

**UK CCN Network and SAPHNA SPECIAL INTEREST GROUP**

**Nurses working with SEND children and young people**

Meeting (virtual) held March 7th 2023 2pm-3pm

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| **Attendees:** | (RD) Rebecca Daniels (EAST LONDON NHS FOUNDATION TRUST) – chair and minute taker  (ED) Elaine Davies  (RJ) Rita Jenner (Suffolk NHS)  (SH) Sian Hooban  (JM) Jane Mulcahy  (SD) Sara Cornell  (LD) Lucy Daly  (ND) Nicola Davies  (MD) Maria (Angie) Deluque  (KF) Kristie Foreman  (EF) Emma frederick  (DH) Diane Hart  (HT) Hazel Thomas | (JP) Jo Pearch  (EK) Ebon Khaled  (DM) Debbie Marsden  (RM) Rebekah Murch  (JP) Julie Price  (CR) Corine Robinson  (VC) Victoria Coatsworth  (CT) Catherine Tinsley  Heather Gray (HG)  (JS) Jill Standing  (RH) Rachael Hampshire  (TW) Tracy Whitwell  (JW) Jo Webster  (CW) Claire Wade | | | |
| **Apologies** | (AT) Annette Thorpe  (AFu) Angie Fudge (Sussex Community NHS Foundation Trust)  (MC) Melissa Clarke  (ME) Marie Eyre (ROTHERHAM DONCASTER AND SOUTH HUMBER NHS FOUNDATION TRUST)  (SE) Sara Eacopo  (TW) Trudy Ward  (SA) Sarah Allen  (CH) Caroline Hancox.  (CW) Caroline Welch  (SB) Shaik Begum  (BP) Bianca Postelmans  (CC) Claire Connolly  Hannah Dyson  (JR) Jane Ryall (SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST)  (SJ) Sarah Jeyes  (NK) Natalie Kingsbury  (EL) Emma Lea  (SM) Sarah McKean and colleagues  (KU) Kathy Unwin  (GC) Gemma Cove-Mullins  John Gowan | (KS) Kaie Samoilov  (KL) Kate Lee  (LD) Leanne Dunbar  (AMP) Alice Macdonald-Parry  (CP) Charlotte Phillips  (HR) Hannah Roebuck  (SH) Sarah Harding  (KB) Katrina Bottle  (SHa)Sheryl Haley  (RH) Rachael Hampshire  (LR) Lorna Russell  (CN) Christine Newton  (IP) Ilona Parkinson  (NK) Natalie Kingsbury  (RW) Rebekah Wyat  (MS) Marina Samuels  (LHG) L’Oreal Haugton-Gordon  (KE) Kirsty Elliott  (HL) Heather Lane  (LSt) Louise Stringer and Sarah Student HV  (SL) Suzanne Lee  (CR)Charlotte Robertson  (PB) – Paula Brooke | | | |
| **Agenda:** | Open space | | | | |
| **Item** | **Discussion** | | **Action** | **Deadline** |
| **Welcome and Introductions** | The group introduced themselves and shared their current job role and schools within their remit. Variety of school offers across the UK.  Joint meeting with SAPHNA and UK CCN Network | |  |  |
| **Minutes from 11th January 23** | Confirmed as correct.  Links shared regards the new Area SEND Inspection and implementation plan.  Large document – would be useful to have it broken down for school nursing input.  [14:23] Rita Jenner - Lead for Partnership Delivery  1. National standards (not until 2025 at earliest)  2. Accountability to ‘ensure expectations met’ -DfE will also consult on an amended version of the SEND Code of Practice.  3. EHCPs to go digital – but trialled first  4. Inclusion plans in, but no council admission powers -Non-statutory guidance will be published this autumn on expectations for the partnerships, alongside a “self-assessment tool”. Controversial “tailored lists” of settings for children will also first be tested in the change programme. DfE heard “significant concerns” from parents and young people that it could “restrict choice”.  5. Mandatory mediation to be scoped out first  6. New NPQ for SENCos gets green light  7. New special schools – but long process  Thirty-three free schools have been promised in 30 councils, mainly those with large high needs deficits.  8. National SEND tariffs to come alongside standards  The SEND review also proposed a national system of funding bands and tariffs for pupils with special needs to ensure more “consistent” funding.  9. AP funding will also be reviewed  10. Inclusion dashboard demo next month  11. ‘Adjusted’ intervention in failing areas  A new “ladder of intervention” will come into effect this year, with “robust action for all where statutory duties for children and young people with SEND and in alternative provision are not met, to strengthen accountabilities across all parts of the system”.  12. New Alternative Provision performance framework  An expert group will support the development of a “bespoke national alternative provision performance framework” based on five named metrics.  14. ‘Comparable’ expectations for independent schools  Government will also “re-examine the state’s relationship with independent special schools to ensure we set comparable expectations for all state-funded specialist providers”.  15. More ‘joined-up’ work with NHS England  Integrated care boards will be required to have a named executive board member lead accountable for SEND, and there will be more “joined-up” responses between the DfE and NHS England to improve outcomes and experiences.  6. Implementation board will drive reforms  The green paper proposed a new national SEND and alternative provision implementation board to “hold partners to account for the timely development and improvement of the system”.  This will be established and comprise of parents, sector leaders across education including schools, early years and post-16, health and care and local and national government. Its joint chairs will be the children’s minister and mental health minister.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SH – awareness that in Wales it is an All Age ACT/framework which varies to SEND in England. | | •[SEND and alternative provision improvement plan - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/send-and-alternative-provision-improvement-plan)  •[SEND review: DfE finally publishes improvement plan (schoolsweek.co.uk)](https://schoolsweek.co.uk/send-review-improvement-plan-everything-schools-need-to-know/) |  |
