p> <p>The Board agreed that members should individually reflect on the feedback and consider what actions they could take to address the issues raised. It was also suggested that the Operational Delivery Group review the feedback to identify any further learning or actions required. The Chair emphasised the need for all members to take personal responsibility for contributing to the Board's effectiveness and to ensure that future evaluations reflect continued progress.</p> <p>ACTION - Board Members to review the Board Evaluation Survey Feedback and self-reflect on what members could do differently.</p> <p>ACTION - Board Evaluation Survey to be shared with Operational Delivery Group and relevant aspects highlighted.</p>
DSIAB2425/53	<p>Update from Operational Delivery Group</p> <p>The Board discussed the importance of the Operational Delivery Group in providing assurance that actions are being completed within agreed timeframes and that any barriers or delays are identified and addressed promptly. There was a particular focus on ensuring that the Operational Delivery Group regularly reviews both the action log and the risk log, and that it brings forward any exceptions or concerns to the Board for further scrutiny. The Operational Delivery Group was also tasked with ensuring that the impact ratings (RAG ratings) used in progress reports are applied consistently and accurately, with clear definitions for when an action or outcome can be considered "green" or "blue."</p> <p>Additionally, the Operational Delivery Group was identified as the forum where operational challenges such as data collection difficulties, provider engagement, and contractual issues should be discussed in detail, with solutions and recommendations then brought to the Board. The group was also asked to coordinate the development of more robust data reporting, including the aggregation of provider-level data and the use of case studies to illustrate lived experience.</p> <p>In summary, the Operational Delivery Group was recognised as a key mechanism for driving delivery, maintaining oversight of progress, and ensuring that the Board receives the level of assurance it needs to be confident that improvement work is on track. The Board requested that the Operational Delivery Group continue to focus on tightening timelines, clarifying responsibilities, and escalating any unresolved issues or risks in a timely manner.</p>

Item No:	Minutes:
DSIAB2425/54	<p>Local Partnership Updates -</p> <p>A) Parent Carer Forum update The Parent Carer Forum reported on their recent activities, including the circulation of their annual survey questions to gather feedback from parents and carers. They noted that only three responses had been received so far and encouraged Board members to review the survey and provide comments or suggestions. The Forum is planning to launch the survey after the October half-term and is seeking ways to improve representation and reach more parents, recognising that many families only become aware of the Forum when they encounter difficulties. The Forum is also exploring new partnership opportunities and considering how to better promote their work and increase membership, including through events and direct engagement with parent carers.</p> <p>B) Derbyshire County Council The Council provided an update on leadership changes, announcing the appointment of Simon Stephens as interim Chief Executive, who will take up the post in the coming weeks. This interim arrangement will allow the Council to recruit a new Director for Adults, which is seen as beneficial given the overlap with Children's services. The Council also updated the Board on the ongoing Local Government reorganisation, noting that revised proposals will be presented in November. The Board was advised to consider how to prepare for potential changes in governance and structure as the reorganisation progresses.</p> <p>C) Derby and Derbyshire Integrated Care Board The ICB update focused on the ongoing clustering of the Derby and Derbyshire ICB with Nottinghamshire ICB under a single executive Board. Dr Kathy McLean has been appointed as Chair, and Amanda Sullivan as Chief Executive. The process of appointing Executive Directors is underway, with further director-level appointments expected later in the year or early next year. The ICB is awaiting further information on the underpinning structures. The update also included a brief mention of positive engagement with local council leaders and ongoing preparations for inspections and reorganisation, with an emphasis on maintaining effective partnership working during this period of change.</p> <p>ACTION - Board Members to review DPCV Survey where appropriate before end of the week (survey circulated with October Board papers)</p>
DSIAB2425/55	<p>Minutes of the meeting of 16th of September</p> <p>The minutes from the previous meeting on the 16th of September were accepted as an accurate record.</p> <p>The minutes will be anonymised and placed on the Local Offer website.</p>
DSIAB2425/56	<p>Action Log</p> <p>Reviewed in the meeting and updated.</p>
DSIAB2425/57	<p>Any Other Business</p> <p>None raised in today's Board.</p>