

## **Joint Commissioning Strategy for Children and Young People across our Health and Care Partnership in Leeds, September 2025 – September 2028**

The Joint Strategic (Needs) Assessment (JSA) provides commissioners across both Leeds City Council and the West Yorkshire Integrated Care Board with a detailed assessment of both current and future health and social care needs in Leeds in order to inform the Health and Wellbeing Strategy. This strategy sets a clear ambition for Leeds to be a ‘healthy and caring city for all ages, where people who are the poorest improve their health the fastest.’

Across the Leeds Health and Care Partnership we work together to improve outcomes for everyone in Leeds. We do this by building a shared understanding of population need and working together to invest as early as possible. The current financial landscape is challenging for partners and there is a strategic need to improve both quality, outcomes and the financial position of the partnership across the city. Working together we strive to achieve this ambition.

The context for joint commissioning across the Leeds system is vast and practice can be seen across maternity, mental health, complex needs and physical health services for children, young people and their families; in addition to the way in which we commission and work together to deliver our universal preventative health services, taking a public health approach to improving the health of our population. This Joint Commissioning Strategy aims to set out how we (the Integrated Care Board in Leeds-Place and Leeds City Council) will work together to jointly commission our offers to children and young people (CYP), with a particular focus on special educational needs and disabilities (SEND). This Strategy aims to deliver on our collective vision for Leeds whilst responding to the voice of children, young people, parents, families, carers and professionals.

This Joint Commissioning Strategy plays an important part in addressing areas identified in the [Leeds – JSA2024](#). Notably the fact that the number of pupils with special educational needs (SEN) has grown faster than the pupil population. 25,199 pupils had a special educational need in 2023/24, 33% higher than 18,944 pupils in 2018/19. Over the same period the pupil population grew by 6% from 129,591 to 136,799. 18.4% of the pupil population now has SEN, broadly in-line with Statistical Neighbours and England and lower than the Core Cities average of 19.4%.

### **1 Vision**

We want Leeds to be the best city in the UK and the best city for CYP to grow up in, and to thrive from early years into adulthood. We want Leeds to be an inclusive and welcoming child friendly city where children live in loving and nurturing families. We invest in CYP to help build an increasingly prosperous and successful city by improving outcomes and providing young people with the skills for life, as well as opportunities for play and having fun. In ensuring our children have the best start in life, we recognise the need for outcomes to improve faster for children and young people from vulnerable and deprived backgrounds.

### **2 Voice of the child**

The voices and views of CYP are at the heart of making Leeds a child friendly city. When Leeds first set out its vision, we listened to the ideas of thousands of young people of all different ages. They told us what they thought would make Leeds a better city for them to play, live and grow up in and their feedback was grouped together to form our 12 wishes.

Child Friendly Leeds has reviewed the feedback from local and city-wide consultations, surveys, and ballots over the last 3 years, capturing the views of 80,000 children and young people in the city to identify the current top issues and priorities.

The Child Friendly Leeds team and Voice Influence and Change team then worked in partnership with children and young people from Leeds Youth Council, BARCA, SEND Youth Forum, Youth Service, as well as Swillington Primary and Parklands Primary School to develop the wishes for a new generation of children and young people in the city.



The experience of children and young people is central to our service improvements across the Leeds system.

### 3 Understanding our city

Leeds is an aspirational city with many strengths. However, there must be recognition that the child population in the most deprived areas of Leeds is increasing.

Leeds has some of the most affluent and some of the most deprived areas in the country and is a diverse city of 140 different nationalities.

Our child population has grown 10.9% in the last decade and while birth rates have been falling in Leeds, we are seeing a growing teenage population.

The child population is becoming more varied and more focused in communities most likely to experience poverty and more likely to need support from services. The number of children in Leeds

experiencing low income is now the 7th largest in the UK. We continue to see the impact of COVID, especially in our most deprived areas.

33% of our children under 18 live in neighbourhoods in the 10% most deprived areas nationally, 57% of our care starters came from these communities.

