HAMPSHIRE COUNTY COUNCIL

Report

Committee:	Children & Young People's Select Committee
Date:	11 July 2023
Title:	Services supporting Children & Young People with Down Syndrome in Hampshire
Report From:	Director of Children's Services

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Purpose of this Report

1. This report seeks to provide Members with an overview of the existing services for children and young people with Down Syndrome in Hampshire which Hampshire County Council contributes to and/or supports, alongside the wider children's partnership.

Recommendation(s)

2. That the Children and Young People Select Committee note the contents of the report.

Executive Summary

- 3. Support to children and young people with Down Syndrome is provided through a range of universal and specialist services. This report seeks to summarise the services that provide support, and their offer.
- 4. Much of the provision children with Down Syndrome require should be made through high quality inclusive teaching and ordinarily available provision. If additional targeted intervention is indicated, then this should be delivered alongside and involve peers wherever possible. Children with Down Syndrome should have opportunities to work with a range of adults across the school day spending the majority of their time in their class, and it is important that they are taught by their class teacher alongside their peers during group work in class for example. Any additional adults involved with the child should ensure they fade in and out so that the child is able to practice new skills independently and build their independence and personal responsibility over time.
- Some pupils with Down Syndrome may have more complex medical and other additional needs which require greater levels of adaptation and

adjustment. These and the more specialist interventions they may need will be described in their Education Health & Care Plan (EHCPs) and will change as children develop.

Contextual information

- Down's Syndrome, also called Down Syndrome, is a genetic condition that usually caused by an extra chromosome in a person's cells. In the majority of cases, it can't be inherited, and occurs by chance at the time of conception.
- 7. A person with Down Syndrome will have some degree of learning disability, but the level of ability will be different for everyone.
- 8. A child with Down Syndrome might take longer than other children their age to reach certain milestones and to develop certain skills.
- 9. As with other conditions associated with learning disability, every person with Down Syndrome is an individual and, with the right support and opportunities, can lead a happy and fulfilling life.
- 10. There are some health problems associated with Down Syndrome, such as heart problems and difficulties with sight and hearing, but these will not affect everyone with the condition.¹
- 11. National data is reported by NHS Digital, the latest data reported in December 2022 for births occurring in 2020 suggests:
- 12. The prevalence of Down Syndrome was 26.5 (95% CI 25.2-27.9) per 10,000 total births or one in every 377 births, 7.4 (95% CI 6.7-8.1) per 10,000 total births in 2020.
- 13. The live birth prevalence in 2020 remains consistent with previous years' data, with 11.5 (95% CI 10.6-12.4) per 10,000 live births or one in 873 live births for Down Syndrome.²

Hampshire's Offer

Hampshire Libraries

14. Hampshire County Council's Library Service provides a range of universal offers designed to be inclusive, encourage a love of reading and create accessible safe spaces for all children and young people from a very early age.

¹ Source – Mencap.org.uk

² Source: 2.3 Prevalence of babies with Down's syndrome, Edwards' syndrome and Patau's syndrome -NDRS (digital.nhs.uk)

- 15. Universal Bookstart packs are gifted at birth registration or early years settings and our children's libraries provide an excellent inclusive and accessible range of books and resources.
- 16. Universal activities such as Storytime and Rhymetime provide opportunities for improved parental mental health and networking, speech, language and communication development, engagement in play, increased listening, understanding and ability to follow instruction, and development of pre-literacy skills. The Library Service have early years champions who have a wider understanding of speech and language development and how to signpost families for support, and 'When a book might help' provides a list of story books on a range of topics including school readiness, disability and neurodiversity, families and homelife. A range of craft and play activities are also available, as well as regular favourites: Chatterbooks, Construction Club, Discovery time or Baby Play. All activities are designed to be inclusive and meet local need, and with feedback from customers and our links to the library sector, we continue to develop these.
- 17. The Library Service is developing and piloting *Interactive Storytimes* which will provide more a more inclusive offer to families and has started to provide wider training and awareness opportunities for staff regarding of speech and language support through events such as Rhymetime/Storytime etc.
- 18. Gosport Discovery Centre is a Makaton friendly library and can provide support to both adults and children with communication challenges and has a good online presence to provide wider support to families.
- 19. Farnborough Library houses the FAB café which is currently leased to Oflac Charity who offer their trainees (adults 19+ with learning difficulties) the opportunity to experience working in a fully operational café, which works well in a library location and provides an affordable café offer to library customers an excellent support to the community the service is seeking a similar partnership on a café facility in the north of the County.

