## Appendix 4 – Responses to Joint SEND Strategy Consultation

Respondent	Number of Responses	Response Q1	Response Q2	Response Q3	Comments
School Governor	1	Y	Y	Y	The deadline to improve school nursing of September 2020 is far too long and could put children at risk. Like many of the deadlines which are looming the deadline of June 2019 for place planning is now on us. Priority 2 does not make reference to involving academy trusts that might not take part in MELA/SHA. Priority3 deadline of 2022 to increase places in special school is too late for many children. T

School SENCos	4	no	no	no	Priority 3 – Health Care is
		response	response	response	not being met. MYPWS
		'	'	'	(CAMHS) and
					Snapdragons are not
					working with our most
					vulnerable students.
					Waiting lists too long,
					refusal to 'joint work'
					(Priority 6), inappropriate
					recommendations/expectat
					ions of schools. Requests
					for information and advice
					are not responded too,
					confidentiality quoted.
					Priority 3 – Specialist
					Resourced Provision, the
					due date September 22,
					should be moved forward.
					There is a need for
					provision now; planning,
					negotiations need to begin
					sooner. There are students
					waiting long periods of time
					for appropriate placement.
					Priority 7 – "smooth and
					seamless pathway", this
					will require the involvement
					of education professionals
					in the design.

	Y	Υ	Y	These strategic priorities are relevant and essential. Proposed actions are the right ones to move us forward. The present referral system to Snapdragons is still taking too long and is causing difficulties. Priority 3
	Υ	Υ	No Response	Priority Four MCH are developing with Medway Council a social prescribing offer and this may be something worth exploring with partners across all areas of Medway.
	Υ	Y	N	Guidance for schools on any changes to EHCPs would be welcomed as soon as this has been implemented and additional funding is of a great concern to our setting, due to the backlog of cases being received by the authority. We would welcome this happening ASAP, rather than the September deadline.

Parent	2	Y	Y	Y	Please can you prioritise the children in the wrong placements and ensure enough is done to transfer these children efficiently into suitable placements for their needs! Appreciating their mental health is a priority and accepting that it's is being jeopardized whilst remaining in an unsuitable provision for their needs! Also much more help is needed in insuring parents of said children have the support and guidance whilst transitioning their children during what is a very difficult time for the entire family
		Υ	Y	Y	Under priority 3, the first action in relation providing more specialist resourced provision places locally is lacking urgency with the timeframe of Sept 2022. In appendix 1 of the strategy under the sub heading "place planning" several URGENT needs are highlighted. There are not

					sufficient actions planned in the strategy to address these URGENT needs and those that are present lack the necessary urgency.
Head teacher	2	Y	Y	Y	Priority Two MCH would welcome a school and preschool training programme but would struggle to actually deliver such a comprehensive programme without extra resources. This is not part of the specification.
		Y	Υ	N	Soft strategy that needs more detail and more work with schools, particularly around support and funding.

Health Provider	V	Υ	Υ	The pilot programme of
i lealth Flovider	У	1		The pilot programme of
				support needs more detail
				and it is ambitious to have
				a pilot training programme
				in place by Sept 19 which
				require the skills and
				expertise from MCH and
				others. How will this be
				timetabled? Priority Six
				MCH would welcome
				clarity with the SEND team
				and Medway CCG around
				pooled funding
				arrangements for SLT and
				OT. There is a gap in
				service provision. How
				would this affect MCH
				School nursing emotional
				wellbeing service? Would
				we be part of this? Part 3
				Taking this forward will
				require robust governance.
				There is a lot of reference
				to ASD being above the
				national average. Do we
				have figures for the
				numbers of ASD under
				11years diagnosed per
				year. There is a lack of
				clarity regarding
				information on both ASD
				and ADHD and to move

	forwards we need a sound benchmark. The reference to Big and Little builders stating that these are run by HV is incorrect. They are supported by HV but they are run by Early Years Medway Council staff. The importance of this is that this is a joint initiative and should either party not be able to provide the service the groups will not exists. There is reference on page 6 to an open referral system. There is now a single point of access to all services whether by email or telephone together with an open referral service and pathways for ADHD and ASD. The open referral system is for all services in MCH