



# Minutes

## Isle of Wight SEND Partnership Board



	<b>Date</b>	Wednesday 10 <sup>th</sup> December, 10:00-12:00
	<b>Format</b>	Hybrid – County Hall (Conference Room 2) and Microsoft Teams







### Attendees



Name	Initials	Role	Organisation
Amie Cass	AC	PA to Ashley Whittaker and Kay Jones - Admin	Isle of Wight Council
Amy Milford-Wood	AM-W	Parent representative	Isle of Wight SEN Support
Anthony Harper	AH	Deputy Director of Children's Care	NHS Hampshire and Isle of Wight
Ashley Whittaker (Chair)	AW	Strategic Director of Children's Services	Isle of Wight Council
Beth Dyer	BD	Service Manager - Education	Isle of Wight Council
Ben Geddes	BG	Parent Representative	Parent Carer Forum (PCF)
Cally Wareham	CW	Cluster Lead for Children and Young People Services	Child and Adolescent Mental Health Service (CAMHS)
Carly Wiseman (formerly Bain)	CWi	Service Director – Partnerships, Commissioning and Transformation	Isle of Wight Council
Daron Perkins	DP	Service Manager – Adult Social Care - Mental Health and Learning Disability	Isle of Wight Council
Emma Meek	EM	Strategic Director	NHS Hampshire and Isle of Wight
Freya Sadler	FS	Parent representative	Isle of Wight SEN Support
Glenn Parkinson	GP	Service Manager - Strategic Development	Isle of Wight Council
Kate Evans	KE	Quality and Performance Officer	Isle of Wight Council
Kathy Whitewood	KW	Head of Service	Isle of Wight Youth Trust
Kay Jones	KJ	Service Director - Children's Social Care	Isle of Wight Council
Kelly Quinn	KQ	Team Manager – Family and Community Services	Isle of Wight Council



Mark McCurrie	MMc	Independent SEND advisor	Commissioned by Department for Education (DfE)
Matthew Powell	MP	Head of SEND	NHS Hampshire and Isle of Wight
Melanie Price	MPr	Senior SENDIASS Officer	Hampshire and IOW SENDIASS
Rachel Burden	RB	Deputy head of SEND	NHS Hampshire and Isle of Wight
Ruth Hayles	RH	Service Lead for Exploitation and Youth Justice Service	Isle of Wight Council
Sian Broome	SB	Head of School	St Mary's Primary
Simon Dennis	SD	CS Placements and Commissioning Manager	Isle of Wight Council



<b>Agenda Item</b>	 <b>Record of discussion</b>	<b>Actions</b> 
1 - Welcome, Introduction and apologies	<p>AW gave an overview of the purpose of the meeting for any new colleagues joining. In this meeting we try to avoid the use of acronyms and professional jargon. We will also always try to remain strengths-based in our discussions. Apologies have been received from Vikki Reader, Claire Collins, Laura Groves, Simon Homes, Natalie Sheppard and Shelley Lewis.</p> <p>AW shared that the Council will be recruiting someone to lead on Participation. The advert should be live in the next week or so. They will act as a central point, to co-ordinate participation in a more strategic way.</p>	
2- Insights from Young People	<p>KQ shared an update about Young Inspectors.</p> <p>Young Inspectors is a programme for 5–19-year-olds. They look at inspecting Short Breaks, Family Hubs and centres. They can inspect other venues or activities, not just Short Breaks providers. They choose the activities they want to go on and provide their honest feedback. They focus on how enjoyable the activity is and accessibility including financial accessibility.</p> <p>They have done four inspections over the last four months:</p> <ul style="list-style-type: none"> <li>- Network Ryde <a href="#">Network Ryde   Youth Service</a></li> <li>- Doodles (Care Connect) <a href="#">Doodles Sessions   connectiow</a></li> <li>- Vectis Radio <a href="#">Vectis Radio</a></li> <li>- Island Riding Centre <a href="#">Island Riding Centre – Equestrian Complex and Holiday Accommodation on the Isle of Wight</a></li> </ul>	



