

CABINET – 31 JANUARY 2023

PROCEDURAL MATTERS

Members Questions**Question (1) Lance Spencer**

In December there were 988 active EHCP requests, of these, 284 requests are known to be over the 20-week period in which SCC are legally required to complete the EHCP. If this number was divided equally across Surrey, each Divisional member would have 3 children who had been waiting for an EHCP for more than the statutory 20 weeks.

It has been stated that there is a risk-based process to ensure that those children who are at greatest risk have the assessments completed as soon as possible.

- a. What factors are taken into account in this risk assessment?
- b. Is a child's inability to attend school regarded as a risk factor?
- c. When does the service anticipate that it will be in a position to process EHCP requests within the legally required 20 week period.

Reply:

- a. The following factors are considered when determining if a professional should prioritise an assessment as part of the education health and care needs assessment process:

- Whether the child or young person is,
 - a child looked after or previously looked after
 - out of education
 - in a key stage transfer year, transitioning between phases of education
 - educated other than at school
 - in an alternative provision setting
 - of secondary school age and presenting with social emotional and mental health needs
 - presenting with needs that are suggestive of Emotionally Based School Non Attendance (EBSNA)
- Whether there are safeguarding concerns involving self-harm/suicidal ideation
- Whether the child/young person is on a child protection plan or is a Child in Need (as defined by S.17 of the Children Act)
- Whether the child/young person has less than 60% school attendance
- Whether the child/young person is at risk of exclusion or placement breakdown.

Children who meet this criteria are identified by the SEN team who alert advice givers to the need for a timely assessment. Professionals then consider and weight this on a case by case basis in order to prioritise work.

- b. Children who are unable to attend school are considered to have a risk criteria as noted in the factors listed. This will be taken into account if it is identified as an issue for the child in the information submitted by the parent or schools in the

needs assessment request or is provided directly to the local authority through our school data system.

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- c. We are aiming to complete 60% of EHCP requests within timescales from April onwards with this increasing to 70% by the end of the year. The proportion of plans completed on time nationally in 2020 was 61% which was a reduction from 65% the previous year. Completing EHCPs within timescales is a national challenge due to the shortage of key professional involved in the assessment process. Partners across education, health and social care are taking a range of measures to increase timeliness and complete the backlog of assessments. We recognise that there will be some children whose plans will be delayed, and we are working with a focus group of parent young people, providers, and professionals to consider how best to support these children while their assessment is underway. The focus group is also working on communications to parents and providers so that there is full awareness of the assessment delays and recovery plan. We are also implementing regular communications to parents whose children are undergoing the needs assessment process where this is delayed.

Clare Curran
Cabinet Member for Education and Learning
31 January 2023

Question (2) Lance Spencer

At the Cabinet Meeting on 27th September 2022 a question was asked about children who were unable to attend school because they were suffering EBSNA (Emotionally Based School Non Attendance). In response the cabinet member commented that:

“We have also experienced an increase in referrals to our Access to Education service from schools citing ‘child or young person being unfit to attend school.’ Access to Education are working with 46 children who are currently medically unfit to attend school, the majority are CYP experiencing EBSNA.”

- a. How many hours of schooling do children in receipt of A2E support receive per week?

Reply:

Surrey County Council’s Access to Education (A2E) Service works with a wide range of children, who for a variety of reasons are unable to attend school in the usual way.

The service offers a flexible offer of education to children and young people either in the home or at community hubs. This allows work to be undertaken 1:1 or in small groups.

The Department for Education’s guidance “Education for children with health needs who cannot attend school” [Education for children with health needs who cannot attend school - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/education-for-children-with-health-needs-who-cannot-attend-school) states:

“The law does not define full-time education but children with health needs should have provision which is equivalent to the education they would receive in school. If they receive one-to-one tuition, for example, the hours of face-to-face provision could be fewer as the provision is more concentrated.”

“Where full-time education would not be in the best interests of a particular child because of reasons relating to their physical or mental health, LAs should provide part-time education on a basis they consider to be in the child’s best interests.”

As each child’s situation will be unique, the individual packages of support will be bespoke and the hours of support will vary depending on the needs of the child. For all referrals, A2E will look to provide 10 hours of face-to-face teaching initially. However, depending on the needs of the child, more or fewer hours could be offered. Packages of support can be augmented by access to the Virtual Learning Environment which every child receiving A2E support has, by group activity or by outdoor education such as that provided by Surrey Outdoor Learning and Development.

The level of support provided can vary from 5 hours to 25 hours per week depending on the needs of the child or young person.

Any A2E package that is put in place is done so with the consent of the family and is regularly reviewed with them so that, if necessary, adaptations can be made to the support provided.

Where a child is also looked after, the Surrey Virtual School tracks their education and monitors progress via their personal education plan, including the number of hours of provision they receive.

Currently we have 114 children open to A2E where Emotional Based School Non-Attendance (EBSNA) or anxiety is preventing them from attending school regularly out of a total of 211 open A2E cases. That means 54% of young people supported by A2E are experiencing anxiety or EBSNA.

In addition to the support offered by A2E, schools can purchase places with Surrey Online School. Surrey Online School offers virtual lessons to children which can be accessed at home. These lessons are sometimes used as part of a package to reintegrate children experiencing EBSNA back into school. Currently there are 36 children accessing Surrey Online School who are experiencing EBSNA or some form of anxiety. These children are in addition to the 114 children open to A2E and it is overwhelmingly schools that arrange access to Surrey Online School rather than the local authority.