Early Years

- 20. The Services for Young Children (SfYC) Inclusion team provides support for children with SEND via two main approaches:
 - Setting support (pre-schools, nurseries, childminders and schools) and;
 - Direct child/family support (predominantly in the home learning environment).
- 21. Portage is a home and early years educational service for pre-school children aged 0-5yrs with additional support needs and their families. Portage work with children who have a significant delay by approximately one third of the child's age in at least two different skill areas which must include cognition. An individual, flexible package of support is provided depending on the needs of the child and family. The Portage Inclusion Practitioner (PIP) works in partnership with families and professionals to plan appropriate targets to work

- towards and will liaise with early year's settings and schools to ensure a smooth transition.
- 22. The Council's Portage Service has an open referral process and referrals can be made by health professionals, early years practitioners and parents. There are no specific types of disabilities that are not catered for; every referral is considered and discussed against the need outlined above. Whilst waiting for support, families are provided with a wealth of information, support and guidance on our parent platform. Providing strategies for supporting individual needs. Children with a diagnosis such as Down Syndrome do tend to be referred in early by health partners and this supports and enables early intervention work.
- 23. Children receiving Portage may be supported by other agencies and professionals within the fields of health, social and education. Therefore, effective consultation and collaboration is vital on a regular basis to ensure that needs are being met. Portage signpost to relevant services, charities and groups who may be able to support a family/ child's needs in their locality. PIPs will attend and chair meetings such as Team Around the Child (TAC) to ensure that all relevant information is shared to enable all needs of the family to be met effectively.
- 24. The Inclusion Setting Support Officer (ISSO) service offers advice and guidance to early years providers to support children in the private, voluntary or independent childcare sector who:
 - Have had a concern raised by an early years setting
 - Have an identified additional need or,
 - Will require additional support when transitioning into or out of their childcare setting.
- 25. Advice and guidance are provided to aid early identification and support early interventions for children of concern and is offered primarily to the setting Special Educational Needs Coordinator (SENCo). This support includes support surgeries, the provision of termly SENCo support group meetings, a variety of training opportunities and guidance on outside agency support or referrals to other professionals if required. The ISSO Service can also give advice and guidance with ensuring smooth transitions such as, from setting to the receiving school. Early Years SENCos will also have access to the Council's Inclusion web pages for advice, support and guidance.
- 26. The Early Years teams have recently worked in partnership with a variety of agencies to create an early year's version of the schools SEN Support Guidance document. This document is designed to help early years providers (EYPs) identify, plan for, and meet the needs of children who have special educational needs or disabilities (SEND) and require reasonable adjustments at the SEN Support stage, in line with the Special Educational Needs and Disability Code of Practice 0-25 years, 2015. It highlights the vital importance of high-quality teaching and learning in the context of inclusive practice for all children, as the basis for meeting the range of needs within a mainstream

- setting. It identifies the main categories of SEND and some typical characteristics of learners with SEND in those categories, alongside approaches and strategies to help address those needs in the classroom, at the level of SEN Support.
- 27. The SfYC Inclusion service provides a variety of SEND training to early years staff including Basic Portage Workshop, positive approaches to behaviour, Makaton, Play chat interact, language boxes, AET Autism training, stress free target setting and SENCO induction.
- 28. The ISSO Service facilitates termly SENCo support group meetings in order to ensure that good inclusive practice is maintained, to update on any revised statutory guidance and to share resources. During these meetings feedback is sought from settings about specific local requirements and needs and this informs future content planning. This feedback also helps the Inclusion Setting Support Officer Service to constantly review its services and methods of delivery in order to be responsive to county and local needs.
- 29. Where support is required in identifying or accessing childcare / school provision for a child with SEND, the Services for Young Children Inclusion Team provides brokerage, advice and guidance in relation to childcare up to statutory school age. The Team also supports early years setting staff and parents in navigating the EHCP process and signposting to where further advice and guidance can be sought, such as SENDIASS.
- 30. All Services for Young Children Inclusion staff are qualified and experienced to a high level. All PIP's have completed a recognised National Portage Association Basic Workshop and several members of staff have completed an advanced course to become accredited to support further training for practitioners. All team members will have a sound knowledge of child development and competencies in assessing, designing delivering and evaluating teaching skills. They receive ongoing CPD opportunities and have recently provided a training session around supporting children with Down Syndrome in early years at a whole service day.

