IMPROVING LIVES SELECT COMMISSION
Tuesday 9 June 2026

Present:- Councillor Monk (in the Chair); Councillors Adair, Blackham, Bower, Clarke, T. Collingham, Elliott, Fisher, Garnett, Harper, Hughes, Sutton, Ms. L. Hickey, Mr. M. Hemmingway and Mr. J. Newman.

Apologies for absence:- Apologies were received from Councillors Bennett-Sylvester, Currie, Ismail, Pitchley and Ryalls.

Also in attendance were:-

Councillor V. Cusworth, Deputy Leader and Cabinet Member
Mr. N. Devlin, Service Director for Education and Inclusion
Mr. J. Edwards, Chief Executive
Mr. P. Horsfield, Monitoring Officer
Mr. C. MacDonald, Head of Safeguarding
Councillor B. Steele, Chair of the Overview and Scrutiny Management Board
Mrs. K. White, Service Director for Family Help

The webcast of the Council Meeting can be viewed at:-
https://rotherham.public-i.tv/core/portal/home

1. MINUTES OF THE PREVIOUS MEETING

Resolved:- That the minutes of the meeting of the Improving Lives Select Commission, held on 28th April, 2026 be approved as a correct record of proceedings.

2. DECLARATIONS OF INTEREST

There were no declarations of interest.

3. EXCLUSION OF THE PRESS AND PUBLIC

There were no items of business on the agenda that required the exclusion of the press and public from the meeting.

4. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or press.

5. HEALTH, WELFARE AND SAFETY PANEL - REPRESENTATIVE FROM IMPROVING LIVES SELECT COMMISSION

Consideration was given to the request to nominate one representative to sit as a member of the Health, Welfare and Safety Panel for 2026/27 on behalf of Improving Lives Select Commission.

Resolved:- That Councillor Garnett be appointed as the representative on the Health, Welfare and Safety Panel for 2026/27.

6. CORPORATE PARENTING PARTNERSHIP BOARD UPDATE

Councillor Sutton, Vice-Chair, provided an overview of the last meeting of the Corporate Parenting Partnership Board held on 5th May, 2026.

It was noted that the Board was updated on the forward plan and proposed 2026/27 work programme, noting that all outstanding actions related to newer workstreams were progressing well. Work had commenced on refreshing the 2027–2032 Corporate Parenting Strategy, with members and officers working collaboratively.

An update was also provided on the in-house residential care programme, which aimed to deliver safe, stable homes for children within their communities. Progress included operational homes rated good or better by Ofsted, alongside developments in registration and construction. Recruitment remained a priority, with 21 appointments made since January, supported by a refreshed training offer. However, challenges persisted in recruiting Registered Managers, reflecting a national issue.

Performance updates highlighted strong education outcomes for children in care, while timeliness of health assessments on entry to care remained an area of focus. Progress against the action plan showed that 39 of 42 actions were complete or on track, with delays in three areas considered reasonable and appropriately managed.

Updates were also provided on health-related priorities, including improving access to health information for children in care and care leavers. While an app-based solution had been requested, this presented information governance challenges, and alternative options such as the NHS app were being explored.
The Board received updates on the work of 'In Care Youth' in supporting the health theme, as well as upcoming activities for Foster Care Fortnight.

The next meeting of the Corporate Parenting Partnership Board was scheduled for 30 June, 2026 and an update would be provided to Improving Lives in due course.

Resolved:- That the update be received and the contents noted.

7. UPDATE ON KINSHIP LOCAL OFFER

Further to Minute No. 5 of the meeting of Improving Lives Select Commission held on 17th June, 2025, consideration was given to the report that detailed how in July 2025, Cabinet approved the publication of the Council's Kinship Local Offer which was adapted to be an interactive, online offer which was made available online in October 2025.

This update, therefore, outlined the progress in developing and implementing the Kinship Local Offer to date.

Councillor Cusworth, Cabinet Member and Deputy Leader, introduced the report and highlighted how the number of kinship carers had been increasing and this update had been brought forward for scrutiny, which had shown a strong interest in this area. It had become an increasingly important aspect of how children were cared for, with a focus on keeping them within their families wherever possible.

This approach had been supported primarily through family group conferencing and the provision of early intervention and additional support. Where it had been necessary for children to be removed from their birth parents, efforts had been made to ensure they could remain within their wider family network.

By way of a presentation Chris MacDonald, Head of Safeguarding, shared with the Commission:-

- Kinship Local Offer and DfE definition of Kinship Care.
- RMBC's Kinship Local Offer.
- Kinship Local Offer and what was included.
- Role of the Kinship Care Delivery Group.
- Membership of the Kinship Care Delivery Group.
- Progress of the Kinship Local Offer to date.
- Expectations of the Kinship Local Offer over the next twelve months.

A discussion and answer session ensued with Improving Lives Members and the following issues were raised and clarified:-

- When introducing a new offer, regardless of how many years the programme had been running, how did the service ensure it reached people who have been involved for longer, such as those participating since 2020 or 2021? Were these carers offered the same level of support as someone joining this week, or were they not revisited. Also in terms of financial support, was there a difference between an accredited foster carer and, for example, grandparents caring for a child or was the financial support consistent across both groups.

