



# Public Document Pack


## Southend-on-Sea City Council

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06 December 2024

### HEALTH & WELLBEING BOARD - TUESDAY, 10TH DECEMBER, 2024 SUPPLEMENTARY REPORTS PACK: AGENDA ITEMS 7, 9 AND 10

Please find enclosed, for consideration at the next meeting of the Health & Wellbeing Board taking place on Tuesday, 10th December, 2024, the following report(s) that were unavailable when the agenda was printed.

#### Agenda Item No

**7**      **SEND Reporting (18.05) (Pages 3 - 60)**

Report of SEND Project Officer

**9**      **Ageing Well, Caring Well and Living Well Strategies (18.40) (Pages 61 - 96)**

Report of Lead Commissioner (Older People)

**10**     **Better Care Fund Update (for information) (Pages 97 - 104)**

Report of Lead Commissioner (Older People)

Rob Harris  
Principal Democratic Services Officer



**Meeting:** Health and Wellbeing Board  
**Date:** 10<sup>th</sup> December 2024  
**Classification:** Part 1  
**Key Decision:** No  
**Title of Report:** **SEND and Strategic Action Plan Update**

**Executive Director:** Micheal Marks  
**Report Author:** Matt Small, SEND Consultant

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## **Executive Summary**

**1.1** To update the Health and Well-being Board on the SEND Area Strategic Action Plan progress

## **Recommendations**

- 2.1** To note progress
- 2.2** To request a further update on the area's progress in implementing the action plan in 6 months
- 2.3** To agree the Self Evaluation Framework (SEF)

## **3. Background**

**3.1** The Area Send inspection is a joint inspection, carried out by Ofsted and the Care Quality Commission (CQC) which looks at the local area's partnership SEND arrangements. The Inspection framework was revised in January 2023 and Southend was the 4<sup>th</sup> area to be inspected under the new framework.

**3.2** Under the revised 2023 Area SEND Inspection framework there are 3 possible outcome judgements for the SEND Inspection:

- 1. The local area partnership's SEND arrangements typically lead to positive experiences and outcomes for children and young people with SEND. The next Area Inspection will be within 5 years and the Area should produce its strategic action plan within 30 days of the published outcome.
- 2. The local area partnership's arrangements lead to inconsistent experiences and outcomes for children and young people with SEND. The next area inspection will be within 3 years and the Area should produce its strategic action plan within 30 days of the published outcome.

3. There are widespread and/or systemic failings leading to significant concerns about the experiences and outcomes of children and young people with SEND.

**3.3** The outcome for Southend was judgement 2 which was an improving position from the Written Statement of Action which arose from the last inspection. An Area Strategic Action plan was produced to address 6 recommendations, and this is being monitored by the DFE/CQC jointly. The inspection was carried out between the 6<sup>th</sup>-10<sup>th</sup> March 2023 with the final report being published in June 23.

**3.4** The 6 recommendations as set out in the Action Plan are as follows:

1. The local area partnership and stakeholders, including the council, the Integrated Care Board and wider partnership, should ensure that leaders in education, health and social care are empowered to drive forward improvements at pace so that the Southend SEND Partnership strategy impacts positively on the experiences and outcomes of all children and young and people with SEND.
2. The local area partnership should evaluate the quality and impact of services and joint working more effectively, to inform improvements that lead to better outcomes and experiences for children and young people with SEND.
3. Local area partnership leaders should improve the effectiveness of joint working to support the co-production of EHC plans and annual reviews so that at each stage the provision that is planned takes full account of children's and young people's current and changing needs.
4. Local area partnership leaders should ensure that they share accurate data across health, education and social care to support rigorous and effective self-evaluation and inform joint commissioning.
5. The local area partnership should ensure that appropriate support is in place from health services for children and young people who are awaiting health needs assessments, so that early intervention reduces the risk of any escalation of concern.
6. The local area partnership should make sure that parents and carers and professionals receive clear and reliable information about how to access the range of support and services that are available.

## **Section 4. Strategic Action Plan progress**

**4.1** A detailed outline of all activity and progress is set out in the annual SEND Strategy Update report which is now publicly available and included as **appendix 1**. Below are summary headlines outlining areas of activity and progress.

### **4.2 Progress towards recommendation 1.**

Investment in SEND services and new governance arrangements have led to an ambitious transformation providing clearer functions for reporting and tracking progress across the partnership creating new roles within the ICB to support the SEND and Children's agenda. New governance arrangements are set out in **appendix 2**.