The local partnership has established an EBSNA working group which is multi agency and includes Family Voice, health, schools, MINDWORKS and the third sector to share practice and to develop strategies to support children and young people.

Clare Curran
Cabinet Member for Education and Learning
31 January 2023

Question (3) Jonathan Essex

How is Surrey County Council working to help address the NHS backlog through increasing the local provision of care beds in Surrey? Can the recently vacated adult-social care accommodation be used here?

Reply:

The council is working in partnership with Surrey Heartlands to ensure the right discharge options are available in the right locations for Surrey residents who no longer require acute treatment. This includes a strong focus on, where at all possible, supporting people to return home with the right support. Where this is not the Council, Surrey Heartlands have a range of targeted arrangements in place with care homes to support discharge and clearing the backlog.

Mark Nuti

Cabinet Member for Adults and Health

31 January 2023

Question (4) Jonathan Essex

It has been reported in the media that private brokers are earning £millions finding care homes for NHS patients. Are private brokers used in Surrey to find care homes for NHS patients and if so what was the cost last year a) to the county council b) to the NHS?

Reply:

The council does not contract for or fund this type of service but understands that the NHS use a private brokerage company in two hospitals within Surrey which is focused on supporting people who fund their own care to make suitable arrangements.

Royal Surrey County Hospital Trust and Surrey and Sussex Hospital Trust directly fund and contract for private brokerage arrangements. The cost of these arrangements is not known to the council, therefore a request for this information would need to be submitted directly to RSCH and SASH.

Mark Nuti

Cabinet Member for Adults and Health

31 January 2023

Question (5) Jonathan Essex

The County Council's provision of children's homes and special school placements is now being provided more in-house to save money and provide better outcomes. How does this, along with 2) above, impact the business case for provision of adult care homes by the Council?

Reply:

The factors referred to in this question do not have an impact on the business case for the provision of care homes by Surrey County Council.

Since July 2019, the Council's Adult Social Care service has been focussing on promoting the independence of our residents in the delivery of the Council's Accommodation with Care and Support Strategy. Through this strategy we are moving from an over reliance on residential care to affordable specialist accommodation, which includes Extra Care Housing for older people and Supported Independent Living for individuals with learning disabilities and/or autism and/or mental health needs.

Specialist accommodation helps residents maintain their independence for longer and ensures they receive the right care, at the right time, in the right place, leaving nobody behind.

Mark Nuti
Cabinet Member for Adults and Health
31 January 2023

Question (6) Catherine Baart

- a) Please provide the number of adult asylum seekers and unaccompanied child asylum seekers currently accommodated in hotels in Surrey.
- b) Please confirm what support is provided to these asylum seekers by Surrey County Council, and in particular how the County Council is working with the NHS to ensure that basic wellbeing needs, including access to public transport, NHS dental and health care, is provided.

Reply:

- a) There are a number of national immigration workstreams which are being supported at a local level in Surrey. These include: the Afghan Relocations and Assistance Policy (ARAP) supporting Afghans in bridging accommodation, Hong Kong British Nationals Overseas (BNO), Initial Asylum (IA) accommodation, Overspill Dispersal Accommodation (ODA), Homes for Ukraine and Family schemes and Unaccompanied minors.

The number of adult asylum seekers and unaccompanied child asylum seekers accommodated in Surrey is approximately as follows:

Scheme	Totals*	Data from
Initial Asylum accommodation (hotels)	945	Jan 2023
Overspill Dispersal Accommodation (hotels)	131	Jan 2023
Unaccompanied Minors**	149	Jan 2023

* It should be noted that these figures are subject to movement on an almost daily basis as individuals pass through the relevant processes and are moved on and out of Surrey hotels.

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**Unaccompanied Asylum Seeking Children are placed in a variety of settings according to their age and their level of need, including foster care, semi-independent accommodation and supported lodgings and not in hotels.

- b) Surrey County Council leads the coordination of activity via the Surrey Wider Immigration Group, made up of key County Council services and partners including Emergency Management and Resilience Team, Education, Public Health, Children, Families and Lifelong Learning, Adult Social Care; Borough and District Councils; South East Strategic Partnership for Migration (SESPM); health partners; voluntary sector groups; and Home Office and DLUHC leads.

‘Wrap around’ support is provided in hotels by County Council services and a range of agencies, including for: access to education provision for school-aged children, further education, ESOL training and home to school transport; Public Health guidance, prevention and treatment for infectious disease e.g. TB and scabies; and Adult Social Care (ASC) are able to complete assessments under the Care Act and referrals are made where required.

Unaccompanied Minors are treated and supported as looked after children and registered with a GP, enrolled in school, provided with a personal education plan and a language learning assessment. District and Borough Councils lead on housing and permanent offers of accommodation and working with the voluntary sector on integration initiatives.

The Surrey Wider Immigration Group has enabled the alignment and co-ordination of multiple agencies and services, including health partners such as Surrey Heartlands and Frimley ICBs and their Primary Care, Safeguarding, Mental Health and Health Inclusion teams to deliver access and registration to GPs, completing initial health assessments, linking into dentistry, providing mental health support and leading on vaccinations including COVID-19. A Migrant Health Needs Assessment has been undertaken and the findings, conclusions and recommendations are being finalised, to inform future work.

Mark Nuti

Cabinet Member for Adults and Health

31 January 2023