  The Deputy Leader pointed out that Kinship care had always existed, with pathways allowing carers to become temporary foster carers, be formally approved, or transition to a special guardianship order, after which social care typically stepped back. Support had always been available, as these arrangements were longstanding, often occurring informally within families.

  Efforts had been made to strengthen and promote this support, particularly to reach individuals already acting as kinship carers who might not identify as such. Outreach through GP surgeries, libraries

and community spaces aimed to raise awareness, including among those in private family arrangements, that support was now a statutory duty of the authority. Increased promotion, including support from Elected Members in sharing information locally, was seen as key to extending this reach.

The Head of Safeguarding also reiterated that where a Special Guardianship Order had been made, which accounted for a significant proportion of kinship carers, the local authority had always been involved and, therefore, maintained records, including annual check-ins even where orders had been granted many years earlier. The main challenge had been reaching those who had never had contact with services and did not identify themselves as kinship carers, despite being equally entitled to support regardless of when their caring role began.

Financial support was not simple. Typically, carers had first been approved as foster carers and received a fostering allowance, which continued for at least two years after becoming special guardians. After this point, allowances had generally become means tested, often remaining at a core level, but subject to adjustment. Where individuals had not previously been foster carers, allowances could still be provided if the child would otherwise have entered care, though these were usually means tested from the outset. In cases where there had been no safeguarding concerns, financial support had not always been applicable, but the authority had maintained a duty to ensure carers could access all other entitlements available to them.

- Could further detail be provided on how the available support had helped families decide which option was most appropriate for them, particularly in light of the financial implications

  The Head of Safeguarding confirmed that within the Kinship Local Offer, there had been several ways for carers to access independent advice alongside support from navigators, who explained the offer in detail and helped them understand its different elements. Carers had also been signposted to independent organisations, particularly charities such as Kinship and the Family Rights Group, both of which provided helplines and impartial guidance.

  In addition, where the authority had been recommending a legal arrangement, such as a Special Guardianship Order or a Child Arrangements Order, it had funded independent legal advice for kinship carers. This ensured they fully understood their options, including the financial implications and differences in allowances associated with each route.

- Looking ahead over the next twelve months and, when the twelve-monthly check-ins were mentioned, it had seemed like quite a

long interval given how much a child's circumstances and development could change in that time, particularly if barriers were not identified early.

This had also raised questions about the parental support offer, specifically whether training was compulsory for those new to parenting. There had been a concern about how potential vulnerability was managed during those early stages and what oversight and safeguards had been in place to ensure both the child and the kinship carer were adequately supported.

The Head of Safeguarding explained how the vast majority of kinship arrangements had been assessed from the outset by the local authority or CAFCASS, with robust scrutiny required by the courts before any order was made. This had often included fostering assessments and resulted in a statutory support plan, alongside access to independent legal advice. Additional oversight had been provided by a children's guardian, ensuring decisions were thoroughly reviewed.

Kinship carers had, therefore, been made aware of their rights, entitlements and how to access support, with multi-agency involvement continuing through and shortly after proceedings to help establish arrangements. Schools, health service, and other professionals had also been informed to identify and respond to emerging needs.

Support programmes had been encouraged, and where needs had been identified, participation could influence assessment outcomes. While annual check-ins had been a baseline, support had operated on a need basis, with some families receiving more frequent contact depending on their circumstances and emerging needs.

- How many people were the local authority supporting and how many individuals were receiving kinship services.

The Head of Safeguarding confirmed there had been an estimated 600 to 700 children in kinship arrangements in Rotherham, noting that some informal arrangements remained unknown. As some children were in sibling groups, the number of kinship carers themselves had been lower.

At any one time, around 150 families had been receiving support across a continuum of services, ranging from advice via kinship navigators and support groups to more intensive provision such as the Empower service, depending on individual needs.

- If a child was actually adopted by a grandparent, did this take them outside the scope of the support?

The Head of Safeguarding confirmed adopters and mainstream professional arrangements were excluded from this definition. In law, once an adoption order was made, the adopter became the child's legal parent, meaning they were no longer recognised in their previous family role (such as a grandparent). As a result, adoption by family members was extremely rare, as it legally replaced the child's parents.

More commonly, a Special Guardianship Order had been used instead, although people sometimes informally described these arrangements as adoption.

The Deputy Leader also reiterated parents held parental responsibility for their children. Where children were removed and subject to a care order, parental responsibility transferred to the local authority, which was why they were considered in care children. Throughout fostering and kinship care arrangements, parental responsibility remained with the authority. If a child was adopted, then parental responsibility transferred fully to the adopters.

The Head of Safeguarding again pointed out parents had retained parental responsibility, though there had been checks and balances on how it could be exercised, including under Special Guardianship Orders. Adoption orders had been the only route to fully extinguish parental responsibility.

For this reason, adoption by close biological relatives, such as grandparents, had been extremely rare, with Special Guardianship Orders far more commonly used, although adoption by more distant connections, such as family friends, had happened occasionally.

- Kinship care had been considered the most appropriate option, as it enabled children to remain within a familiar and safe family environment.

  This raised questions about financial allowances. As these were set by Government frameworks, it was unclear to what extent the local authority could adjust them. Given that kinship care was often the most beneficial and cost-effective option for ensuring a child's wellbeing, it prompted consideration of whether more flexibility in means tested support could better reflect that value.