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	<p>Their ideas will be taken forward to improve services. The reports for inspections are uploaded to the website: <a href="#">Young Inspector reports</a></p> <p>Further advertisement of the Young Inspectors Programme will launch in early 2026. We particularly want to seek the views from young people who are non-speaking and/or have physical disabilities who can help improve services. Young people who are interested can sign up any time, here: <a href="#">Become a Short Breaks Young Inspector</a></p> <p>AW shared that he has met many of the Young Inspectors and they always share that they really enjoy what they do.</p> <p>MMc said the Youth Forum in Oxfordshire have a seal of approval sticker/logo that is added to providers and facilities. This could be something to adopt on the Island.</p> <p>RH shared that there are some spaces used by Youth Justice Service that could be inspected by the Young Inspectors where appropriate. AW raised that SEND children are over-represented in the criminal justice system so it is important that we include their views. It was agreed that this would be taken forward.</p>	<p><b>Action</b> – RH and KQ to liaise regarding inspection of Youth Justice Service spaces.</p>
<p>3 – Insights from Parents/carers</p>	<p>BG shared the plan for a meeting in early 2026 to look at rules for co-production.</p> <p>BG has met with KE for feedback on egress and the hub. Parents have been informed that they must use the engagement hub. BG asked for a follow up on this is not working well for all parents and carers. There was agreement that an alternative must be provided, if the hub is not viable for families.</p> <p>The PCF website is not up and running yet. Surveys have been sent out to parents to identify what areas the PCF should focus on.</p> <p>The survey that was previously sent out to parents and carers had questions about their experiences. A wide variety of</p>	<p><b>Action</b> – KE To follow up on the engagement hub.</p>



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	<p>responses were received, with the most common responses stating that parents would welcome more support . AIM and SENDIASS were mentioned by parents as providing good support.</p> <p>67% of respondents were not satisfied with the NHS. 5% were satisfied with the Local Authority, with 81% unsatisfied and the remainder neither satisfied nor dissatisfied. BG shared that the majority of respondents reported feeling unhappy and unsupported. This is because they do not feel listened to and are not receiving what they need. He added that the recent staff changes within the Local Authority SEND team is adding to the feeling of instability among families.</p> <p>BG confirmed The total number of respondents so far is 22 but is hoping the survey will be shared wider , including schools. BG confirmed they will continue to collect responses. The main purpose of the survey is to gain qualitative information to look at areas of focus.</p> <p>AW added that from this we can look at priorities for co-production in the New Year. AW is meeting Jenni from the PCF next Friday. BG confirmed the survey has not got an end date. BG is trying to reach out to parents who are offline, the foster carer community and families of deaf and sensory impaired children to ensure less represented people are heard.</p> <p>AW added he is pleased there is a baseline from the survey and feels motivated by what the responses will look like in the future.</p> <p>BG added there is a strong reoccurring theme of families feeling let down. The responses are anonymised so they can be shared.</p> <p>B.G asked that the survey could be shared on the Council website. A.W confirmed this is possible and that it is a standing offer that the Council will help promote the reach of the PCF and all support groups.</p>	



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	<p>CWi sent an email yesterday to the PCF. CWi and EM are the points of contact for engagement between PCF, the LA and NHS.</p> <p>AM-W shared an update. A couple of weeks ago they completed work with University of Portsmouth, who have been looking at the profiling tool. Around 35 parent/carers attended a session at the Riverside centre. It was nice to get people talking to researchers and link people in. The benefits of peer support was noted.</p> <p>FS added that they have been holding monthly sessions for parents at a Family Hub, which has been really well attended.</p> <p>Some parents have shared that they have not seen information on the new resourced provisions such as the one in Brighstone.</p> <p>Parents have heard that the Occupational Therapy service don't take referrals that relate to sensory needs or emotional dysregulation connected to sensory needs. People are being directed to the neurodiversity team. There is some concern that this is more a of a light-touch review of needs rather than an OT assessment of needs.</p> <p>RB said there has been a shift towards holistic assessments to include sensory. It won't be done as a standalone assessment. As the specification embeds there will be training. RB clarified that there is a difference between sensory support and sensory integration therapy. The latter is not in use here yet. AM-W asked whether R.B is indicating this will be used in the future, R.B confirmed that there is research being done and staff need to be trained to degree or masters level to undertake Sensory Integration Therapy.</p> <p>EM added about the Portsmouth research – excited about the findings. AW said if there is anything we can do as a Council to promote peer support networks we will. AW is interested to know how we can develop this further.</p>	



