

Town Hall, St. Helens, Merseyside, WA10 1HP

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Agenda

CHILDREN AND YOUNG PEOPLE SERVICES SCRUTINY COMMITTEE

PUBLIC MEETINGS ARE WEBCAST (LIVE STREAMED)

Date:	Monday, 25 March 2024	Time:	10.00 am	Venue:	Room 10		
Membe	ship						
Council	Councillors: Banks, Greaves, T Long (Chair), Terence, McCormack, Murphy MBE, Osundeko, Sims, Sweeney and van der Burg						
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9.	TESSA Spotlight Review Rep	<u>ort</u>				3	
Hillary Brooks -Director of Childrens Services and Jo Davies Assistant Director of Education and Learning have been invited.							
*	Key Decision which is within the	e Public I	Notice of Key D	ecisions			
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** Key Decision which is not within the Public Notice of Key Decisions and will therefore be dealt with under the General Exception Provisions within the Constitution.

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Children and Young People Services Scrutiny Committee

25 March 2024

Report Title	TESSA (Triage for all Education Support and Specialist Advice) Spotlight Review Report		
Cabinet Portfolio	Children and Young People		
Cabinet Member	Councillor Nova Charlton		
Exempt Report	No		
Reason for Exemption	N/A		
Key Decision	No		
Public Notice issued	N/A		
Wards Affected	All		
Report of	Jan Bakewell Director of Legal and Governance janbakewell@sthelens.gov.uk		
Contact Officer	James Morley Senior Scrutiny Officer jamesmorley@sthelens.gov.uk		

	Ensure children and young people have a positive start in life.	x
	Promote good health, independence, and care across our communities.	
Borough		
Priorities	Support a strong, thriving, inclusive and well-connected local economy.	
	Create green and vibrant places that reflect our heritage and culture.	
	Be a responsible Council.	

1. Summary

1.1 The Children and Young People Services Scrutiny Committee set up a Spotlight Review of TESSA (Triage for all Education Support and Specialist Advice) as part of its work programme for 2024/25. This report documents the findings, conclusions and recommendations of the spotlight review.

2. Recommendation for Decision

The Children and Young People Services Scrutiny Committee is recommended to:

- 1) Note the report;
- 2) Submit the Spotlight Review recommendations to Cabinet; and
- 3) Endorse the TESSA approach and improved customer service.

3. Purpose of this report

3.1 To document the findings, conclusions and recommendations of the TESSA Spotlight Review Group.

4. Background / Reason for the recommendations

- 4.1 The Children and Young People Services Scrutiny Committee agreed to establish a Spotlight Review of TESSA as part of its work programme for 2024/25.
- 4.2 On 5th February 2024 the following Members and officers attended the TESSA Spotlight Review meeting:
 - Councillor Trisha Long (Chair)
 - Councillor Donna Greaves
 - Councillor Terry Maguire
 - Councillor Susan Murphy
 - Councillor Bisi Osundeko
 - Councillor Michelle Sweeney
 - Jo Davies Assistant Director of Education and Learning
 - Tom Howard Head of Early Years and TESSA
 - James Morley Senior Scrutiny Officer
- 4.3 During the meeting officers provided an overview of the development of the TESSA system, why it was developed, the benefits to the new approach, and what impact officers hoped the system would have.
- 4.4 TESSA stands for "Triage for all Education Support and Specialist Advice". Prior to the implementation of TESSA there had been a number of challenges within the Council's education support system.