The strategic Area Partnership Board now has clearer oversight of delivery and impact of services which allows leaders across the partnership to be held to account for delivery of services. The newly developed area Self Evaluation Framework (SEF) is fully reflective of the whole SEND/AP system. The SEF will be revisited and updated following next year's Joint Special Needs Assessment (JSNA) and the outcomes from year 2 of the Strategic Action Plan delivery. The SEF is included in this report for agreement and sign off from the Board. **appendix 3**.

Increased stakeholder engagement has been achieved through the creation of strategic sub-groups to support wider understanding and engagement to inform the shaping of services in the future.

The Children's Joint Commissioning Group (CJCG) has been created and will be meeting bi-monthly from January 2025, draft terms of reference are included at **appendix 4**.

#### **4.3 Progress towards recommendation 2.**

A range of additional services have been created to improve identification of need, assessment and intervention across early years and schools providing a robust offer of additional expertise, training and guidance to practitioners in settings.

Development across early years services and Preparing for adulthood (PfA) are supporting increased identification of need in early years, improved transitions across the age range and the development of jointly agreed outcomes for children and young people.

Strengthened work across Inclusion and attendance services is promoting increased attendance and the increased support is leading to improved outcomes for those pupils returning from pilot programmes and alternative provision.

There is an increased offer to support mental health in schools from additional services within the local authority and joint work across the partnership to prevent admissions to inpatient mental health settings.

#### **4.4 Progress towards recommendation 3.**

Interim resources have been provided to increase the capacity of statutory SEND assessment, review and Educational Psychology teams to implement a range of recovery programmes around statutory assessment delay and to improve response the statutory review processes.

An external audit has been undertaken to identify gaps and weaknesses in the current SEND service business processes and the recommendations will form an action plan which will support service redesign and future capacity requirements. The recommendations from the audit will be reviewed against existing actions and evaluation in the SEND Action Plan monitoring and SEF to ensure consistency.

Individual quality assurance processes have been developed and ongoing work is in place to further develop the Quality Assurance Framework and multi-agency audit process.

#### 4.5 Progress towards recommendation 4.

Work is progressing across the Mid and South Essex Business Intelligence team and Southend City Council to develop a joint SEND dashboard and developments have been made to improve internal reporting across partnership areas to provide further insight into key metrics and demographics. Operational teams are routinely reporting on data and activity to inform future actions.

Improved data is being provided through publicly available systems and the co-produced Joint Strategic Needs Assessment (JSNA) has now been completed.

#### 4.6 Progress towards recommendation 5.

Additional support for children, young people and families around Autism Spectrum Disorder (ASD), Attention Deficit Hyperactivity Disorder (ADHD) across face to face and virtual platforms has been provided through the Essex Partnership University NHS Foundation Trust (EPUT) and additional resources have been launched to support those with sensory needs.

Increased information has been made available through a range of services to support increased awareness of referral pathways, online information, guidance and additional support and resources whilst awaiting diagnostic outcomes or support for a range of needs such as EPUT and Child and Adolescent Mental Health Services (CAMHS). In addition a portal has been launched to support ASD and ADHD referral pathways and provide increased information and guidance for children, young people and families.

#### 4.7 Progress towards recommendation 6.

A range of engagement activity and events in conjunction with the Parent Carer Forum have increased the participation of families in strategic planning activities.

Seminars, surgeries and community events been provided with themes and topics devised and informed by families have helped to develop information and process guidance for parents and carers on publicly available forums around SEND processes.

Additional activity has taken place to ensure the Local Offer website is more accessible and content is kept under review following feedback from the engagement activities to support future development and increase participation.

### **5. Impact to date**

**5.1** There is strengthened governance and arrangements in place for performance monitoring. All Area Partners understand the impact of service delivery and the key issues.

**5.2** Improvements in the system have strengthened the quality of services.

**5.3** Data shows that there is increased output of new EHC assessments within timescale as 2024 progressed and reductions in those waiting for completion of EHC assessments.

**5.4** There is greater understanding across the Partnership on the impact of service delivery and identified risks and challenges.

**5.5** A number of initiatives have been launched across health providers to provide additional support to children and young people and their families waiting for assessments.

**5.6** There are significantly improved communications to stakeholders from across the SEND Partnership, and families are more aware of where to access advice and support or information.

## **6. Ongoing priorities for 24/25**

**6.1** Continued work through the new governance structures to ensure continued engagement of Health commissioners and service providers around the joint responsibility for SEND.

**6.2** Continued development of quality assurance frameworks that will evaluate and demonstrate impact on children and young people's outcomes and experiences.