Schools

- 31. Every child with Downs Syndrome (DS) is a unique individual with personal strengths, interests, and challenges. A thorough understanding of the child is the starting point for making effective provision as well as a school culture and positive attitude to meeting the needs of all children through high quality inclusive teaching.
- 32. There are some commonalities of approach that are proven to benefit and better support the learning and inclusion of children with Down Syndrome and a range of organisations and research studies to help guide the implementation of these.

- 33. The typical learning profile of a child with Down Syndrome can be summarised as:
 - Strong visual awareness and visual learning skills.
 - Ability to learn and use sign, gesture, and visual support.
 - Ability to learn using the written word.
 - Strong desire and ability to learn from their peers, to imitate and take their cue from them.
 - Delayed motor skills, fine and gross leading to clumsiness and manipulation difficulties.
 - Auditory and visual impairment leading to hearing and sight differences
 - Speech and language delay. Problems with articulation, comprehension, and expression
 - Poor short term auditory memory leading to problems with consolidation and retention.
 - Difficulties with generalisations, thinking and reasoning
- 34. Much of the provision children with Down Syndrome require should be made through high quality inclusive teaching and ordinarily available provision. If additional targeted intervention is indicated, this should be delivered alongside and involve peers wherever possible. Children with Down Syndrome should have opportunities to work with a range of adults across the school day spending the majority of their time in their class, and it is important that they are taught by their class teacher alongside their peers during group work in class for example. Any additional adults involved with the child should ensure they fade in and out so that the child is able to practice new skills independently and build their independence and personal responsibility over time.
- 35. Some pupils with Down Syndrome may have more complex medical and other additional needs which require greater levels of adaptation and adjustment. These and the more specialist interventions they may need will be described in their EHCPs and will change as children develop.
- 36. Appendix 1 of this report summarises the key strategies which should be part of high-quality inclusive teaching and ordinarily available provision in any setting.
 - There are a number of charities that have produced comprehensive information to support the education of children with have Down Syndrome, including:
 - New Educational Guidelines for learners who have Down's Syndrome -Downs Syndrome Association (downs-syndrome.org.uk)
 - 21 Together Down's syndrome Charity
 - Learn and Thrive

Family Information and Services Hub (FISH) and the Local Offer

37. Hampshire's Family Information and Services Hub (FISH) contains a wealth of information for parent's children and young people. It is the one stop shop

for them to find advice/support and services on topics such as childcare, leisure activities and family support. It is also the home for Hampshire's Local Offer, which provides information on services for children and young people from birth to 25 with SEND.

- 38. The Local Offer is the main source of information about education (including early years provision, school support, and post-16 options), short breaks, and transition into adulthood for children and young people with SEND.
- 39. The current FISH platform is being upgraded in July 2023. This will enhance the look and feel of the directory, and ensure it is more accessible for users, including better mobile compatibility. The refreshed look and feel has been completed with input from parents and young people, and the webpages will continue to evolve in the coming months as we keep improving them in response to feedback. The updated directory will also have a new section sole focusing on emotional health and wellbeing for all families in Hampshire.