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<p>4 – Preparation for Local Area SEND Inspection</p>	<p>AW said there is a monthly meeting to look at inspection preparation. KE is co-ordinating the information that is needed for Annex A and has identified what documents are needed. We identified we have some gaps e.g. learning from the outcomes of tribunals and complaints.</p> <p>There is also more detailed work to be done on the Quality Assurance process for residential special schools.</p> <p>There is a new multi-agency Quality Assurance process for Education, Health and Care Plans (EHCPs). A cycle of this has already been completed and will be done on a half-termly basis.</p> <p>Progress has been made but there is more work to do.</p> <p><b>Update on staffing</b> NC (Service Director for Education, Inclusion and Access) is on a period of leave. There is also not currently anyone in the Service Manager for SEND position, and the Team Manager of the Statutory EHCP Team (NS) has been off work unwell and has now resigned. AW is grateful for everyone in the directorate who has stepped in to fulfil the missing essential roles during this interim period.</p> <p>Beth Dyer (Service Manager for Education) is acting up to lead the Education, Inclusion and Access team. We have also moved colleagues on an interim basis from other areas of the directorate. CWi has moved across to work alongside BD. AW shared he is pleased on how we have managed to stabilise the situation quickly and is happy to hear from families about their ongoing experiences.</p> <p>Four additional temporary staff have been recruited to the Statutory Education Health Care team. They will start officially on the 5<sup>th</sup> January. They will be here for 6 months and will be on the Island roughly half the week and remote the other half.</p> <p>They will work alongside colleagues in the statutory team, which currently has 15 people. They will work to improve our performance, i.e EHC Plan issuance and annual review</p>	




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	<p>timeliness and look at all systems and processes including quality of plan writing. The new colleagues have significant experience in improving outcomes for other Local Authorities. AW feels that by July 2026 we will be in a very different place and is confident this will be really positive. We are acting quickly to address the staffing issue within the department.</p> <p>BD added that there is a real commitment from the team.</p> <p>CWi shared that her new post is Service Director for Partnerships, Commissioning and Transformation. This includes looking at sufficiency and co-production. The work CWi is doing currently will help inform our future. CWi has been looking at SEND complaints and the common themes. What we want to see is a decrease in complaints and happier parents and carers. A lot of the problem is families not hearing back in a timely way i.e. communication. Also looking at the Local Offer and how we can develop this. We aspire not just to improve our services but to completely transform it. We are looking across the country for the best local offers.</p> <p>AM-W said it would also be helpful to look at tribunals that get withdrawn at late notice because the Council concede and this was agreed.</p>	
5 – SEND Performance Dashboard	<p>AW shared that the Data and Insights team has moved within the wider council data insights structure. They are leading the work on the performance dashboard. It is structured along the six workstreams.</p> <p>The team are in the process of developing KPI's for each workstream.</p> <p>The latest performance dashboard will be sent out with these minutes as KE had to leave the meeting.</p>	<p><b>Action</b> – AC to send out latest performance dashboard with the minutes</p>
6 – Deep dive into Workstream 3 (Local Offer)	<p>Three priorities to workstream 3:</p> <ul style="list-style-type: none"> <li>- Expand specialist education provision</li> <li>- Therapy provision</li> <li>- Emotional wellbeing and Mental Health</li> </ul>	