  The Head of Safeguarding explained the allowance framework had been based on a Government-published means testing model, which, while not mandatory, had been widely adopted by most local authorities following Ombudsman decisions. Locally, the same model had been applied.

  Although offering a non-means tested allowance had not been a legal requirement, it had been strongly encouraged in statutory

guidance. The local offer had, in some respects, been more generous than others, recognising the importance of maintaining stable kinship arrangements and avoiding breakdown due to financial pressures. Financial difficulties reported by kinship carers had been closely monitored.

However, statutory guidance had also required responsible use of public funds, including the application of means testing. At the time, the Government had been piloting “kinship zones,” exploring non-means tested allowances, with findings expected to inform any future changes to national policy.

- f a child had been in these arrangements, they had not always been seen regularly by a social worker in the same way as a child in full foster care. This raised the question of what level of oversight and support had been in place. In some cases, support had been provided through social workers where appropriate, alongside other services, to ensure the child and carer received the help they needed.

  The Head of Safeguarding further reiterated that for special guardianship or child arrangements orders, as well as fostering, there had been a rigorous assessment process involving social workers, and often a supervising social worker and a CAFCASS guardian, with final approval by the courts.

  This had ensured a strong balance between identifying any vulnerabilities and recognising that children generally thrived in kinship care. Support plans had set out the level of involvement, but once an order was made, families had typically been expected to parent independently and seek support when needed, rather than receive ongoing mandated social work visits.

  In cases where additional support was required, the court could require continued involvement, and some families had received ongoing social work support for a period. However, orders had generally only been made where it was assessed that long-term statutory intervention would not be necessary.

  The Deputy Leader emphasised that under the previous route, including temporary fostering and Regulation 24 arrangements, regular contact had typically ended once a Special Guardianship Order was made. This had reflected a careful balance, as many kinship carers had preferred greater independence after assessment and approval, distinguishing their role from fostering.

  Consultation had shown concerns that requiring the same level of ongoing social work involvement as foster carers might deter people from becoming kinship carers in the first place.

- The report had referenced recruitment challenges for kinship navigators, which had also been highlighted in earlier responses. What had the current capacity been and had this impacted the level of support available to families.

  The Head of Safeguarding was pleased to report the service had been fully established, though early challenges had arisen due to the small size of the team, leading to some delays when recruitment was ongoing. Despite this, the overall offer had not been compromised, as support had been maintained through the wider team to ensure prompt responses and access to help.

  The model had been designed so that kinship navigators acted as an initial point of contact, identifying needs and either offering direct support or signposting to appropriate services. Where more complex needs had been identified, cases had been escalated to family support workers or social workers, ensuring families received the right level of support throughout.

  The Deputy Leader also felt it worth noting that much of the workforce was relatively new, reflecting recent developments from the Department for Education. Roles linked to programmes such as residential care had expanded significantly compared to a decade earlier, when provision had been very limited across most authorities.

  As these services had grown nationally, recruitment had drawn from an emerging and still-developing workforce. This had not been unique to Rotherham, with similar challenges seen elsewhere, often requiring investment in training and development to build capacity where experienced staff had previously moved into other sectors.

- How had the kinship service been promoted, particularly in situations where changes in a child's living arrangements might go unnoticed. It was asked whether any training or awareness sessions had been delivered to schools, given that teachers were often the first to identify changes in a child's circumstances.

  The Head of Safeguarding confirmed awareness and promotion had been delivered through safeguarding forums attended by representatives from all schools, alongside briefings for Head Teachers and wider Council sessions to reach other services such as Housing. Through this, it had been ensured that schools were aware of the Kinship Local Offer.

  Ongoing promotion had been supported by the Education Safeguarding Lead and the Kinship Care Delivery Group.

  In addition, a developing training programme had aimed to build kinship awareness across the wider workforce, with targeted

sessions for schools, health visitors and other frontline professionals likely to encounter kinship arrangements

- As support groups expanded beyond central Rotherham into local wards, had members been notified and involved. It had also highlighted the potential use of community leadership funding in supporting these groups, such as funding activities, trips, or resources to help establish and sustain provision within local areas.

  The Head of Safeguarding welcomed this approach and would look to see how potential notifications could be expanded.

- How could family members obtain support when they had unexpectedly taken on care of a child and was there contact points for someone in that situation needing to seek help.

  The Head of Safeguarding confirmed details were readily available and would share some information after the meeting.

- How confident were the service that this work had reduced the likelihood of children entering the care system.

  The Head of Safeguarding was confident that the work had reduced the likelihood of children entering care. There had long been an emphasis on finding family arrangements where appropriate, supported by a strong evidence base and this had led to a trend of fewer children entering care and more entering kinship arrangements.

  The availability of a comprehensive support package had also been key, enabling more kinship placements to be sustained successfully. In some cases, this level of support had made the difference in choosing kinship care over formal care, whereas other authorities without similar provision might have had no option but to place children into care.

  The Service Director for Family Help further pointed out there had been a gradual and sustained reduction in the number of children in care over several years, driven by deliberate and sustained effort. This had included reviewing long-term cases to support children returning to family where appropriate, while also strengthening early intervention to prevent children entering care in the first place.

  A strong focus had been placed on engaging wider family networks early on, alongside developing support through family hubs and early help services to prevent crises. This more holistic approach had enabled greater use of kinship arrangements, including flexible support from extended family members.