Our cohort of Children Looked After is increasing in complexity, diversity and intersectionality. In 23/24 for Leeds, our Children in care volume increased by 7%.

Whilst our Children Looked After rate per 10,000 is 85.7.

The Office for National Statistic (ONS) released data following the 2021 census and (as of 2021) Leeds is the 4th most densely populated Yorkshire and Humber local authority area. In addition, with approx. 150,000 under 16s, Leeds is one of the UK's youngest cities.

As needs for children and young people increasingly demonstrate more complexity, the city has seen an increase in demand for Education Health and Care Plans and for access to our short breaks offer.

#### **4 Our priorities**

The [Leeds Children and Young People's Plan](#) has been developed to define the priorities that guide our work and have been developed through consultation across the city, including the views of children and young people.

The Plan has been refreshed and within the 2023 to 2028 version of the Plan an additional priority area has been included which further strengthens our collaborative approach to supporting children and young people: Improving the health and wellbeing of all children and young people.

*Leeds is a healthy place for all children and young people, where they live within an environment that supports them to be mentally and physically healthy and have timely access to the right care and support when needed.*

The Plan defines three clear 'obsessions':

1. Safely and appropriately reduce the number of children looked after
2. Young people in Leeds attend school, achieve, and attain well, and continue their route of a sustained education, apprenticeship or employment destination
3. Leeds is a healthy place for all children; and improve the timely access to healthcare when needed

To achieve these 'obsessions' we will continue to work collaboratively across the system either through joint commissions or by bringing services together through new or existing partnerships.

In addition to these 'obsessions' the Plan sets out 5 very clear outcomes that the Leeds system has agreed: All children and young people:

1. Are safe from harm
2. Do well at all levels of learning and have skills for life
3. Enjoy healthy lives
4. Have fun growing up
5. Are active citizens who feel they have a voice and influence

These outcomes are pivotal to our work across the city and have become the key focus of a number of Boards/Networks across our Leeds Health and Care Partnership, including our SEND and Alternative Provision Partnership Board, Leeds Corporate Parenting Board, Children and Young People's Stakeholder Network (was the CYP Population Board), Best Start Alliance and Future in Mind Outcomes Delivery Group.

All are responsible for working collaboratively across partnerships to help improve the outcomes and experience for all children and young people who live in Leeds. This includes consideration and taking action to help reduce health inequalities experienced by this population cohort.

Recently, Leeds Health and Care Partnership has identified children with complex needs as a key priority and a programme of work, reporting to our Partnership Leadership Team (PLT). Robust plans are in development and significant pieces of work are being undertaken, building on the work of the Children with Complex Needs Audit findings 2023/24 and progress made to driving forward improvements over the last 12 months or so. As part of this there will be a newly developed CYP Transformation Programme Board set up. The progress of this Board and its work will inform the joint commissioning of new opportunities for CYP going forward into future years.

## **5 Governance**

As a result of the development of the CYP transformation work programme, the CYP Population Board will morph into a system-wide stakeholder network, building on provider and commissioner relationships, ensuring the programme is focussed on the correct things, offering leadership and guidance and managing risk across the partnerships.

The Leeds SEND and Alternative Provision (AP) Partnership Board continues to provide leadership and strategic oversight on our progress towards delivering on our shared vision and values of an inclusive child-friendly Leeds. The Board governs strategic plans to improve the experiences and outcomes of children and young people aged 0 to 25 in Leeds with special educational needs and disabilities (SEND).

The Leeds SEND and AP Partnership is an equal partnership of sector representatives across education providers, Leeds City Council Children and Families Services, health and social care providers, the Leeds Health and Care Partnership (NHS West Yorkshire Integrated Commissioning Board), representatives of the Leeds Parent Carer SEND forum, and representatives of the voices of CYP in Leeds with SEND, via the Leeds SEND Youth Forum.

The Board oversees and monitors: [Everyone's included: the Leeds SEND and Inclusion Strategy 2022 to 2027](#) and its impact and effectiveness in improving the experiences and outcomes of children and young people aged 0-25 with SEND and additional needs. There are a number of workstreams sitting under this Board, some of which are inter-dependent on our CYP joint commissioning strategy priorities and areas of work.