- 4.5 It was identified that there was:
 - separation between services with different management structures and key performance indicators (KPIs);
 - no common thread for support services (i.e. multiple front doors for schools and parents to navigate to access support from different services);
 - a lack of shared pupil overview across services (multiple case management systems);
 - an inconsistent application of "graduated approach" (system of Special Education Need [SEN] support within mainstream settings);
 - rising numbers of requests for Education Health and Care Plans (EHCPs) and referrals to the Neurodevelopment Pathway (NDP – used for autism and ADHD diagnosis) – suggesting that children's needs weren't being met by schools.
- 4.6 However, officers recognised that there was an opportunity to introduce a new way of working that would enable a multi-agency approach, ensure the application of best/recommended practice on a consistent basis and to streamline the referral process for both schools and parents.
- 4.7 The objectives of the new system were:
 - to create a simplified, efficient referral process with fully mapped out service offer that everyone (officers, schools, parents) can see and understand;
 - earlier identification of concerns with evidence-based interventions from first contact;
 - improved shared knowledge of individual children to reduce duplication of work (tells us once);
 - ensure cases are supported at the right level of need/complexity, in a more timely way with improved case tracking (with better outcomes for children and young people);
 - shared vision across all services with consistent ways of working and KPIs;
 - to explore opportunities for more income generation (to enhance the financial sustainability of services).
- 4.8 All of the services involved in TESSA were currently part of the Education & Learning's Department as follows:
 - Alternative Education.
 - Autism Support,
 - Behaviour Support,
 - Dyslexia Support,
 - Education Welfare,
 - Education Psychology,
 - English as Additional Language,

- Hearing Support,
- Inclusion Officers,
- NEET Prevention,
- The Bridge Outreach,
- Traveller Education,
- Vision Support.
- 4.9 Partners that supported the TESSA approach included:
 - Early Help,
 - Early Years Quality Inclusion Service,
 - The Bridge Centre (Early Years Assessment Service)
 - SEND Assessment Team (responsible for EHCPs)
 - School Admissions
 - School Transport
 - Head Teachers of Resourced Provisions (mainstream schools with some SEND provision)
 - Head Teachers of Special Schools
 - The Virtual School
 - Youth Justice Service
 - Young People Drug and Alcohol Team (YPDAAT)
 - Teen Advice Zone (TAZ)
 - Young Carers
 - Health Service Teams (e.g. Neurodevelopment Pathway)
- 4.10 The development of the TESSA system commenced 18 months prior to the spotlight review and had started operation from the beginning of the 2023/24 academic year.
- 4.11 During the development of the system teams were brought together to understand the need for change due to the service demand and budget challenges that were being faced. Specific files and communication channels were set up in MS Teams to manage the project and lead officers were identified in each service to contribute to the system development and feed back to their teams. During the process there was consultation with the schools. Schools were regularly briefed and updated on the development of TESSA.
- 4.12 TESSA consists of two phases;
 - Hive (first contact)
 - TESSA Triage.
- 4.13 The Hive has a dedicated phone line available for schools to call when they have a concern about a child or young person Monday to Friday (excluding Thursdays) from 12pm to 4pm. The Hive is staffed by Specialist Teachers, Inclusion Officers, Education Welfare Officers and other Education Support

staff. Officers provide specialist advice guidance, and signposting if appropriate. If a concern cannot be resolved within Hive, then a detailed record of the issue is recorded on a shared system open to all services. Queries which can't be resolved in the Hive will be considered by the TESSA Triage Panel which meets every Thursday (when Hive is closed).

- 4.14 TESSA Triage is attended by a wider multidisciplinary team with representatives with the following backgrounds (plus others if required):
 - Inclusion
 - Behaviour
 - Autism
 - Sensory Needs
 - Education Welfare
 - Early Help
 - Alternative Education
 - NEET Prevention
 - Early Years
- 4.15 During TESSA Triage Panels, cases need to demonstrate evidence of: significant or complex needs; that attempts have been made to address issues with differentiation of the curriculum (including teaching, resources or environment changes); engagement with the child/young person and their family is recorded; other interventions already tried and what impact any prior interventions have had on the child/young person's progress. Using this information, the Panel will agree a pathway for the child/young person, which services they would benefit from and the lead for the case.
- 4.16 Since the TESSA approach had been implemented in September 2023 the HIVE had received contacts relating to 482 individual pupils (approximately 96 per month). Data for each contact was recorded and used to monitor the issues that were presenting, and the number of cases allocated to each time. It was expected that data could be used to analyse trends over time and at particular times of the year. For example, there had been a larger number of calls in September regarding children in Reception having issues with adjusting to school. This had reduced later in the Autumn Term but was expected to be something that happens each academic year, and as such, could be planned for.
- 4.17 There were 354 TESSA Plans currently active (i.e. there was involvement of a Council specialist with the child/young person) and the data management system was able to show how long cases were open for. Due to the nature of different services, some were able to clear cases more quickly than others (e.g. behavioural improvement support takes longer than a hearing or visual needs assessment). 13.3% of children/young people engaged with TESSA also had an EHCP.