Overall, combining early intervention, family network involvement and targeted support had helped safely reduce the number of children in care while ensuring those who did enter care were in the most appropriate arrangements.

Furthermore the Deputy Leader explained family group conferencing and wider family networking had been established for many years, with investment made around 2017–2018 as part of an “invest to save” approach in response to rising numbers of children entering care. This early focus on exploring family networks had placed the authority in a strong position to develop its kinship offer, likely resulting in higher levels of kinship arrangements than in many other areas.

This approach had been recognised by Ofsted, who noted that kinship carers were often identified early through strong relational work and network mapping, meaning suitability assessments were frequently completed before children needed to be removed from their parents. Overall, this demonstrated that the authority had been ahead of the curve in this area.

- How many carers had been offered trauma and attachment training, what proportion this represented and how many had taken it up. In addition, what actions had been taken to maximise participation, given the recognised benefits of this training.

The Head of Safeguarding was unable to confirm the exact ratio, but confirmed uptake was understood to be good. He gave an undertaking to provide further information on the uptake of trauma training for Kinship Carers, the numbers offered, percentage of take up and any feedback when take up was declined.

It was also noted that to maximise participation, an automatic notification system had ensured all eligible kinship carers were identified and offered the training. For those in Regulation 24 arrangements, the training had been strongly encouraged and effectively required as part of their assessment, delivered through a tailored programme rather than standard fostering training.

For other carers, the offer had been actively promoted through direct contact and collaboration with supervising teams, ensuring opportunities were consistently highlighted and not missed.

The Deputy Leader also confirmed Empower, previously the therapeutic team under different names, had been a strong part of the offer, helping to attract and support both mainstream and kinship carers. Its focus on trauma and attachment, particularly for younger children, had ensured carers understood potential needs even before they became evident.

This approach had provided a robust and supportive model, acting as a safety net to help prevent children and carers from falling through gaps in support.

- What support is given to foster carers when the children could fall into special needs?

  The Head of Safeguarding confirmed there had been several coordinated strands of work through the delivery group. Kinship navigators had been managed within an education-linked role, ensuring strong connections with schools from the outset. As a result, education needs had been considered early whenever families engaged with the service.

  Support had then been tailored to need, drawing on early help teams, school inclusion services, outreach support and specialist teaching. Strong links with schools had been maintained and navigators had been supported through training and induction to build understanding of school responsibilities and to promote a graduated approach to meeting children's needs.

  The Deputy Leader also pointed out that children had been supported through the Virtual School, which had performed strongly. Each child had a Personal Education Plan, with generally positive outcomes.

  Previous attachment training delivered to schools had shown wider benefits across the whole school environment, not just for individual children. This had been complemented by close multi-agency working, including the Children's Disability Team, which had strengthened support through shared information and coordination.

  In addition, short break provision at Liberty House had offered carers respite, providing further practical support.

The Chair thanked everyone involved for this very informative discussion.

Resolved:- (1) That the progress made in developing and implementing the Kinship Local Offer be noted.

(2) That consideration be given to including notifications to Ward Members and aiding via Community Leadership Funds when Support Groups were expanded into local areas.

(3) That further information be sought on the uptake of trauma training for Kinship Carers, the numbers offered, percentage of take up and any feedback when take up was declined.

8. EXPERTS AT HAND (EAH) - ROTHERHAM SEND REFORM AND INCLUSION MODEL

Consideration was given to the report which detailed how the School's White paper (2026) required all Councils to build an Experts at Hand (EAH) multi-disciplinary teams for children and young people aged 0 to 25 years of age. The EAH teams should include educational psychologists, specialist teachers, speech and language therapists, occupational therapists and local special schools. This report, therefore, provided an overview of the development and implementation of the EAH model in Rotherham as part of the local SEND reform programme.

Councillor Cusworth, Cabinet Member and Deputy Leader, introduced the report and highlighted how the proposed changes represented a significant shift in how children and young people with special educational needs and disabilities were supported and that there had been considerable discussion on this nationally.

Reference was made to representation on the LGA Children and Families Committee, which had enabled engagement with ministers during the consultation process and the opportunity to provide feedback, including on workforce challenges. This was seen as beneficial in informing local understanding, with relevant updates being shared where appropriate.

It was explained that the model focused on early intervention, ensuring that schools and settings could access the right expertise at the right time, preventing needs from escalating. Through a coordinated, multi-disciplinary approach involving education and health professionals, the aim was to strengthen inclusive practice in mainstream settings, improve consistency of support, and achieve better outcomes for children and families.

It was emphasised that the model was not intended to replace existing services, but to enhance them by adding an additional layer of support. This would help schools build confidence, capability and capacity enabling more children to thrive within their local school communities.

The report set out the overall ambition and outlined a phased approach to implementation, allowing for targeted support while enabling learning and refinement over time. It was also noted that significant work had already been undertaken in Rotherham to improve accessibility and inclusion, including investment in resource bases and early years support following the SEND inspection. The additional support from the new model would further strengthen this provision through enhanced professional input into schools.

