

Pan Dorset EHCP Terms of Reference (working Group) 10/05/21 11-12 noon

Chaired by Steve Clarke Dorset CCG, with Elaine from DPCC, Nikki PCT, Peter PCT and a rep from the Foundation Louise Wildon and Miriam Bayliss EP from Dorset LA. No one from BCP LA was available.

The meeting was arranged to agree the Terms of Reference for the Pan Dorset EHCP Group but it quickly became apparent that some reps had different views on what the purpose of the meeting was and why we were attending...

Both Elaine and myself and Peter were a tad confused by why there was a Foundation Rep present. Myself & Elaine feel sure we had previously signed off a TOR which said the parent carer forums would attend on behalf of parents/carers.

Even more confused that the meeting went off on a tangent... so thought it was an opportune moment to raise the issue of Poole CDC and the waiting lists for appointments etc which is causing lots of stress for parents and has been for many months now.

Explained that some children have been waiting over 14 months for appointments. Chloe Morley from Dorset CCG is to give an updated statement to PCT in the next day or so which we can share with parents & carers. (I also sent her an email at the weekend re this).

Further discussions identified that both LAs have gone their separate ways re EHCPs so is a Pan Dorset meeting necessary. I queried if Steve and the CCG simply needed to focus on 'health' although I explained that I and others appreciated Steve trying to bring together education, health and social care.

Miriam EP and Elaine explained how the processes at Dorset LA were in place and were different to BCP. Different mechanisms and performance indicators are used. They also each have different boards and set ups. I suggested perhaps Steve and CCG may be better focusing on health contents of EHC plans as many BCP LA plans still don't have any health content and the issues at the CDC meant many children were not getting appointments and this would have an impact on the content and quality of EHCPs.

I also explained that health professionals completing assessments needed a reminder about plans being quantified and specified to ensure quality content in plans as this was frequently not the case and it made it difficult to know exactly what a child needed in terms of support, by whom and frequency.

Peter explained that although BCP was doing a "reasonable job" re performance indicators and QA processes, the LA wants the QA to be separate from time limits however from a parents point of view - doing things on time is equally important. They "dont see it as part of the QA process. Peter said that timeliness should be linked with QA. They shouldn't be separate.

Steve explained that he and Chloe are part of the panel now and have oversight of approving the health content and thought this could help inform good practice.

He will now take some time to reflect and decide whether to continue with the meetings under the purpose of looking at the learning, sharing good practice, highlight reports possibly holding to account and roles and responsibilities.

To be honest it has lost momentum from my perspective. Both LAs have got on with their own separate processes.

Steve now meets with BCP LA weekly re outstanding returns from health professionals for EHCPNA. This has helped and they use a specially designed form which enables professionals to give good quality feedback.