**6.3** Managers across health, education and social care to embed processes to quality assure statutory advice for EHC assessment and annual reviews and work together to strengthen data reporting mechanisms.

**6.4** To implement the recommendations for the Statutory SEND services set out in the external audit action plan which is due to be released in the new year leading to continued improvement in achieving key statutory deadlines in relation to EHC assessment and review.

**6.5** Redesign of Statutory SEND services to ensure increased capacity of the assessment, plans, reviewing and tribunal officers within the establishment to meet statutory timelines and ensure children needs are met at the right time with the right support.

**6.6** Needs assessment of current specialist and alternative provision places and ensure place forecasting and plans for increasing provision is suitable for the forecast increased needs within the city

**6.7** Develop and finalise the Southend Area Partnership Quality Assurance Framework

**6.8** To finalise completion of the Area Partnership Outcomes Framework and key metrics to provide a joint data dashboard that will inform wider commissioning and delivery priorities.

**6.9** Evaluate the user experience for all community health services so that support to families that are waiting for assessment is consistent across all pathways.

**6.9** Strengthen the strategic engagement of children and young people with SEND so they are more involved in the wider decision-making of the area.

## **Appendices**

- **Appendix 1**: Strategic Action plan annual update report

- **Appendix 2**: Southend Area Partnership Governance Chart
- **Appendix 3**: Area Self Evaluation Framework (SEF)
- **Appendix 4**: Children's Joint Commissioning Group draft Terms of Reference



# Southend SEND Area Partnership

## Update on Key Strategy Activity and Next Steps

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October 2024

# Update on Key Strategic Activity and next steps

In March 2023 the Southend-on-Sea Local Area Partnership was subject to a focussed Area SEND inspection from Ofsted and the Care Quality Commission (CQC).

The inspection found that “The local area partnership’s arrangements lead to inconsistent experiences and outcomes for children and young people with special educational needs and/or disabilities (SEND). The local area partnership must work jointly to make improvements”.

In July 2023 the partnership produced and published a single strategic action plan in response to the inspection outcome which focussed on 6 recommendations. The action plan set out the local area’s plans to jointly deliver its priorities and improvements against these recommendations.

In May 2024 we produced a summary on the first year of delivery of the strategic area action plan, showing the key activity and impact. This leaflet provides a further update and confirms the refocussed priorities for 2024-25.

For more detailed updates and to view the strategic action plan visit [www.southend.gov.uk/SENDStrategy](http://www.southend.gov.uk/SENDStrategy) On this page you can also provide your feedback, ask questions or make suggestions on the areas progress.

### **Recommendation: 1**

Leaders in education, health and social care are empowered to drive forward improvements at pace so that the Southend SEND Partnership strategy impacts positively on the experiences and outcomes of all children and young and people with SEND.

**What we wanted:** An integrated system for Alternative Provision and SEND where partners work collaboratively to routinely review progress and challenges, agreeing new priorities and improvement work.

#### **What we did:**

- More investment in SEND services which has led to an ambitious education transformation programme and service reshape.
- New governance arrangements have led to clearer functions for reporting and tracking progress against strategic action plan across meetings and the wider Area Partnership.
- The review of the Integrated Care Board has been completed with roles identified that support the SEND and Children's agenda.
- Leaders in Health, Education and Social Care are held to account on the delivery of services.
- SEND Strategic Board members have clearer oversight of the delivery of SEND Services and the impact of them.
- The new Self Evaluation Form (SEF) reflects the whole SEND and AP system and has been co-produced by all partners.
- There is greater stakeholder engagement through the creation of the SEND Headteachers Forum and Educational Strategy Group as schools are more engaged with the shaping of services and have a better understanding of the wider picture.

**The difference it made:** There is strengthened governance and arrangements in place for performance monitoring. All Area Partners understand the impact of service delivery and the key issues.

**Priority 2024-25:** Health commissioners and provider services understand their joint responsibility for SEND improvement.

## **Recommendation: 2**

The local area partnership should evaluate the quality and impact of services and joint working more effectively, to inform improvements that lead to better outcomes and experiences for children and young people with SEND.