The CYP Joint Commissioning Group (formally known as a Board) enables partners to make decisions together to make the best use of resources, maximise collaborative working across all sectors as appropriate, and unblock any barriers for the work of the group. This doesn't impact on the statutory responsibilities of individual organisations. The group reports directly into the Integrated Commissioning Executive (senior leadership with system-wide CEO's attending).

## 6 Strategies that set our direction of travel

Everyone's Included: The Leeds SEND and Inclusion Strategy 2022-2027 [SEND and Inclusion Strategy.pdf \(leeds.gov.uk\)](#) is pivotal to our work to make Leeds an inclusive child friendly city for our children and young people aged 0-25 with SEND and additional needs (NB this strategy is under review at the time this document has been written). The strategy builds on our *Leeds Children and Young People's Plan* and our '3As' Plan: *attend, attain, achieve* plan. It sets out shared plans to improve support and outcomes for CYP with SEND, and those with additional needs because of their circumstances: this includes children looked after by the Council, children in need (of support from a social worker), children living with financial disadvantage, and children who have experienced trauma. Our plans focus on improving outcomes for children and reducing the inequalities they may face in their learning, health and wellbeing outcomes.

In addition to the SEND and Inclusion Strategy; we have several system strategies that set out our intention to work collectively either through partnership working or by bringing budgets together to jointly commission services.

These include:

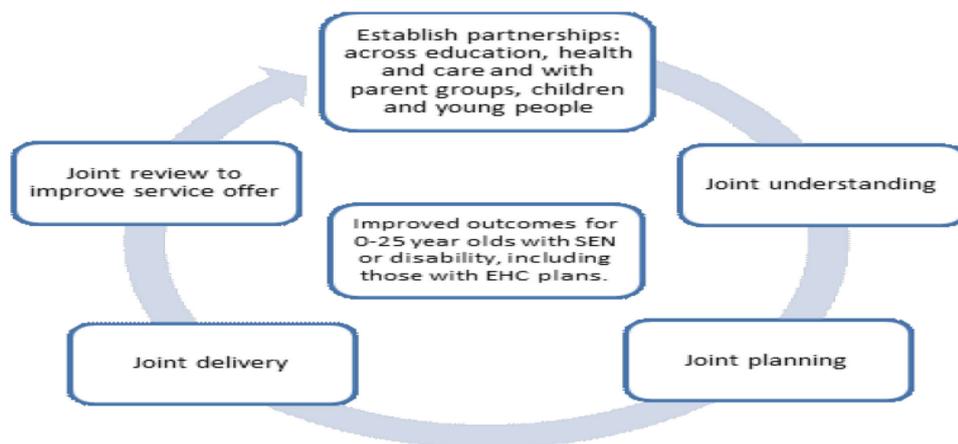
[Future in Mind: Leeds 2021-2026 \(Children's Mental Health\)](#) The Future in Mind Strategy is a plan for Leeds that explains how people are working together to improve mental health and emotional health for young people. The Strategy sets out a number of priority areas including the need to interface with the SEND and Inclusion Strategy in relation to inclusion stating that 'Our education, health and social care systems are inclusive and provide high quality support to the most vulnerable'.

[Compassionate Leeds: A strategic framework for trauma awareness, prevention and response \(2022\)](#) Leeds has a long history of working collaboratively to improve outcomes for CYP. Our Children and Young People's plan sets out our ambition to be the best city to grow up in. The Future in Mind Leeds Strategy makes a clear commitment to develop trauma informed practice across the city, working with adult services to ensure we take a whole family approach. Compassionate Leeds strengthens our existing commitment to improve outcomes for children and young people by working to reduce trauma and adversity.

[Leeds Corporate Parenting Strategy 2024 to 2027](#) This Corporate Parenting strategy describes how the local authority and its partners, including housing, health services, Police and schools, act as 'responsible parents' to children and young people living within their care. Effective corporate parenting requires everyone involved including elected members, officers, teachers, GP's etc. to recognise their role as corporate parents and understand what they can contribute to enable us be the best corporate parents we can be to all children and young people in our care.