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	<p>CW shared an update on Therapy Provision: Single point of access for Mental Health being considered. Parents feel they are pushed pillar to post. Trying to think with the ICB and wider IOW healthcare. Brought together a referral meeting for all agencies – CAMHS, Youth Trust, Mental Health Support Team and Barnardos. Want to expand this. Running a pilot to see how this goes to start with. Schools take ownership how they utilise their mental health practitioners. If new referral into triage they can direct to Mental Health Support Team.</p> <p>Mental Health Support Team in schools have worked hard to increase their coverage, there are only two schools who do not use them.</p> <p>My Happy Mind is used in some primary schools. Early intervention and prevention, whole school approach, assemblies and classes around mental health.</p> <p>Thinking about under 5’s pathway on the Island at CAMHS.</p> <p>Work around transitions from children’s mental health services to adults. Transition peer support workers have been an absolute asset to the team. Looked at lowering the age especially for children with EHCP’s to have support through transition.</p> <p>The Dynamic Support Register meeting is in place, this has representatives from health and occurs every other week.</p> <p>Occupational Therapy do drop-in sessions to help up-skill professionals.</p> <p>GP shared an update on expanding provision: Subject to committee decision Lionheart is proposed to increase by 60 places. Meeting to discuss how we can better plan for places. Looking at Medina House expansion in Sept 2026 but in terms of physical building work this wouldn’t be until 2027.</p> <p>CW and GP are meeting in January to look at how we can find information earlier to inform how many specialist places will</p>	

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	<p>be needed for children starting school. AW shared there are significant number of children who need a specialist place in 2026. Usually, they would attend Medina House. When looking at these children, many areas would have known about their needs, sometimes from birth. We will find places for them but if we knew earlier, we could better plan ahead for additional places.</p> <p>There is still a vacancy for a CAMHS therapist in the Youth Justice Service.</p> <p>KJ asked for CW to widen the group to include social care colleagues as many children in social care have SEND needs.</p> <p>AH raised that we need to lift these different ideas into one strategic vision. We have an opportunity to do something different and exciting. We need to be smart on how we can use our resources better. KJ expanded on this point. There is excellent work in certain areas but we need to map our priorities across the whole system.</p>	<p><b>Action</b> – AW and AH to take forward ideas for strategic vision.</p>
<p>Workstream 6 – SEND Joint Commissioning</p>	<p>EM and SD are leading on workstream 6.</p> <p>The underpinning document for this workstream is the Joint Commissioning Strategy. This was sent out with the agenda.</p> <p>Feedback from the last meeting included that we should cross-reference the strategy to the pillars of the Education Strategy.</p> <p>Care experience is now a protected characteristic within the Council so this has been included. The voice of the child is the golden thread in everything we do. Cross-referenced governance from Local Self-Evaluation from June 2025.</p> <p>EM added that we want to map out all our services on the Island. We want to include commissioned services by the council , the cost and statutory duties. Where are our areas of investment and think about the interdependencies between health and social care.</p>	

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	<p>SD said colleagues have been really helpful to pull together information on commissioned services.</p> <p>Look at current provision, population need, duplication of areas and what needs re-design. What can and what should be commissioned collectively. The plan is to define short, medium and long-term actions. All workstreams need to align, so we do not work in silo.</p> <p>EM and SD meet weekly to work on this. A detailed action plan will sit under the strategy to include metrics.</p> <p>KJ commented that she doesn't feel all of the comments she previously shared at the last meeting has been incorporated in the strategy. She still feels it needs to have more reference to corporate parenting to include Children we Care for and The Virtual School. It should Inter-link with the corporate parenting strategy and the sufficiency strategy.</p> <p>In February, the Isle of Wight Council voted to include care experience as a protected characteristic. Section 11 Joint Strategic Needs Assessment could include children from Youth Justice Service and those with a Social Worker. AH added we need to be honest about being innovative and different rather than investing significant funding into new things. This is a good place to describe our intent. AW said we always need to be evidence-based in how we spend our money.</p> <p>MMc noticed that on page 5 the sentence 'children and families act 2014' is missing the 4 from 2014. He suggested giving more consideration to reforms and expectations. Include the views of local schools and school system leaders. Need a stronger review of what schools feel their strengths are then use the strategy to develop scaffolding to improve our offers to young people earlier.</p> <p>Tweaks will be made to expand on schools.</p> <p>MMc added that the DfE shared an open public letter in October which clearly identified what is on the horizon with reforms. Local, fair for communities, earlier intervention and</p>	<p><b>Action</b> – SD to amend the Joint Commissioning Strategy</p>