By way of a presentation Niall Devlin, Service Director for Education and Inclusion, shared with the Commission:-

- Purpose of the report.
- An overview of the Experts at Hand (EAH) model.
- Rationale for SEND system reform.
- How the model will work in Rotherham.
- Expected impact on inclusion and outcomes.
- Feedback on implementation approach.
- National and Rotherham Context.
- SEND system reform set out in Schools White Paper (2026).
- Introduction of national Experts at Hand model.
- £1.8 billion investment over three years.
- Focus on early intervention and mainstream inclusion.
- Existing strong universal SEND support infrastructure.
- Includes education, health and specialist services.
- Access to support is uneven.
- Capacity often focused on statutory activity.
- Limited early intervention in some areas.
- Current System Challenges.
- Capacity tied up in statutory processes.
- Variability in early intervention.
- Reliance on traded services.
- Reduced support post-16.
- Imbalance across phases.
- Too much reactive support at point of crisis.
- Not enough early, preventative intervention.
- Inequitable access to specialist expertise.
- Pressure on EHCP's and specialist placements.
- Need to strengthen mainstream inclusion.
- Experts at Hand and what it was.
- A non-statutory, consultation-based model
- Provides access to multidisciplinary expertise.
- Focus on whole-setting improvement.
- Additional to existing SEND services
- Does not replace statutory duties.
- Multidisciplinary Teams of Educational Psychologists, Specialist Teachers, Speech and Language Therapists and Occupational Therapists.
- Integrated, coordinated delivery model.
- Core Model Principles.
- Early intervention.
- Whole-setting approach.
- Workforce development.
- Consultation rather than referral.
- Focus on capacity building in schools .
- Consultation with education settings.
- Staff training and development.
- Coaching and modelling of practice.
- Advice on adapting environments and teaching.

- Ongoing follow-up and review.
- How the EAH model would work and expected outcomes.
- What Expected Impact and System-Level Impact EAH would make.
- Improving Lives consideration whether the phased approach was right for Rotherham?
- Whether to prioritise highest need or universal access
- Whether to manage fairness and expectations in year one.
- Any risks or unintended consequences needed to be addressed?

The Deputy Leader pointed out that these proposals represented the most significant changes to children's education reforms in many years. While Rotherham was considered to be in a strong position, it was acknowledged that there remained substantial work to be undertaken, particularly in the context of wider national challenges within the SEND system.

It was recognised that the volume and pace of guidance issued by the Department for Education had been considerable, requiring significant time to interpret and implement and that some elements appeared complex or, at times, inconsistent.

The approach was likened to the "Me in Mind" model, emphasising a whole-school approach to inclusion and support.

It was suggested that Improving Lives may benefit from visiting specialist provisions at some point, particularly in early years settings, to better understand how funding had been utilised through accessibility improvements and resource bases and to provide practical context to the developments being discussed.

A discussion and answer session ensued with Improving Lives Members and the following issues were raised and clarified:-

- Clarity was sought regarding the proposed timeline, noting that the phased approach currently appeared unclear.

  The Service Director for Education and Inclusion explained that, alongside this work, a SEND Reform Plan was being developed in response to a Department for Education requirement to submit a three-year strategy by 19 June. This plan would set out how SEND provision would be shaped over that period.

  It was noted that funding for the "Expert at Hand" model was expected imminently, with an expectation that initial rollout would begin from September. In preparation, steps had already been taken to recruit additional specialist teachers and to review the deployment of educational psychology resources. Work had also been undertaken with health partners to explore access to speech and language therapy provision, with contingency arrangements being considered if required.

It was highlighted that, although the plan covered the period from April 2026 to April 2027, implementation timelines were compressed, with monitoring scheduled for January 2027 before full feedback on the plan was expected.

In response to the question, it was confirmed that a deliverable initial phase would be implemented from September 2026, with the aim of the full “Expert at Hand” model being operational by September 2027.

- In relation to the options presented, whether options one and four overlapped. It was suggested that, while option four referred to a data-led approach, the data would already be informing the priorities identified under option one. A further point was raised regarding early intervention, with a request for clarification on how the success of early intervention measures would be assessed. It was noted that, while the term was widely used, there was a need to define what constituted “early” in practice. Concern was also expressed about how parental expectations would be managed, particularly where improvements may not be realised as quickly as parents might anticipate.

  The Service Director for Education and Inclusion emphasised that an “Expert at Hand” model would need to be both data-led and informed by professional judgement, with an appropriate balance between the two approaches. While option four described a fully data-driven model and option one a more practitioner-led approach, it was acknowledged that data would need to underpin decision-making in all cases.

  It was noted that further development of data models would be required. Measures of success had been identified within the SEND Reform Plan, including an increase in the proportion of children supported at SEND Support level rather than through EHCP’s, reductions in suspensions and exclusions, improved attendance among children with SEND and a decrease in elective home education.

  It was highlighted that progress would be assessed against a range of KPIs at the first monitoring meeting in January, 2027.

  It was also acknowledged that, in the short term, the number of EHCP’s may rise due to parental concerns and a desire to secure access to resources and specialist provision, despite assurances that existing support arrangements would not be withdrawn.

- Concern was raised regarding the interface between the service and schools, particularly the reliance on schools to identify and request support. It was noted that some academies may be reluctant to seek

assistance, as this could be perceived as a sign of failure, despite the need for support.

It was also highlighted that, given the number of academies and differences in resources, some schools might be more likely to pursue EHCP's due to associated funding implications.

Clarification was also sought on how these challenges would be managed, including how schools would be encouraged to engage with the model where there may be perceived disadvantages and how the transition would be effectively supported.