[Leeds Health and Wellbeing Strategy](#) This Strategy sets out how we as a partnership will enable Leeds to be 'the best city for health and wellbeing'. The Strategy sets out a clear collective vision: Leeds will be a healthy and caring city for all ages, where people who are the poorest improve their health the fastest.

## 7 CYP Joint Commissioning in Leeds



Joint commissioning involves the whole commissioning cycle and incorporates a number of steps (see diagram above):

- I. **Joint understanding:** needs of children and young people with SEND and / other needs are identified, services that meet these needs are reviewed and the resources available identified
- II. **Joint Planning:** gaps in services are identified, a commissioning strategy which explains the services required, the outcomes wanted to achieve with the resources available is developed
- III. **Joint delivery:** working with families, communities, providers and partners to develop services - services are procured and contracts put in place to deliver the services
- IV. **Joint review:** services are reviewed to monitor progress towards outcomes. This includes feedback from service users and their families to help improve current service delivery and feed into future needs assessment.

Joint planning and commissioning leads to better integrated processes and integrated front-line delivery. This involves a step change transition that requires senior leadership, a strategic understanding of how outcomes are met, and a more commercially minded approach to procurement - all focussed on the child or young person.

Services for children with complex needs and disabilities are commissioned in Leeds to meet Section 25 of the Children and Family Act (2014) and the Health and Social Care Act (2012) to promote integration between education, health and social care.

In accordance with Section 26 of the Children and Family Act (2014) the ICB in Leeds and the Local Authority work together to plan and commission services to for CYP in the city for children with disabilities and with special educational needs. The services are commissioned to ensure integrated delivery of the assessment and a single unified education, health and care plan in Leeds. The health service specifications and contracts reflect these requirements, alongside the Designated Medical and Clinical Officer roles.

In recognition of the importance of early identification and notification of children with a disability or SEND the ICB in Leeds utilise Service Development and Improvement Plans (SDIPs) with our NHS provider organisations to improve experiences of families of children and young people with SEND across the pathways.

We work cooperatively to resolve complaints made across education, health and social care and we are increasingly working to formalise these arrangements. For The First-tier Tribunal – Special

Educational Needs and Disability (SEND tribunal) a multi-agency decision meeting considers the appeals lodged to consider and plan a restorative approach across education and health. There are plans to extend this to include social care and have their representation at the multi-agency decision meeting.

## **7.1 Joint Commissioning arrangements**

We have joint commissioning arrangements across several programme areas in Leeds:

1. Equipment – we have a section 75 agreement in place which covers health and social care for both adults and children’s equipment
2. Social Emotional Mental Health provision – we jointly commission the third sector to deliver mental health support to children and young people outside of education settings, with a particular focus on children and young people who are least likely to access support through school or GP referral
3. Infant Mental Health Service – The ICB in Leeds and Leeds City Council’s Public Health directorate jointly commission this service to promote awareness of the importance of infant mental health, training the workforce to best meet the emotional needs of this population and targeted delivery of infant mental health clinical interventions direct to families.
4. SENDIASS – we jointly fund this free, impartial and confidential face to face and online service. SENDIASS supports children and young people with special educational needs and disabilities and their parents and carers to help with their related concerns or questions
5. Specialist Mental Health within our Cluster model – we jointly commission the MindMate Wellbeing Service which is school cluster mental health support providing a range of multi-professional targeted support (the offer will vary according to the local cluster) including: school support, family support and short term and early intervention specialist mental health support
6. The Youth Justice Service consists of practitioners with backgrounds in health, probation, youth justice, youth work, restorative justice, social work, education, housing, substance misuse and policing to provide a multi-agency approach to preventing offending and re-offending by children and young people aged 10-17 years old. This is achieved through the delivery of child-friendly, integrated services which ensure young people are safeguarded and enabled to reintegrate into their local communities without offending, wherever possible with support from their families
7. We also recognise the need to work together to align resource, such as short breaks provision in the city and recognise the need to look at whether our current offers makes the best use of resources across the partnership
8. Mediation
9. Parent Carer Forum