Holiday Activity and Food Programme (HAF)

- 40. The Department for Education (DfE) is providing funding to local authorities to coordinate a programme that provides healthy food and enriching activities to children and young people from lower income households during the Easter, Summer and Christmas Holidays from 2022-2025.
- 41. Hampshire County Council is delivering this through the connect4communities programme, and a wide network of community-based organisations deliver the HAF schemes, including existing holiday care providers, schools, childminders, sports coaching, creative and performing arts providers and many others.
- 42. Healthy meals must be provided at every session. All children in Hampshire who receive benefits related Free School Meals will be eligible to take part in the activities. Fifteen per cent of places were available to other vulnerable children, as defined by the Council, and includes for example, children in need, at risk or vulnerable as well as children with an EHCP. This will include children with Down Syndrome.
- 43. During 2022 there were 109,954 places commissioned and 92,782 places attended across Hampshire. This enabled 5,922 children at Easter to access hot food and activities, 11,652 in the Summer and 5,637 at Christmas.
- 44. The data for 2022 did not identify the number of children who have Down Syndrome though provided the number of children with special educational needs and/or disabilities. The data for Hampshire in 2022 is set out below.

	Easter	Summer	Christmas
Eligible children attending HAF schemes	5,922	11,652	5,637
Children with SEND	623	1,425	695

Percentage 10.5% 12.2% 12.3%

45. In commissioning providers to deliver the HAF activities, there is an expectation that all HAF provision is inclusive. However, for children or young people requiring some extra support to enable them to attend and fully participate in a HAF scheme, there is the opportunity for HAF providers to apply for supplementary funding via the HAF SEND support fund to facilitate this.

Public Health

- 46. Hampshire's Public Health Strategy 2023-2026 gives clear direction on how the Council will improve health and tackle health inequalities for all, shaping our work and partnerships. Development of the Strategy included engagement with a wide range of partners including those working with and representing CYP and their families (such as the Hampshire Parent Carer Network) and with the Hampshire Personalisation Expert Panel.
- 47. Public Health lead the Hampshire's population demographics to support planning across the broader system. This includes population level data on learning disabilities and SEND.
- 48. Within the Public Health Strategy, underlying strategies provide more detail as to how the Council will support the most vulnerable groups. As an example, the Mental Wellbeing Strategy 2023-2028 outlines one action to 'Improve pathways for people at greater risk of poorer mental health and wellbeing, starting with neurodiversity and self-harm' which includes working with children and young people with learning disabilities and another action to 'Develop place-based multi-disciplinary professional development and training focused on reducing health inequalities amongst those at greater risk of poorer mental health outcomes' with a focus on vulnerable populations as indicated by the Mental Health and Wellbeing Index³.
- 49. Public Health commission a range of services including universal services such as public health nursing and more specialist services such as sexual health services, domestic abuse services, drug and alcohol services, weight management services and stop smoking services. All services are required to comply with the Equality Act 2010. For example, the Domestic Abuse Victim and Perpetrator Services (delivered by Stop Domestic Abuse and the Hampton Trust respectively) 'support victims of domestic abuse aged 16 years or over, together with their dependant children aged 0-18 years, regardless of gender, ethnicity, disability, sexual orientation or relationship status'.
- 50. Some of these services include elements that are offered to the whole population, including people with disabilities, such as the Public Health Nursing service (provided by Southern Health NHS Foundation Trust) which

³ Mental health and wellbeing index | Health and social care | Hampshire County Council (hants.gov.uk)

leads on the delivery of the Healthy Child Programme. This service ensures equitable access to all providing more targeted support where required through different levels of service; universal, universal plus (time-limited additional support for a specific issue) and universal partnership plus (more specialist, often multi-agency level support). In addition, they offer the Family Nurse Partnership, which is an intensive support programme for pregnant young people supporting their transition to parenthood for the first two years of their baby's life). Whilst every child is eligible for this service, some may choose to opt out of specific elements if they have complex needs and are already under the care of more specialist services (e.g., a paediatrician).