The Deputy Leader suggested that schools would be likely to welcome additional support that did not place further pressure on their budgets. It was noted that, while schools received funding for EHCP's, these often required additional resources, meaning they were not always financially advantageous.

Reference was made to the "Me in Mind" programme, which had achieved approximately 90% uptake across the borough since its phased introduction from 2016–17, demonstrating schools' willingness to engage with similar initiatives.

Furthermore, relationships with schools across Rotherham were strong, including with academies and that there were no significant concerns regarding engagement. These relationships had been further strengthened during the pandemic, when support from the Council's education team helped to build and reinforce effective partnerships.

Overall, it was considered that schools would be receptive to the proposed model and likely to engage positively with its implementation.

The Service Director for Education and Inclusion noted that these concerns were recognised at a national level and that the Department for Education was exploring reforms to school funding. This included modelling options to redistribute high needs funding directly to schools through a formula-based approach, with longer-term proposals indicating that Councils may no longer retain responsibility for high needs block funding from around 2028–29.

It was reported that further work was ongoing to consider clustering arrangements and financial mechanisms to support this transition. However, it was acknowledged that these changes remained some years away, while the "Expert at Hand" model needed to be implemented in the immediate term. As a result, growth in EHCP's was expected to continue in the short term.

In response to concerns about school engagement, it was reiterated that the majority of schools had strong, constructive relationships with the Council and were likely to engage positively. It was added that, where issues were not directly raised by schools, these could be identified through data monitoring, enabling early intervention and direct engagement where needed.

- Clarification was sought on how it would be assessed whether the advice or training provided translated into meaningful change within the classroom environment. It was noted that, in many schools, the SENCO could act as a bottleneck for training delivery and may not always have the capacity to cascade learning effectively to all staff.
The Service Director for Education and Inclusion acknowledged that a strong offer of support was already in place for SENCOs, including network meetings, training, and provision, with training having been made free over the previous two years to remove barriers.

  However, it was recognised that a key challenge was ensuring that training translated into effective practice within the classroom. It was emphasised that the "Expert at Hand" model addressed this by providing ongoing engagement rather than one-off interventions, including follow-up support, learning reviews and regular contact from specialist staff.

  It was further noted that impact would be monitored through termly engagement and strengthened data collection, supported by key performance indicators. Regular reporting to the Department for Education would ensure accountability and provide assurance that the significant investment was delivering measurable outcomes.

  It was confirmed that the approach applied to all school staff who engaged with children, including classroom staff. It was noted that support would be targeted according to identified needs, including issues such as behaviour, exclusion, or engagement.

  Unlike previous arrangements which focused primarily on children with Education, Health and Care Plans, this model extended beyond that group. While existing support for those children would remain in place, the new provision was intended to support a broader cohort.

- What safeguards would stop this becoming another referral system rather than an early intervention?

  The Service Director for Education and Inclusion pointed that a key challenge was shifting schools' understanding from a system focused on individual referrals to one based on wider, system-level support. To address this, investment had been made in dedicated engagement activity, including meetings with school leaders and practitioners to help embed this change.

It was recognised that this represented a significant cultural shift, with funding now directed towards early years, schools and post-16 settings, rather than solely individual children. This also marked a change in emphasis, with increased priority given to early years and further education provision.

It was reported that, alongside updates to documentation and the local offer, a programme of engagement and training events would be delivered to ensure schools and partners understood the new "Expert at Hand" model and how it would operate from September onwards.

- Early intervention included nursery provision, representing the earliest opportunity to provide support. It was acknowledged that references to "schools" should be understood to include early years settings. Increased priority was now being given to early years and post-16 provision, although concerns were raised about workforce challenges within nurseries, including recruitment and retention, particularly given that many providers were privately operated. Clarification was, therefore, sought on the extent to which nurseries would benefit from the model and what support could be offered by the Council, given their independent status.

  Questions were also raised regarding the role of Education, Health and Care Plans including whether there was a national intention to reduce reliance on them and how the new model would operate alongside existing arrangements. Was the approach intended purely as an additional layer of support or also as a means of managing demand and associated costs, particularly in the context of early years provision.

  The Deputy Leader reiterated the work on SEND sufficiency had begun around 2018, following a positive Ofsted judgement, and had continued through subsequent phases after 2021. However, significant challenges in SEND remained, particularly following the issuing of a Written Statement of Action.

  It was explained that a stronger focus on early years had developed, influenced by training and evidence highlighting the importance of early intervention, particularly for children aged 0–5. In response, an Early Years Education Strategy had been developed, which had been recognised nationally as best practice by the LGA.

  It was noted that early years provision had since become a key priority within the borough, supported by improved leadership and a strengthened focus on education. Work was ongoing to meet statutory sufficiency requirements, expand workforce capacity, and respond to changes in entitlements.

It was acknowledged that, while activity could appear fragmented, a range of co-ordinated initiatives were in place across different age groups and stages, all contributing to an overarching strategy focused on improving outcomes, including achieving a good level of development in early years.

The Service Director for Education and Inclusion went on to report It was reported that early years provision had become more prominent over the previous twelve months, driven in part by the introduction of national targets for achieving a Good Level of Development, with a local target set at approximately 73%.

Reference was also made to the Best Start Plan, which provided the closest framework to a strategic approach for improving early years outcomes.