**What we wanted:** To evaluate gaps in the system which would inform an education improvement programme.

### **What we did:**

- Created a central Early Years Service and a central Specialist Teaching Service to strengthen support and advice to settings and school.
- Aligned the Early Years SEND advisory team with the integrated Early Years service to strengthen joint working and support settings in identification of need and seamless transitions across the Early Years sector.
- Outlined a SEND Therapies project from September 2024 to include speech and language and occupational therapy consultancy for schools.
- 46 maintained and special schools have signed up for Relational Practice training.
- Strengthened targeted support to schools from the Access and Inclusion Team to reduce exclusions and raise attendance.
- Commenced Wave 2 Mental Health Support Teams in schools to widen the offer of early support.
- Implemented an all age Dynamic Support Pathway (DSP) with multi agency partnership working to prevent avoidable admission to a mental health inpatient setting.
- Provided improved outcomes for children and young people who have transitioned back to mainstream after accessing pilot and existing Alternative Provision pathways.
- Increased attendance at Year 9 Annual Reviews from the Preparing for Adulthood (PFA) team to provide advice, guidance and training for SENDCOs so that PFA outcomes are jointly agreed.

**The difference it made:** Improvements in the system have strengthened the quality of services.

**Priority 2024-25:** Quality assurance frameworks that will evaluate and demonstrate impact on children and young people's outcomes and experiences.

### **Recommendation: 3**

Local area partnership leaders should improve the effectiveness of joint working to support the co-production of Education Health Care (EHC) plans and annual reviews so that at each stage the provision that is planned takes full account of children's and young people's current and changing needs.

**What we wanted:** To ensure EHC plans reflected multi agency outcomes and the age and stage of the young person.

#### **What we did:**

- Carried out internal evaluation and an external audit of the SEND Team to identify improvement priorities.
- Increased capacity of the Educational Psychology (EP) Service to support timeliness of EP advice as part of the EHC needs assessment process.
- Increased staffing within the SEND Assessment and Review teams to match demand.
- Strengthened quality assurance processes within individual teams to ensure the quality, timeliness and content of EHC plans improves.
- Commenced work on a multi-agency Quality Assurance framework around EHC assessment and EHC plans that will establish a baseline quality for new and existing plans, identifying areas to target for development.
- Implemented reporting processes to track timeliness and quantity of advice obtained during assessment/review.
- Provided additional resource routes to schools to ensure there was support for children and young people during assessment delays.

**The difference it made:** Data shows that there is increased output of new EHC assessments within timescale as 2024 progressed.

**Priority 2024-25:** Managers across health education and social care to embed processes to quality assure statutory advice for EHC assessment and annual reviews and work together to strengthen data reporting mechanisms.

#### **Recommendation: 4**

Local area partnership leaders should ensure that they share accurate data across health, education and social care to support rigorous and effective self-evaluation and inform joint commissioning.

**What we wanted:** Joint data dashboards.

**What we did:**

- The Mid and South Essex (MSE) Business Intelligence team have developed an initial version of a SEND dashboard covering a variety of health metrics sourced from various partner organisations.
- Internal Southend-on-Sea City Council (SCC) SEND reporting now includes new functionality and interactivity for further insight on key education metrics and demographics of the EHC plans maintained by Southend-on-Sea.
- Individual teams and services routinely report data on caseload and activity through operational meetings for scrutiny and challenge.
- The publicly available SEND Profile Data Tool has been updated to include 2024 outcomes from the school census and SEN2 data collections.
- The co-production of a SEND Joint Strategic Needs Assessment is almost complete.

**The difference it made:** There is greater understanding across the Partnership on the impact of service delivery and identified risks and challenges.

**Priority 2024-25:** To create an Area Partnership Outcomes Framework and key metrics to complete a joint data dashboard that will inform wider commissioning and delivery priorities.

## **Recommendation: 5**

The local area partnership should ensure that appropriate support is in place from health services for children and young people who are awaiting health needs assessments, so that early intervention reduces the risk of any escalation of concern.

**What we wanted:** Families know where to find support whilst waiting for assessment and that they are given the right information at the right time.

### **What we did:**

- Essex Partnership University NHS Foundation Trust (EPUT) have been providing Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) support sessions for parents and carers of children and young people with or awaiting a diagnosis. These take place across a number of community venues as well as virtual sessions.
- Kids Autism Hub launched to provide online support for children and young people newly diagnosed or on the diagnostic pathway and their families.
- Sensory Awareness Toolkit launched by the Essex-wide Occupational Therapy group to support families and education settings in supporting young people with sensory differences/difficulties.
- EPUT has ensured their web pages have information about routes to referrals, assessment and treatment pathways. Resources are also available to provide support and advice for families whilst waiting for assessment.
- Southend Essex and Thurrock (SET) Child and Adolescent Mental Health Service (CAMHS) website outlines resources available to support a range of difficulties as well as clear information on referral routes and what to expect next. This includes voluntary sector services such as online counselling, for example KOOTH.
- My Care Bridge, a new online portal for referrals for ASD and ADHD services in Mid and South Essex has launched. Families and settings can access supporting information and resources whilst viewing the status of their referral.