- 51. Public Health work in partnership with Children's Services to deliver Hampshire Health in Education (HHiE), a service that supports education settings to take a whole setting approach to health and wellbeing for the children and young people in their care (and their staff). Within this work, the HHiE school surveys are delivered every two years in the Autumn term and this year, there is an easy-read version and an additional survey tool for pupils with complex needs to ensure all CYP have the opportunity to contribute their voices to the datasets that then inform service planning across the system.
- 52. Public Health work in partnership with HCC Insight and Engagement Unit on a Community Researchers programme, this is a community participatory research programme which enables in-reach into less often heard communities and empowers individuals from these communities to undertake research to inform public health campaigns and interventions. This programme was initially focussed on black and other ethnic minority communities as a response to the Covid-19 pandemic but there is potential to work with children with learning difficulties and their families in the future.

Communication & Interaction (C&I) Service

- 53. This service has three Speech and Language Therapists (SaLTs) who are specialists in Down Syndrome with post graduate training in supporting the Speech Language and Communications Needs (SLCN) of children and young people who have this syndrome.
- 54. An additional SaLT is being developed currently.
- 55. The service also has a Down Syndrome clinical support document and the whole team are trained in the learning profile and needs of those with Down Syndrome.
- 56. There are assessment procedures for the speech therapy and communication needs for those with Down Syndrome, and intervention guidance for clinicians to ensure consistent evidence-based therapy and support.
- 57. The team has representation on the working group and Clinical Excellence group for Down Syndrome support linked to the Portsmouth Down's

Syndrome Association.

- 58. The C & I Service are also developing:
 - A care pathway for communication support and good practice guidance
 - A Moodle page and information toolkit into learning profiles and support needs
 - Training for Hampshire colleagues
 - Training for schools as a sold service

Short Break Activities

- 60. The County Council's Short Breaks are inclusive and as such, those with Down Syndrome are not specifically identified or recorded in our systems, rather a child or young person with Down Syndrome would be able to access Short Break activities in their local area once they had applied for a Gateway Card+: Gateway Card and Gateway Card + | Children and Families | Hampshire County Council (hants.gov.uk)
- 61. Hampshire's Short Breaks programme includes activities for children and young people at weekends and during school holidays, as well as for older young people via youth clubs.
- 62. The Community Buddy scheme is also part of the programme and offers children and young people one to one support in accessing the community. These can all be accessed by a child or young person with Down's Syndrome via the Gateway Card+ scheme. (A recent survey of the 25 funded Short Breaks providers resulted in 11 responses, of which nine support 21 children and young people with Down Syndrome across the different schemes.)
- 63. For families visiting to attractions such as Paulton's Park, Birdworld or the Sealife Centre, the Gateway Card evidences to these organisations that the child or young person may need additional support, equipment or a carer to join them for example. The list of where the Gateway Card is recognised can be found here: Gateway Card | Family Information and Services Hub (hants.gov.uk)

Children and Families Social Care Services

- 64. Children with disabilities are offered support from either Early Help or where the threshold is met for a service from the Disabled Children's Team (DCT), via that specialist team.
- 65. Services are offered following a thorough assessment of need and against a set of eligibility criteria. Whilst the needs arising from a disability are key to

- this, the type of disability is not. There is not a specific service or intervention for Down Syndrome for example.
- 66. Currently the assessed needs of children and young people with disabilities are met through a range of services:
- 67. Personal budgets can be used flexibly to purchase equipment or services to meet the needs identified in a child's care plan. This option has recently undergone a refresh whereby social workers are being encouraged and supported to be creative and innovative with how best to meet needs via this funding route. It gives families choice and control over their support and is a personalised approach.
- 68. Care Support is a commissioned service whereby an agreed number of hours of support are approved and Care Quality Commission registered providers are provided with referrals for a support worker to come to the family home or take the child or young person into the local community, either for shorter periods during the day or having a carer stay in the home overnight. This could be with or without the parents in the home.
- 69. Technology Enabled Care. Argenti is Hampshire's assistive technology partner. Working closely with the Disabled Children's Team social workers and families, Argenti will recommend and supply a technology-based intervention to support the child's care plan. These interventions can offer support in areas such as night-time routines, epilepsy monitors, flooding and fire detectors. Phone applications which can help reduce a child or young person's anxiety and improve their ability to be more independent can also be provided where appropriate. 147 have been referrals received since project start in 2015 and 99 CYP currently receiving TEC. There were 17 referrals received in 2021 and 16 of those are still actively receiving TEC.
- 70. Sleep Support Service the service is in its 4th year of successful delivery and supports an increasing number of families year on year with specialist sleep advice and support. Additional spaces have been secured for year 5 (from September 2022) and will see a further 50 families receiving support.
- 71. Similar to Care Support, the option of a Direct Payment worker/PA in Care is another way of commissioning care and support hours. This option sees the family being the direct employer of the support worker; they are responsible for the recruitment and payment of the staff member. There is an additional service in place to support families with this option so they can fully understand their role and responsibilities; Direct Payment Support Service which is delivered to families in receipt of direct payments and is managed via a provider called Enham.
- 72. The Children & Families Occupational Therapy Team continues as they always have done to provide aids and adaptations to disabled children and their families to aid mobility and access around the home, and to better enable these children's care needs to be met at home. This can be seen as