It was noted that the local early years landscape comprised maintained nursery schools, childminders, and a large number of private, voluntary and independent (PVI) providers. Performance was strong overall, with around 99% of PVIs rated good or outstanding by Ofsted and support arrangements were in place to address areas of concern where required.
Support for children with SEND in early years settings was delivered through mechanisms such as the Early Years Inclusion Fund, alongside specialist teacher input, enabling timely provision based on assessed need.

It was explained that the “Expert at Hand” model would build on existing early years support and include additional capacity, in line with Department for Education expectations.

Furthermore, the wider reforms aimed to reduce reliance on Education, Health and Care Plans by providing earlier, more accessible support within mainstream settings, while still maintaining specialist provision where needed.

- Concern was raised about the ongoing provision for individual children requiring one-to-one support, particularly in relation to waiting times for services such as speech and language therapy, educational psychology, and neurodevelopmental assessments.

  The Deputy Leader confirmed that existing services and entitlements would remain in place, and that the new model would not replace direct work with individual children. While waiting times for some assessments, particularly autism and ADHD diagnoses, had been lengthy, these had reduced over time, although pressures remained.

  The Service Director for Education and Inclusion emphasised that the “Expert at Hand” model was intended to complement existing provision by building capacity within schools. This included

supporting staff to deliver interventions, enabling more frequent and consistent support for children while awaiting specialist input.

Overall, the approach aimed to mitigate the impact of waiting times by ensuring that appropriate support could begin earlier, rather than relying solely on access to specialist services.

Concern was also expressed about the potential for substituting specialist professionals with lower-paid staff, noting that teaching assistants were not trained to deliver the same level of support as qualified practitioners such as speech and language therapists.

It was highlighted that children requiring specialist intervention should receive it directly from appropriately trained professionals and that there were also workforce implications, with staff potentially being asked to undertake responsibilities beyond their training and pay grade.
Assurance was sought regarding how the quality and effectiveness of such support would be monitored, and whether sufficient oversight would be in place to ensure that children were receiving the level of support they required.

The Deputy Leader further confirmed that children requiring speech and language therapy would continue to receive this through existing specialist services.

The model focused on enhancing the wider classroom environment through approaches that supported communication, such as increased visual use of vocabulary. This would benefit both children receiving specialist input and those who did not meet referral thresholds, but could still benefit from inclusive practices.

It was noted that school staff, including higher-level teaching assistants where appropriate, would deliver structured support within classrooms as part of planned approaches, rather than replacing specialist roles. Examples were given of whole-school initiatives, such as emotional wellbeing programmes and trauma-informed practices, which supported all children.

It was emphasised that the intention was not to replace specialists with lower-cost alternatives, but to complement existing provision and improve overall inclusion. Specialist support would remain in place for those children who required it, including access to special school placements where appropriate, while enabling more children to be supported effectively within their local school communities.

The Service Director agreed that specialist roles, such as educational psychologists and speech and language therapists, would not be replaced and that their expertise remained essential.

Assessments carried out by specialists would identify specific needs, such as limitations in receptive or expressive language, including the number of words or information a child could process.

School staff would then use this professional advice to adapt teaching and support strategies within the classroom. This included translating technical recommendations into practical interventions, such as structured activities, visual aids and communication supports, enabling children to practise and develop their skills in everyday learning.

This approach focused on embedding specialist guidance into classroom practice, allowing children to access learning more effectively and engage with lessons with the appropriate level of support.

- Clarification was also sought on the extent to which the “Expert at Hand” offer would free up the existing Specialist Inclusion Team (SIT) capacity for individual screenings and child-led work.

  The Service Director for Education and Inclusion confirmed that this additional capacity within the system would enable specialist teachers, educational psychologists and speech and language therapists to focus more on individual work, as they would no longer be required to divide their time between two different roles.

- Observing from both a parental and governance perspective, it was asked whether a focused or light-touch approach was adopted, effective stakeholder engagement with parents would be essential. Concern was raised that perceived inconsistencies in support between schools could lead to dissatisfaction among parents, highlighting the need for strong and consistent communication.

  It was suggested that a significant level of community engagement through schools would be required to support implementation and for those with reservations about a whole-school approach, positive outcomes had already been demonstrated through programmes such as “Me in Mind,” including a reduction in short-term suspensions, illustrating the potential benefits of this approach.

  The Deputy Leader was keen to point out that engagement with the Rotherham Parent Carer Forum would support effective communication with parents and help address potential concerns. It was suggested that highlighting the broader picture across the borough, including previous investment through accessibility funding and resource hubs, may help manage expectations.

It was also recognised that provision would not stand still, and that, as with other initiatives such as “Me in Mind”, implementation could be delivered in phases, allowing opportunities for wider rollout over time.

Furthermore the approach would require a high level of engagement and effective communication to bring parents on board. It was suggested that further discussions would be needed with the Parent Carer Forum and with schools to consider how best to engage with parents and ensure that unnecessary barriers were avoided.

- Concern was raised about how inclusion would be measured and whether the approach would genuinely improve outcomes for children, rather than simply maintaining placement in mainstream settings without appropriate support or discouraging EHCP’s.

  The Service Director for Education and Inclusion emphasised that parental choice remained a key safeguard, with a continued need to ensure that parents retained a meaningful role in decisions about their child’s education.