| **Open Space 2.0** | TW – **asked about signposting for training for schools for asthma, anaphylaxis. External sites are signposted to but these are now charging. What do others recommend?**  LD – local resus department within the acute who offers anaphylaxis training in schools. This includes general awareness.  ED – Schools pay for a private provider to come in for oxygen training, resus/Ambubag training . SSN provide asthma, epilepsy, epipens. Specailist nurses also come out to schools where nurses are not on site.  DH – SSN organise asthma, anaphylaxis through the hospital resp CNS. Epilepsy CNS provides training, competencies by the SSN. Nasopharangyeal training via Acute physios. More push back from schools regards nebulisers and NP suction where schools are expecting SSN to undertake these.  JP – Registered nurse carries out annual training with schools.  RD – train the trainer model with PH team. Community asthma nurse trains PH school nurses to be asthma champions and they deliver half day training for asthma, anaphylaxis and epilepsy awareness training.  ED – PH are pulling 0-19 back from these training and advising schools to purchase training. | |  |  |
| **Open Space 2.1** | RD – asked about blended diets – all aware of Toolkit. Casestudy template for sharing good practice and experiences to develop resources to share wider  Maddies on line – project – safety online for pre teens  <https://maddiesonline.blogspot.com/> | | Members to complete and return to [Rebecca.daniels@nhs.net](mailto:Rebecca.daniels@nhs.net) |  |
| **Open Space 2.2** | VC – currently having new SEND inspection at school. One key line enquiry regards EHCP and the input from school nurses, and who is lead health professional where multiple professionals are involved.  Not possible to input into all EHCP review plans.  TW – Notified via school when reviews are due – provide a written report about input from ssn with the CYP and family. Also highlight other agencies that have been involved.  ED – involved with the Annual reviews but not all. Joint decision with SENCO and SN regards whether a report would be useful regards input. Attend for health part of meeting only. How do we include the voice of the YP within this report regards the input into inteverntions.  CT – Input into CYP review that they have input into at school ie careplanning.  RJ – did they ask about EHCP and transition to adulthood?  VC – not discussed specifically around transition.  RJ – 6 cases to be picked but would include children in care –  VC – one of her cases discussed including a looked after child.  CT – in local area the complex care children have CCN input into the EHCP and not SSN. Schools coordinate the process.    RJ – new inspection will look at all records for 6 case studies and could ask to see any professional involved within the child’s care.  VC –identification of SEND need also highlighted within the inspection. Questions around being clear about service offer and understanding of role of school nurse.  ED – lack national guidance around interventions in schools and commissioning services – NHS England undertaking work at the moment round this. | | RD and JM to feedback on work once able to. |  |
| **Open space 2.3** | RD- local issues around care packages where there is breakdown between carers and family, results in CYP missing school when no carers available.  DH – ICB are cutting care packages and delegating to special schools. Schools are stating this is health need and should be school nurses role. Service spec does not detail the offer for SSN.  JH -Transport – as care is becoming more complex, not having anyone to escort the CYP to and from school.  JW- primary school parents are expected to travel with child, secondary nurses being funded to escort. However some CYP are to unwell to go school but school package being funded including four nurses in one class for four children.  RD – looking at JDs for school staff as joint HCA/TA however this is a health need and should be funded via health. No national guidance currently.  ND – feeding is normal part of the CYP day whethr oral or enteral.  TW – nurses are not on site and carry out training/competencies with school staff on enteral feeding  RM – one school headteacher has JD and informs all candidates in interviews they will be meeting health needs in school. | |  |  |
| **AOB** | SAPHNA conference rescheduled: NEW DATE: <https://saphna.co/news/send-conference-1st-march-2023/>  If you had previously booked and paid for March, this rolls over and you will be sent the new link for July. | | NEW DATE 5th July 2023 |  |
| **Requests for agenda items** | Items to be emailed to BD – currently open space | |  |  |
| **Next meeting** | Weds 3rd May 1400-1500hrs (every 8 weeks) | |  |  |

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| **Action Log** | | | | |
| **Agenda No.** | **Action captured** | **Owner** | **Timescale** | **Completed** |
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