- an early intervention or preventative-type provision which can prevent escalation of needs.
- 73. Where the child and family have additional needs due to the impact of the child's disability or there are other needs in the family that require support, it may be that access to overnight respite might be necessary. This can take place in a children's home designed to offer such a service or by a foster carer. The number of nights allocated would be dependent on a detailed assessment of need and care plan.
- 74. In addition to the current provision listed in the section above, new ways of meeting respite needs are also being developed such as Activity Breaks where a child/young person accesses an activity centre for a day or overnight and enjoys a range of activities provided by trained instructors and supported by experienced care staff.
- 75. Home from Home care is a form of respite for families. Specialist respite carers are registered foster carers who are linked to a family to provide overnight respite for children. Home from Home respite carers, with the support of their supervising social worker from the Children's Services Fostering Team and the child's social worker, provide breaks which can be for a few hours at a time or can be overnight, depending on the needs of the family.
- 76. Family Breaks are another option that can be commissioned or funded via personal budgets; these can provide a break where the whole family can enjoy time away together in an accessible environment.

Health Services

- 77. Following the 2022 Health and Care Act the ICB has appointed an Executive Lead for Down Syndrome as per the guidance: NHS England » Executive lead roles within integrated care boards
- 78. This individual will lead on supporting the chief executive and the board to ensure the ICB performs its functions effectively in the interest of people with Down Syndrome.
- 79. The responsibilities of this role include, but are not limited to, the following:
 - Supporting the ICB chief executive and the board to ensure the ICB meets
 the legal requirements of relevant legislation, including the <u>Down syndrome</u>
 <u>Act</u> (2022) and relevant legislation or statutory guidance. This shall include
 ensuring that statutory guidance is implemented and considered
 throughout the ICB's commissioning decisions and at the system and local
 level.
 - Championing and supporting improvements in outcomes for children, young people and adults who have Down syndrome in the ICB's area, including having oversight of how the needs of people with Down syndrome are being included in commissioning decisions and how those decisions

- and commissioning plans are co-produced with people with lived experience of down syndrome.
- Working closely with people with Down syndrome and their families so that their experiences of care, good outcomes, and issues and challenges in accessing the support they need are considered during the design, implementation and commissioning of services.
- Ensuring feedback, concerns, comments and complaints from people with Down syndrome, as well as their families, community groups and organisations – including user-led and self-advocacy organisations – are acted upon in a timely manner at the local level. <u>Ask, Listen, Do</u> resources can help."
- 80. Services from the NHS will depend on the severity of Down Syndrome and can range from a lifetime of cardiac support including surgery and regular health checks from the Community Care Nurse team to low level physical issues which would be managed through the child's GP.