- 4.18 The data collected could also be used to assess whether there were any trends developing at particular schools; for example, where a lack of the use of the service might be identified, this could prompt officers to engage directly with the school to see whether there were any issues with accessing the system or if there was a lack of engagement. Data could also be used to challenge schools on whether they were appropriately identifying the needs of pupils and/or if they were able to deal with issues effectively.
- 4.19 Initial feedback from schools had been positive with some suggestions for how the service could be improved. Quotes from schools shared with the Spotlight Review Group included:
 - "Staff act on referrals quickly and organise relevant agencies to make contact"
 - "As a new SENCO (it's) great to have people to talk to for advice about referrals..."
 - "The staff who we contact are always friendly and listen to our concerns"
 - "I would like to have an email that you can send questions to for a quick answer".
- 4.20 Officers informed the Spotlight Review Group of the planned continued development of the TESSA approach. This included: the development of a more efficient digital system to support the service; the development of a process for parents/carers to use the services; assessment of the potential impact of the service on key Education and Learning KPIs (such as attendance and inclusion); exploration of further commercialisation opportunities; and the possible use of Family Hubs to offer drop-in sessions.
- 4.21 Members of the Spotlight Review Group asked questions and the following points arose:
 - The service did not currently have data on how long calls to the HIVE took to answer; waiting times depending on how many people were trying to contact the team at the same time. Mondays were usually the busiest periods. Any of the five staff operating the HIVE could take a call and callers would wait for an answer if all five were already on a call. There was not currently a voicemail service available for schools to leave messages if they didn't want to wait as there was not an easy way for an officer to return a call e.g. many SENCOs were also teachers and would often not be available for a call back.
 - The Triage Panel would review between 20-30 cases per week. Depending on when calls were made to the HIVE, it could take up to three weeks for the Triage Panel to review a call that was escalated to the Panel.
 - Officers had developed the TESSA model internally and were unaware of any other local authorities doing anything similar. Adopting TESSA did initially involve some risk, as there was no evidence that the model would work, however the Department for Education had provided

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positive feedback on the approach and asked officers to share the development with other local authorities. At the time there wasn't sufficient resource to support other local authorities and it requires further testing to determine whether the model would be effective and sustainable in the long term.

- Each TESSA plan was allocated a named lead officer responsible for ensuring all actions within a child/young person's plan was completed, regardless of the services involved. The lead officer was also the single point of contact for the school SENCO.
- The interventions provided by each service within TESSA were the same as prior to implementing TESSA. If a service reached the end of the usual period of support (e.g. Behaviour Improvement was six sessions) and a child's/young person's issues remained, another service would be tried without requiring a further referral.
- As the Early Help Service is involved in TESSA, they provided a link between Education and Learning and Children's Social Care so that information about children involved with social care is available. It was highlighted that there is no equivalent service or process for health records, which can be more difficult to access.
- It was expected that a Parent and Carer line for HIVE would be available from 12pm-4pm in line with schools, however, options could be explored regarding making the parent line available in evenings. Further work needs to be undertaken around both costs and staff terms and conditions, if evening work is to be considered.
- It was reported that staff morale was good, and that staff felt supported by the Council although resource and demand pressures were challenging.
- Information generated through TESSA plans and actions was used to inform EHCPs when they were required for a child/young people who had previously been through TESSA. It was suggested that previously some children may have been given an EHCP where it would not have been required had the right interventions been put in place sooner. It was hoped that TESSA would help to ensure children received the right level of support at the right time. Assurances were given that TESSA would not be used to avoid giving a child an EHCP were an EHCP was the best thing for the child/young person. It was acknowledged that when children/young people received an EHCP they, and their families, gained statutory rights to certain support and this was important were the support was needed.
- 4.22 Members of the Spotlight Review Group discussed their views, and the following points were raised:
 - Members supported the principles of joint working, pooling of resources and consistency of approach to provide more sustainable services with a better experience for schools and parents as well as, most importantly, better outcomes for children and young people. Members felt that the