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	evidence-based. Look at systems more intelligently with a stronger lens on systems approach.	
7. Review of actions from the last meeting	<p><u>Update on Neurodiversity Multi-disciplinary Team</u></p> <p>Mitch Burson from the Neurodiversity team joined the meeting to give an overview and update of the service.</p> <p>Support starts straight away whether child has a diagnosis or not. The team keeps things personal and responsive. The door is virtual and always open. Support is in the form of a 30-minute consultation, often followed by a profiling session of up to 90 minutes to talk, reflect and plan. 1100 families are actively engaged with the team and over 3000 enquiries have been answered with families receiving timely advice and reassurance. Support is not one-off; it can be revisited when needed.</p> <p>The team have trained more than 90 professionals across education, health and social care. They have been working with the Children’s Accident and Emergency department to train them in neurodiversity. They have also recently launched sleep consultations.</p> <p>Culture change; assemblies in schools on sleep and wellbeing. Breaking stigma and giving families tools they can use. Teams on the island are inviting the team to their services to look at training and supporting culture change.</p> <p>Priorities are the end of year review with impact data and recruitment for a Neurodiversity Outreach Support Worker in school. Also the development of the profiling tool.</p> <p>AH added there is an urgent need to review resources for parents available on websites. KQ shared that there will be further development of the Family Information Hub. AH raised there is a need to review the content of resources.</p>	<p><b>Action</b> – Send any resources to MB who will work with KQ to include them on the Family Information Hub.</p>
8. Any other business	BG asked for meetings to be recorded and transcribed as a reasonable adjustment. AW said that although he is happy to	

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	<p>do this, we must ensure everyone is happy with the transcript to be shared. Please let AW know if you object to this.</p> <p>AW shared that this is MP's last SEND Partnership Board. AW expressed thanks to Matt for all the work he has done to support children and young people on the Island within the NHS. MP is moving to a new role but remaining on the Island.</p> <p>AW shared that Adult Social Care have recently undergone their CQC inspection. The report will come out in the first quarter of 2026. This is important because there is an overlap where we support young people up to the age of 25.</p> <p>AW thanked everyone for what they are doing to support babies, children and families on the island.</p>	
Next meeting 	Thursday 5 <sup>th</sup> February 2026, 10:00-12:00 Hybrid – County Hall and Microsoft Teams.	

### Action Tracker

Date	Action	Responsible person
10/12/25	RH and KQ to liaise regarding inspection of Youth Justice Service spaces.	RH KQ
10/12/25	KE to follow up on the engagement hub.	KE
10/12/25	AC to send out latest performance dashboard with the minutes	AC
10/12/25	AW and AH to take forward ideas for strategic vision.	AW AH
10/12/25	SD to amend the Joint Commissioning Strategy	SD
10/12/25	Send any resources to MB who will work with KQ to include them on the Family Information Hub.	All

### Forward Plan

Date item to be discussed	Item	Lead person



05/02/26	Deep Dive: Workstream 1 Co-production, voice of children & young people, their families	Strategic Lead Children's Care (ICB) & Chair of Parent Carer Forum (PCF)
05/02/26	Deep Dive: Workstream 4 Statutory Processes	Associate Designated Clinical Officer (ADCO) NHS