## **7.2 Progress on our priority areas (updated June 2025)**

When we first launched this Strategy in 2023 we identified several areas across our Children with Complex Needs and SEND programme of work that we wanted to review to ensure we were meeting the need of our local population and working effectively across the Leeds system. These priorities fell within the definition of joint commissioning across the partnership and drew insight from the voice of children, young people and their families into these reviews and developments.

To move forward on these priority areas of work and ensure the work of this document is enacted, a Joint Commissioning Group was established which reported to the CYP's Population Board.

Membership of this group consisted of key representatives from the NHS Integrated Care Board in Leeds-Place and Leeds City Council.

The priorities were:

1. Develop the extended Dynamic Support Register
2. Ensure the provision of Care Education and Treatment Reviews for children aged under 14
3. Delivery of section 117 aftercare arrangements
4. Review the Children Looked After health offer – understanding the offer and responding to need
5. Agreement of the joint commissioning arrangements and delivery of Personal Budgets for children and young people with SEND which may contain elements of education, social care and health funding
6. Improve access and support to children and young people on the neurodevelopmental pathway
7. Review the needs of children and young people with SEND who attend alternative provision across Leeds
8. Ensure the interface across the various Boards in operation across the city respond to the transitional needs of our 18–25-year-old cohort with SEND
9. Explore options for the development of multi-disciplinary joint funded complex health residential hub provision with outreach into family-based settings
10. Undertake a System-wide audit of 50 plus records of CYP with complex needs, identifying gaps and areas for improvement
11. Drive forward the findings from the audit, putting in joint processes and system to support

Attached in Appendix 1 is an update on the progress against these priority areas.

As we have progressed through these priority areas, workstreams have developed and many have moved to become business as usual.

In addition to these priority areas a significant programme of work was instigated in 2023 in relation to 'Joint Commissioning for Children with Complex Needs'.

56 cases were reviewed from 5 cohorts of children and young people including:

- Education Health and Care Plans (EHCP) and Children's Continuing Health Care (CHC)
- Dynamic Support Register (DSR) and Care, Education and Treatment Reviews (CETR)
- External residential placements for children looked after
- In house residential and fostering

- Resource Allocation Decision and Review (RADAR) panel and short breaks

These case reviews identified 5 themes:

1. Process and practice improvements
2. Oversight of statutory duties
3. Pathways and services
4. Holding risk in partnership
5. Findings support lived experience

In addition to these 5 themes, the recommendations from the Children Looked After (CLA) Health Needs Assessment undertaken during 2023 have been considered in detail and aligned to 7 work areas:

1. Data (e.g., integration of systems, consistent recording)
2. Prevention - mapping the universal plus offer and scoping gaps.
3. Management of risk/escalation (Children Looked After, small group homes and the development of a Proactive Support Service.
4. Neurodiversity (waits, pathway transformation).
5. Professional Practice (Education Health Care plans processes and quality assurance).
6. Processes (including Children's Continuing Healthcare, Education, Health and Care Plans, Dynamic Support Register, Section117 requests (mental health aftercare), Resource Allocation Decisions and Review panel, placement support, plans and documentation).
7. Partnership risk share and joint commissioning.

These work streams have been developing and are now aligned to the refreshed priorities of this revised Joint Commissioning Strategy (see Appendix 2).

Other areas have provided recommendations for future ways of working for example through the Prevention work there is a need to use the Joint Commissioning Group as a forum as an enabler to ensure that any service changes are viewed through a partnership lens and the impact of any service reviews are considered collectively. There is also a need to ensure that there is a continued interface between the Joint Commissioning Group and other partnership boards including the Future in Mind Delivery Oversight group, the Corporate Parenting Board and the SEND Alternative Provision Partnership Board. We must continue to respond to the transitional needs of our 18–25-year-old cohort with SEND and we will manage this through our relationship with the Children's Population Board and its priority in relation to Transitions.