- Members were pleased to hear that officers had received positive feedback from the industry regarding the innovative approach they had developed in the TESSA model. They agreed with officers that now was the time to focus resources on improving the system internally and not taking time out to share learning with other local authorities as it was still early in the process and effective outcomes had not yet been fully realised.
- Members expressed a desire to ensure access to TESSA was equitable across the Borough. Members did not support the idea of using the family hubs to provide some form of face-to-face access as this would take valuable resources and only enhance the service for the few residents who were able to easily access the family hubs.
- Members supported the idea of making an email address available to support queries outside of HIVE operating times or when HIVE was busy, and schools or parents were unable to wait for a telephone answer.
- Members were pleased with the improved use of data to monitor the system and hoped learning from data collected would help to improve efficiency and the experience of children/young people, parents/carers and schools.
- Members support the integration of digital systems to ensure record keeping and data management were effective and accessible across different teams.

5. Consideration of Alternatives

5.1 N/A

6. Conclusions

- 6.1 Members of the TESSA Spotlight Review Group support the changes that have been made and praised officers for adopting an innovative approach. It is acknowledged that the TESSA model is still in the early stages of operation and support the continued development of the system to improve processes and outcomes for children and young people as well as the experiences of those using the system.
- 6.2 Whilst the principle of offering face to face access to HIVE via Family Hubs is creditable, Members do not feel it would be an effective use of resources given the limited number of families that might benefit from such access due to the current barriers of accessing Family Hubs for some residents in parts of the Borough not close to a Family Hub. Members feel that the most equitable and cost-effective approach would be to keep the parents access to TESSA to a phoneline only.

6.3 Although it is difficult to measure the impact of changes to ways of working in areas as complex as childhood development and educational outcomes and attribute impacts to specific factors, Members hope that through the continued use of TESSA, the Council will be able to see an improvement in outcomes for children and young people engaged with the service. To assess whether this is the case, the Spotlight Review Groups recommends that the Children and Young People Services Scrutiny Committee add an item to its work programme to request a report on the data collected through TESSA and the outcomes that have been achieved at its April 2025 meeting.

7. Legal Implications

7.1 There are no legal implications of this report.

8. Financial Implications

8.1 There are no financial implications of this report.

9. Equality Impact Assessment

9.1 An equality impact assessment is not required for this report.

10. Social Value

10.1 There are no social value opportunities associated with this report.

11. Net Zero and Environment

11.1 There are no net zero or environmental implications within this report.

12. Health and Wellbeing

12.1 There are no health and wellbeing implications of this report.

13. Customer and Resident

13.1 One of the recommendations of the Spotlight Review is that face to face drop-in sessions at Family Hubs are not made available. Whilst being able to have face to face contact may enhance the service for some service users this would not be easily accessible to all residents. It is seen as most beneficial to residents to ensure equality of access for all residents by keeping access to phone calls (and email if the option is introduced) as these are more accessible for more people.

14. Asset and Property

14.1 There are no asset or property implications within this report.

15. Staffing and People Management

15.1 There are no workforce implications within this report.

16. Risks

16.1 No risks have been identified in relation to the Spotlight Review or the recommendations of the report.

17. Policy Framework Implications

17.1 This report is consistent with the current policy framework.

18. Impact and Opportunities on Localities

18.1 There are no impact or opportunities for localities in this report.

19. Background Documents

19.1 None

20. Appendices

20.1 Appendix 1 – Table of Recommendations

Appendix 1

Rec No		Officer	Agreed Action and Date of Implementation
1	To ensure equal and ease of access for all parents and carers across the Borough, who need to use the Tessa service through IASS, and to ensure effective use of the Council's limited resources, access to the service is via phone, rather than face to face in Family Hubs.	Jo Davies	
2	The TESSA model to be included in the CYP pledge, which will be presented to Cabinet in May	Jo Davies	
3	That the Children and Young People Services Scrutiny Committee add an item to its work programme for 2024/25 about the effectiveness of TESSA to explore the impact of the service following an additional 12 months of operation.	James Morley	

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