**The difference it made:** A number of initiatives have been launched across health providers to provide additional support to children and young people and their families waiting for assessments.

**Priority 2024-25:** Evaluate the user experience for all community health services so that support to families that are waiting for assessment is consistent across all pathways.

## **Recommendation: 6**

The local area partnership should make sure that parents and carers and professionals receive clear and reliable information about how to access the range of support and services that are available.

**What we wanted:** Families to understand where to go for accurate support, advice and information and understand improvements across the area partnership.

### **What we did:**

- The Local Offer Team and the Parent carer Forum launched the SEND Network.
- Feedback obtained via the SEND Network shaped a project plan scoping out the development of 11 roadmaps. 5 roadmaps that outline SEND processes have been created.
- There has been an increase in participants co-producing information through engagement activities.
- Supported the Parent Carer Forum to hold termly SSIF seminars on topics voted for by families.
- Increased subscribers to the SEND Partnership monthly e-newsletter (Peer into Southend SEND).
- Engaged widely with families across the city to help parents and carers to navigate the local offer and access the right support in a timely way. Through SEND Surgeries in local schools, coffee mornings and other community events.
- Launched the new accessible Livewell platform hosting the Local Offer.
- Continually reviewed the Local Offer website with families and young people.
- Identified a number of SEND Champions from local groups and organisations via the SEND Network.

**The difference it made:** There are significantly improved communications to stakeholders from across the SEND Partnership, and families are more aware of where to access advice and support or information.

**Priorities 2024-25:** Strengthen the strategic engagement of children and young people with SEND so they are more involved in the wider decision-making of the area.

SEND champions are operational.





Southend on Sea  
City Council

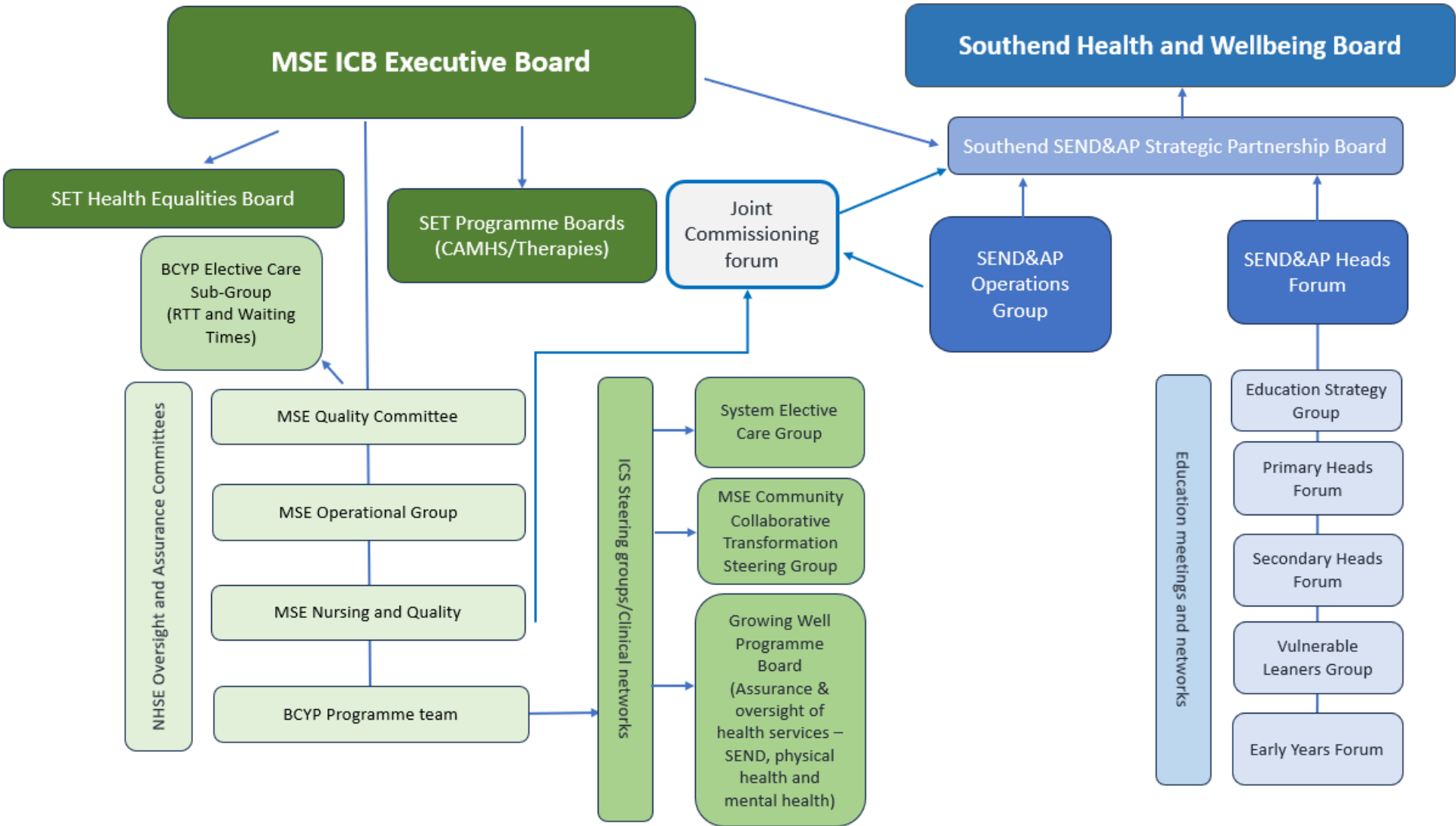
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Mid and South Essex  
Integrated Care  
System