Hampshire Parent Carer Network

- 81. In terms of other support available Hampshire Parent Carer Network (HPCN) offers support to parents and carers of children and young people aged 0-25 with any additional needs, or disability including Mental Health (diagnosed or undiagnosed) They do this in several ways:
- 82. When a parent or carer joins as a member of HPCN, they can access sessions, events and training opportunities. HPCN send out a monthly newsletter full of information and ways to get involved.
- 83. Parent Reps and Steering Group HPCN parent representatives attend several meetings and work streams with Hampshire County Council and other key stakeholders like health. Parent carers attend these meetings to give first hand experience and input to the decision makers- representing the views of parents across Hampshire. A steering group manages the strategic running of the forum and the future direction.
- 84. Social media HPCN has a very active Facebook page:

 https://www.facebook.com/HampshireParentCarerNetwork. This page is updated regularly with lots of helpful info like consultations, session dates and more. They also have eight local pages across the districts in the county, where parents can offer peer support, share experiences and share local information. HPCN also has a twitter page:

 https://twitter.com/HampshirePCN
- 85. Get Togethers are for parent carers of children and young people (0-25 years old) with any additional needs (diagnosis not needed). They are intended to share experiences, discuss local issues and share experiences and seek support from other parents at non-judgemental, friendly, and relaxed sessions. They provide the opportunity to share views about the services that support children and young people. Get Togethers sessions run once a

month in the following areas - Hart & Rushmoor, Basingstoke, Winchester & Eastleigh, Alresford, Test Valley & New Forest, Fareham & Gosport, Havant & Waterlooville. There is also Under 5's Online, Daytime Online, Evening Online.

- 86. SENDIASS workshops Hampshire Parent Carer Network and Hampshire SENDIASS (Impartial Special Educational Needs and Disability Information, Advice and Support Service) lead joint sessions which are facilitated by HPCN. These workshops will have a monthly Education topic and will be delivered by a SENDIASS support worker.
- 87. Parent Led Engagement These take place once a month with HPCN, Hampshire SENDIASS and a SEN Manager from the County Council. They give parents the chance to ask a general education query (not specifically about their own case).
- 88. Meet the SEN Team Each term, HPCN offer an opportunity to meet representatives from Education, Health and Social Care this will be online on zoom. Each rep will give a brief update, followed by an opportunity for parents/carers to any questions.

Consultation and Equalities

89. This report is for providing information only and therefore consultation and equalities assessment did not form part of this report.

Climate Change Impact Assessment

- 90. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.
- 91. Climate Change Adaptation and Mitigation. The carbon mitigation and climate change adaptation tools were not applicable because this report is to provide details of the contribution of Hampshire County Council to the delivery of youth services and does not recommend changes or require any decisions which would have any climate change considerations.
- 92. Carbon Mitigation. The carbon mitigation and climate change adaptation tools were not applicable because this report is to provide details of the contribution of Hampshire County Council to the delivery of youth services and does not recommend changes or require any decisions which would have any climate change considerations.

Conclusions

- 93. Hampshire County Council and partners are committed to delivering services for young people in Hampshire, including those with additional needs such as Down Syndrome.
- 94. This report provides an overview of the rich tapestry of services and support offered to children with Down Syndrome and their families in Hampshire, which Hampshire County Council and/or partners are directly involved in facilitating, supporting and/or funding. As the reports evidences, across the partnership there is a diverse range of support services, activities and engagement programmes for young people in Hampshire to access

Appendix 1 Teaching Strategies for children with Down Syndrome

Key strategies which should be part of high-quality inclusive teaching and ordinarily available provision in any setting will include:

Hearing

- Make sure that the child is sitting near the front of the classroom.
- Ensure the child is wearing their hearing aids if needed.
- Give the child the benefit of the doubt if they appear not to be listening.
- Cue the child by name when giving an instruction or asking a question.
- Provide visual materials to support the spoken word, including visual timetables and pictures of the topic at hand.
- Use a buddy system, so that the child with DS is not left behind just because they missed an instruction.
- Pre-teach new material in a quiet setting, such as within a small group of peers.
- Alert the parent if there seems to be a change. Reduced hearing is more evident in a noisy classroom than at home.
- Take advice from visiting teachers for the hearing impaired, and use a radio aid or sound field system if recommended.