## Appendix 1 – Progress Against Priorities 2023-2025

Priority area	Lead	Progress	Next steps
Develop the extended Dynamic Support Register	Laura Jackson/Emily Carr	DSR resource transferred to the ICB on 28th October 24. Representation secured for all partners. Steering group established to develop new supporting processes. Linked to the S117 work and understanding all Leeds children and young people both within T4 inpatients and supported within acute hospital settings to enable earlier support and discharge to either community or other residential placement	WYICB are looking to develop a digital DSR to enable consistency across West Yorkshire
Care Education and Treatment Reviews for children aged under 14	Laura Jackson	Now in place and offered where clinically appropriate and all other alternatives have been explored	BAU
Delivery of section 117 aftercare arrangements	Jayne Bathgate-Roche	Agreement by the ICB and LCC to progress with the implementation of a S117 process for children and young people. All referrals will be tracked through process which will run alongside extended dynamic support register and insight and data from provider collaborative colleagues to ensure an effective discharge process for children and young people who are discharged from T4 CAMHS inpatient settings. Representation secured across all system partners. Working with colleagues to develop support for social workers. 'Official' launch date June 2025	Monthly panel meetings in place. To review progress in November 2025
Review the Children Looked After health offer – understanding the offer and responding to need	Angela Dillon	 CLA Leeds over view.docx	Continuation of action plan

		Action plan in place (see embedded document) following recommendations taken from the short-term project; 'Understanding the health needs (both physical and mental) of Leeds children who are looked after (CLA)'	
Agreement of the joint commissioning arrangements and delivery of Personal Budgets for children and young people with SEND which may contain elements of education, social care and health funding	Sally Townend	A review of the funding model for health provision in EHCP's is to be undertaken that will link into Children's Continuing H –including links to personal budgets link	First meeting with SENSAP scheduled for 31 <sup>st</sup> July
Improve access and support to children and young people on the neurodevelopmental pathway	Charlotte Guest, Janet Addison and Joan Kavanagh	Review of tools (digital/profiling) completed and consideration of how these can be tested within Leeds underway. Needs led offer within Preschool Autism pathway now in place, all families referred now have access to additional support Development of proposal to test needs led support for school age children. Clusters identified for initial piloting with a view to evaluating and wider scale up across Leeds. Continued development of MindMate ND Information hub Ongoing linkage with WY programme of work to ensure opportunities and initiatives funded and developed through this programme are embedded and tested in Leeds	Continuation of identified actions: <ul style="list-style-type: none"> <li>- Roll out of pilot for needs led approach to ND support across identified clusters</li> <li>- Ongoing work with education following actions identified within education workshop in early 2025</li> <li>- Linking into WY ND Programme work as consultation on ND commissioning policies, and needs led referral hub work rolls out to ensure no duplication and complementary approaches</li> </ul>
Review the needs of children and young people with SEND who attend alternative provision across Leeds	Rebecca Fenwick	Alternative Provision Strategy – steering group and associated subgroups <ol style="list-style-type: none"> <li>1. Quality Assurance</li> <li>2. Model</li> </ol>	Moved to SEND and AP Partnership Board

		Commissioning arrangements – schools and AIPs (updating partnership arrangements)	
Ensure the interface across the various Boards in operation across the city respond to the transitional needs of our 18–25-year-old cohort with SEND.	CYP Stakeholder Network	Children’s Population Board sponsored a piece of work to look at how we improve the coordination of transitions work occurring across the city - there are a number of governance groups and initiatives in place with the aim of improving transitions across a number of cohorts, but the Board wished to better understand what the scope of current improvement programmes are and relationships between these. The CYP stakeholder Network to continue this work	Bringing together key stakeholders to explore further following scoping survey
Explore options for the development of multi-disciplinary joint funded complex health residential hub provision with outreach into family-based settings.	William Shaw, Karren Leach	Development of the DfE bid	BAU