  It was noted that national policy was seeking to rebalance provision towards mainstream education, while maintaining assurances that no child would be required to leave a special school or have their EHCP removed. It was also acknowledged that plans for additional special school places would require strong justification, reflecting this shift in emphasis.

  It was highlighted that a balanced system would continue to be required, incorporating mainstream provision, specialist settings, and inclusion units. Investment in local provision, including funding for inclusion bases, was intended to strengthen support within mainstream schools.

  Children should be educated within their local communities alongside their peers, while recognising that some children would continue to require specialist settings with access to highly trained staff and specialist facilities.

- Concern was raised about how the changes would be mapped and monitored to ensure that no children were missed or unintentionally displaced during the transition.

  Clarification was also sought on how a comprehensive overview would be maintained, particularly in relation to children with potential or pending EHCP’s and how decisions would be informed at a system level rather than solely on an individual basis.

The Deputy Leader confirmed that systems were already in place to track and monitor children with additional needs, including those with EHCP's and those supported within mainstream and resource base settings. However, it was acknowledged that maintaining this level of oversight during the transition would present capacity challenges.

The Service Director for Education and Inclusion further explained that effectiveness would be assessed through key indicators, including attendance, exclusions, elective home education and emotional wellbeing. These measures would help determine whether the reforms were reducing barriers or, conversely, highlighting areas where the system was not working effectively.

It was recognised that high rates of exclusion and absence among children with SEND indicated the need for change. Monitoring arrangements, including defined targets, had been built into the SEND Reform Plan, and progress would be tracked and reviewed to assess overall system impact.

- Were the Head Teachers of all schools aware of this new initiative?

The Deputy Leader confirmed most schools already had some awareness of the reforms, given the level of national coverage and anticipation. Reference was made to the earlier SEND Green Paper, which had not progressed, contributing to uncertainty within the sector.

It was recognised that schools were under increasing pressure and in need of additional support and were, therefore, closely monitoring developments. Guidance from the Department for Education had been issued incrementally, at times frequently, and schools were actively keeping informed while awaiting greater clarity on implementation.

The Service Director for Education and Inclusion pointed out that while full operational details of how the model would function in practice were still being developed, initial engagement with schools had already taken place.

A survey had been issued to all Head Teachers as part of a maturity assessment process and feedback had been gathered. Presentations had been delivered to primary Head Teachers, outlining the "Expert at Hand" model and the SEND Reform Plan, with further engagement scheduled with secondary Head Teachers.

Updates had also been shared through the Schools Forum and the Rotherham Education Partnership, including dedicated sessions focused on the reforms.

It was recognised that awareness would vary and,, therefore a programme of ongoing engagement was planned from September, including further meetings with Head Teachers and school staff to ensure understanding of the model and its implementation.

The Service Director for Education and Inclusion took the opportunity to thank members of Improving Lives for their contributions and questions raised which had helped to bring greater clarity and focus to the proposals. Key areas identified for further development included strengthening the emphasis on early years, improving the use and alignment of data, enhancing parental engagement, and refining communications to ensure clearer understanding among Head Teachers and staff.

It was also recognised that greater clarity was needed in articulating how the model would add value, how impact would be measured and how progress would be tracked and monitored. It was also noted that communications should more clearly set out the phased approach and intended outcomes.

The model represented a significant shift in thinking about provision, focused on increasing capacity and supporting schools, rather than replacing specialist expertise. These reflections would inform ongoing development of the service.

Resolved:- That the EAH delivery model be received, reviewed and the contents endorsed.

9. IMPROVING LIVES SELECT COMMISSION - TERMS OF REFERENCE

Consideration was given to the Improving Lives Select Commission's Terms of Reference which had been included purely for reference and information.

Resolved:- That the Commission's Terms of Reference be noted.

10. WORK PROGRAMME 2026/27

The Chair invited the Commission to consider the Work Programme which had been circulated with the agenda and invited any comments or suggestions for inclusion for the 2026/27 municipal year and respective scheduling.

The Work Programme set out clearly the dates of the Commission's meetings for the municipal year and where items may be scheduled for respective agendas which were updated whenever there were changes.

There had already been a slight change to include the SEND Reform draft report for consideration at the July meeting as part of the pre-scrutiny process before its presentation to Cabinet on 14th September, 2026.

This now meant this report would move from September to July and the CYPS Annual Performance Report would move to September.

It was pointed out that the work programme was very much a live document and the Chair was keen to hear from Members if there were any particular areas of focus or even specific items that were listed so these could be scheduled for consideration.

The Chair of the Overview and Scrutiny Management Board confirmed he had also written to all Members regarding work programmes for scrutiny commissions and invited topics for consideration. The deadline for submitting suggestions was Friday, 12th June, 2026.

Meetings would then be set up through the appropriate Chairs and Vice-Chairs to approve any suggestions for adoption using the matrix system developed by the Governance Team.

To date only one item that may fall under the remit of Improving Lives had been suggested, but on taking further advice this was a national set policy which could not be amended.

Resolved (1) That the draft work programme for 2026/27 be approved with the current agenda items for inclusion and updated with today's suggestions.

(2) That the Governance Advisor be authorised to make any required changes to the work programme in consultation with the Chair and Vice-Chair and reporting any such changes back to each meeting for endorsement.

11. URGENT BUSINESS

There was no urgent business.