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**SOUTHEND SEND AREA PARTNERSHIP  
GOVERNANCE STRUCTURE**



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# **Southend SEND Area Partnership: Special Educational Needs and Disability (SEND) Self Evaluation**

**Date: 10 October 2024**

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Assessment of current arrangements and their impact for children and young people with SEND

**Page 31**    **Part C**

Actions and Priorities for the next 12 months to improve the experiences and outcomes of children and young people with SEND.

# Introduction

The Southend SEND Area Partnership consists of:

- Southend-on-Sea City Council
- Mid and South Essex Integrated Care Board (ICB)
- Commissioned Service providers including education settings, Essex Partnership University NHS Foundation Trust (EPUT) for Community Paediatrics, Public Health Services, North East London Foundation Trust (NELFT) for CAMHS services.

Collectively the Partnership works together to seek continuous improvement in the delivery of services so that it can ensure children and young people with SEND have the right support at the right time.

The Councils Cabinet portfolio holder, Southend SEND Independent Forum (SSIF), (the Department for Education funded Parent Carer Forum for Southend) Healthwatch, and colleagues from the DFE and Department of Health and Social Care sit on the SEND Strategic Partnership Board. The Board's function is to support and hold leaders in Health, Education and Social Care to account and to ensure that they are empowered to drive forward improvements at pace so that the Southend SEND Partnership strategy impacts positively on the experiences and outcomes of all children and young people with SEND.

For the Partnership, children, young people with SEND and their families is at the heart of the approach. We seek, wherever possible, to meet with, and learn from, our interactions with them. We seek to balance and interpret feedback from families and young people into broader areas.

The purpose of this Self Evaluation Form (SEF) is to help assess the performance of our arrangements for meeting the needs of children with special education needs and disabilities. This informs improvements that lead to better outcomes and experiences for children and young people with SEND.

When evaluating our work, we specifically had regard to the Ofsted and CQC judgement in March 2023 which determined that the local area partnership's arrangements lead to inconsistent experiences and outcomes for children and young people with SEND.

This evaluation aims to help us examine the impact of our SEND arrangements on the experiences and outcomes of children and young people with SEND and how we work together to plan, evaluate and develop the SEND system.

Our assessment:

- Sets out the context in which we work (Part A)
- Assesses the strengths and weaknesses of our current arrangements against the new SEND Inspection Framework (Part B)
- Sets out how the local area partnership will work jointly to make improvements over the next 12 months (Part C)

*This is an iterative and living document. It will be updated regularly to reflect changes and developments. Some of our data indicators (such as SEND 2 Data) is only updated annually. Other data changes more often. Where data has been used the source has been stated and includes a mix of internal and external reporting mechanisms.*

# Part A

## Context

Southend-on-Sea (Southend) is a unitary Local Authority within the wider County of Essex. It has held unitary status since 1998 and became a city in 2022.

Southend is the eighth most densely populated area in the UK (excluding London) and is the closest seaside resort to London. The city has seven miles of award-winning beaches and coastal nature reserves, over 80 parks and green spaces, 14 conservation areas and is home to the longest leisure pier in the world.