## Appendix 2 CYP Joint Commissioning Priorities 2025 - 2027

Moving forward, members of the Joint Commissioning Group (previously ratified by the Children’s Population Board) have agreed the following as areas of priority for 2025 – 2027:

Priority	Focus	Lead	Governance	Timeframe
Complex Needs – Workstream 1: CYP with Complex Needs at risk of escalation – Data/ Diagnostic discovery phase	Earlier identification of risk, and prevention of escalating needs to ensure we appropriately target our services to children with complex needs, improve their outcomes whilst exploring opportunities to reduce system costs to ensure we get best value for Leeds pound investment.	Richard Irvine/Joanna Bayton-Smith/ Karren Leach/William Shaw	PLT	Revised workplan in development
Complex Needs - Workstream 2: CYP with Complex Needs – Escalation Management Initiatives	Including: <ul style="list-style-type: none"> <li>• Implementation of S117 process</li> <li>• Children with No Onward Destination (CNOD) Pathway</li> <li>• Two (2) bedded provision</li> <li>• Proactive Dynamic Support Register (DSR)</li> <li>• Proactive Support Service</li> </ul>	Overarching leads- William Shaw/Karren Leach/Jayne Bathgate-Roche/ Laura Jackson	PLT	Revised workplan in development  Milestones and timescales to be agreed
Children’s Equipment Service – School - Community	Development of efficiency plan (manage demand within jointly agreed funding envelope which	Rebecca Fenwick/Eloise Pearson	Joint Commissioning Group	Update to Joint Commissioning Group in

	also includes demand prediction process) Demonstrating impact	School pathway on hold until Chief Officer Learning Inclusion in post		July 25 to inform focus and timeframes (complete by March 2026)
Personalisation: personal budgets for children and young people with additional needs/disability (SEND).	Focus on: <ul style="list-style-type: none"> <li>Processes across health, social care and education</li> <li>Families and young people's ability to shape and direct</li> <li>Increasing the range of appropriate services to purchase</li> <li>Increasing agility in the system</li> <li>Delivering maximised outcomes for children and young people</li> </ul>	Rebecca Fenwick	Joint Commissioning Group	Need all agencies to prioritise and leads from all partners Review progress and timeframes at Joint Commissioning Group
Clinical Needs in Education Settings	Focus on: <ul style="list-style-type: none"> <li>Clear multi-agency plans ensuring the safe and effective delivery of nursing care to children and young people (CYP) in educational settings.</li> <li>A multi-agency assurance framework with defined lines of responsibility and accountability.</li> <li>Strengthened existing multi-agency partnerships through the development</li> </ul>	Charlotte Guest and Sally Townend (multi agency (senior representation) steering group to be put in place)	Joint Commissioning Group and SEND & Alternative Provision Board	March 2026

	<p>of a common language and understanding.</p> <ul style="list-style-type: none"> <li>• Flexible models of support adapted to local needs and factors.</li> <li>• Timely access to training on health interventions in short breaks settings.</li> </ul>			
Improve access and support (including reasonable adjustment) to children and young people on the neurodevelopmental pathway (with or without a diagnosis)	<p>This includes improvements in the following areas:</p> <ol style="list-style-type: none"> <li>1. Early identification of need</li> <li>2. Development of additional needs-based support across health, education and care</li> <li>3. Equitable access to assessment where clinically appropriate</li> </ol>	Charlotte Guest and Joan Kavannagh	Joint Commissioning Group and SEND & Alternative Provision Board	March 2026
Quality assurance for CYP with complex needs and disabilities in care and education settings	Quality Assurance group	Rebecca Fenwick/Angela Dillon/Sally Townsend/Lesley Darnell	Leeds Safeguarding Children's Partnership	TBC
Review the Children Looked After health offer – understanding the offer and responding to need	<p>Continued delivery of action plan (v2 embedded)</p>  <p>CLA Leeds overview v2.docx</p>	Angela Dillon	Joint Commissioning Group & Corporate Parenting Board	Quarterly reports Joint Commissioning Group