Speech and Language

- Accept that language is a significant difficulty and adjust your own language to compensate.
- Use short, simple sentences.
- Allow processing time: count to 10 before you say anything else!
- Use positive sentences. It is much easier to understand "we walk in the corridor" than "don't run in the corridor". In the first sentence the key word is WALK. In the second sentence, the key word is RUN.
- Think about word order. "We will go to the playground after you have finished your snack" will probably be understood as "playground, then snack" by a child who has difficulty processing language, leading to frustration all round!
- Don't give multiple instructions in one sentence. The child with DS is likely
 to pick up on either the first or the last and be oblivious to the others. (For
 example: It's time to finish your work, put your books in your bag, get in
 the line, we are going to the hall is actually 4 instructions)
- Use visual supports, visual timetables, lists, pictures, etc. to support understanding. (And make sure to include the written word along with any pictures, as repeated exposure to the written word will help develop sight word recognition)
- Pre-teach vocabulary, ideally ahead of classroom topics.
- Over time, language and literacy tend to develop in tandem. Children with DS need the best standard of literacy teaching. This is because the majority of children with DS have clearer speech when reading, and that written language is a flexible way of communicating. It requires minimum equipment (is low tech) and it is widely understood.

Working memory

- Present materials visually. If the class is doing oral language work, give the child a list with a small number of key points that are mentioned repeatedly to listen out for (in words or pictures)
- Use physical prompts or lists. If the child is going to fetch the paints, he is more likely to remember if he is carrying a paint brush.
- Children with good literacy skills could bring a note with the word "paints" on it. Practice! Working memory improves with practice.
- Play games where the children listen to 3 words and identify the odd one
 out. Help children to develop their own strategies. This is likely to be a
 long-term problem, so learning to write (and use) a reminder or a list will
 be essential.

Vision

- Use large print with good contrast (18-20pt font size, black on white).
- Use good, clear, colourful pictures. Bold, saturated colours are better than pastels.
- Remember this applies when the child is writing as well as reading. The
 child who is writing with pencil may not be able to see what they have
 written and the pale blue lines in exercise books are probably virtually
 invisible. A black marker pen on thick black lines may be needed.
- Be alert to changes in font size. For example, moving to more complex reading books often means smaller print. It's easy to think the child has reached a plateau, when actually they are struggling to see the words.
- Consult a teacher for the visually impaired

Motor

- Use marker pens, roller balls and biros, rather than pencils, so that the child doesn't have to maintain downward pressure (And move on to typing relatively early)
- Consult with an Occupational Therapist regarding seating etc. (If all your attention is focused on balancing on your chair, it's hard to learn!)
- Take frequent movement breaks taking something to the office, fetching something from the back of the room, helping someone to find something. These are all unobtrusive movement breaks. The balance between "sitting and working" and "moving around" changes as children move up through the classes, but because motor development is slower in children who have DS, they may struggle to concentrate if they don't have regular breaks

Medical

- Be aware of possible exhaustion. Tackle new concepts early in the day, leaving easier activities for when the child is tiring.
- Have a few, favourite activities at hand for when the child is really not able to cope. In the early years, a quiet corner for a short nap might be helpful.

- Give well targeted and properly matched homework. If the child is already exhausted going home from school, they are unlikely to be able to complete lengthy homework.
- Be aware that if a child has a cold, hearing is likely to be impacted.
- Be observant and communicate any concerns promptly. Sometimes changes in energy, vision or hearing can be more evident in the classroom.

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

growth and prosperity:	yes/no				
People in Hampshire live safe, healthy and lives:	independent	yes/no			
People in Hampshire enjoy a rich and divers	se environment:	yes/no			
People in Hampshire enjoy being part of str communities:	yes/no				
OR					
This proposal does not link to the Strategic Plan but, nevertheless, requires a decision because: NB: Only complete this section if you have not completed any of the Strategic Plan					
tick boxes above. Whichever section is not	applicable, please o	delete.			
NB: If the 'Other significant links' section below is not applicable, please delete it. Other Significant Links Links to previous Member decisions:					
<u>Title</u>		<u>Date</u>			
Direct links to specific legislation or Government Directives					
<u>Title</u>		<u>Date</u>			
Section 100 D. Level Covernment Act 107	hookaround door	ımonto			
Section 100 D - Local Government Act 1972 - background documents					
The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)					
Document	<u>Location</u>				
None					