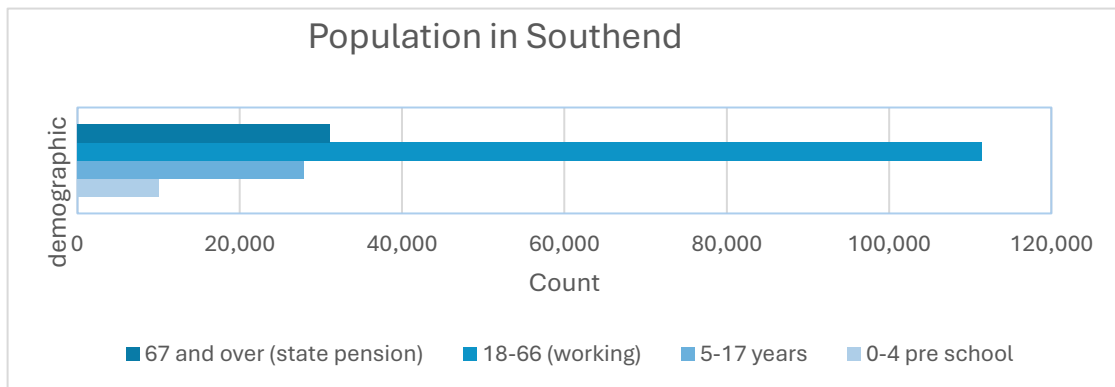
Southend is one of Essex's most deprived areas, it has a higher index of deprivation than both Essex and England as a whole. 9 areas are identified as being in the top 10% most deprived areas in England, conversely there are 13 areas ranked in the least 10% deprived.

Southend is increasingly diverse although the majority of children attending Southend schools, 70.5%, are White. The next largest groups are Asian/British Asian, 11.2%, Mixed/Dual heritage, 7.5%, and Black/Black British 7.9% \*

*\*January schools census 2024*

In Southend, there is a population\*\* of about 180,601, of whom:

- 51% are female and 49% male
- 21% are under the age of 17
- 17% are over the age of 67.



\*\*[www.smartsouthend.org](http://www.smartsouthend.org)

## Education provision

In Southend there is a wide range of educational provision to meet pupil need at a universal, targeted or specialist level including 105 Childminders, 16 school based nurseries, 26 day nurseries, 23 preschools, 33 infant and primary schools, 12 secondary schools (of which 4 are selective) 4 independent schools, 5 special schools, 2 registered Alternative Provision providers, a special free school, a number of Resource Bases (Enhanced Provision) that provide targeted support for pupils with Autism, Speech, Language and Communication Needs and Learning Difficulties.



As of April 2024, 100% of LA Maintained schools (all primary phase) were judged Good or Outstanding, for all schools in Southend 97% of Primary phase, 92% of Secondary phase and 100% of Special schools also met this standard. Additionally, 99.3% of Early Years settings were judged Good or Outstanding.

An analysis of all Ofsted inspections undertaken in Southend during 2023 suggests SEND provision comes through as stronger at primary than secondary. This is linked to teachers adapting the curriculum well to pupils' needs, which is stronger at primary. This is likely to be linked to primary teachers spending significant time with one group of pupils while secondary teachers encounter numerous different pupils over a week. There is work to do on ensuring all secondary teachers use the information they have to support all pupils with SEND.

**Key issue:** The lack of inclusivity in mainstream settings has led to an increased demand for specialist educational placements and alternative provision (AP) places and pathways. The demand is impacting on access to education which meets pupil needs and results in poor outcomes.

After consultation with parents/carers, schools, health and social care services, Southend has funded three alternative pilot AP pathways to respond to the growing need. The LA note that the demand for specialist educational placements at the early years stage through to school-age pupils, is increasing in line with complex needs EHC plans.

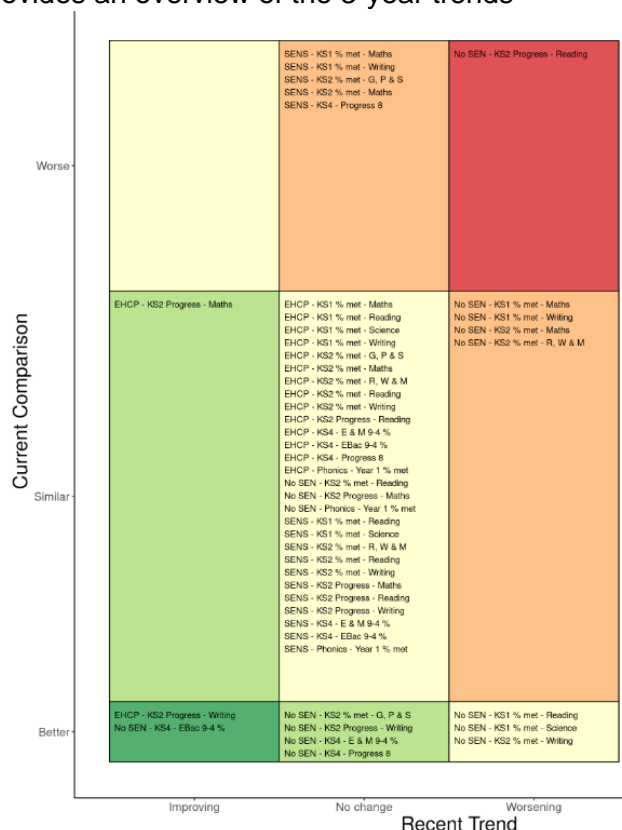
### Attainment and progress

Southend City Council's Operational, Performance and Intelligence team collect and analyse a significant amount of education data to help the area understand the attainment and progress of all pupils. The published Special Educational Needs Profile provides an overview of the 3-year trends both locally and nationally.

Largely pupils with an EHCP or at SEN Support are performing the same as those nationally at Key Stage 1,2 and 4. Those with an EHCP are performing better than the national average in Key Stage 2 (writing).

Locally there are some metrics that shows worsening performance against the national average for pupils without identified SEN needs.

There are also some SEN Support metrics across the Key Stages that show that some children and young people with SEND, including those with SEN support, are not achieving as well as they could in school.



## Attendance and exclusions

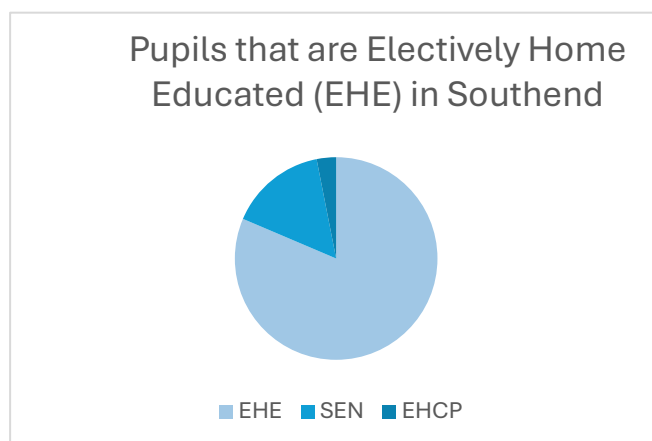
Published 2022/23 school census data reveals that 33.4% of children and young people with SEND are persistently absent from school. This equates to 1,308 children and young people and is just above than national average (32.3%).

2022/23 school census data also identifies that there were 11 pupils with SEND that were permanently excluded. This is 0.05% lower than the national average. Overall Southend has a suspension rate of 21.63%, (a total of 935 suspensions) for pupils with SEND. Although suspension rates are 1.69% lower than the national average, they have increased by 5.42% from the previous year.

## Elective Home Education

As of June 2024 there are 609 pupils recorded as Electively Home Educated (EHE) in Southend. The highest reason given by parents for EHE where the child/young person has SEND was philosophical reasons (51%). Only 3 parents from this group identified dissatisfaction with the school in relation to SEND

- 115 previously identified as requiring SEN Support from their last school
- 23 currently have an EHC plan.



## SEN Support

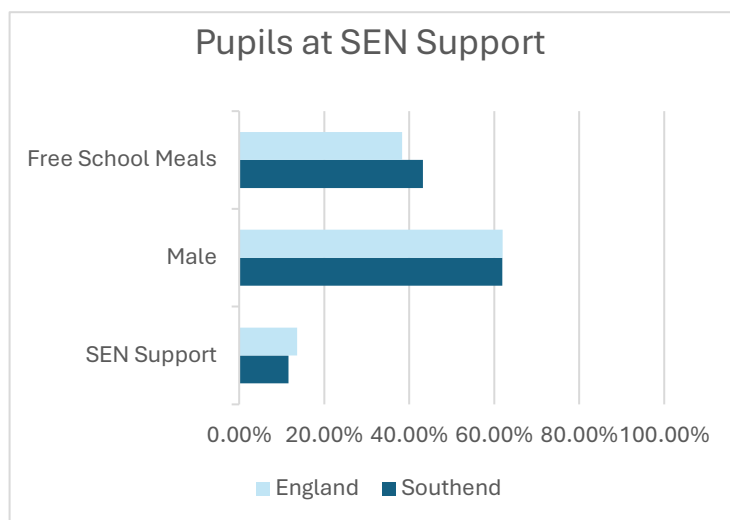
The Local Authority has produced a range of guidance and support materials to support settings in meeting the expectations of the graduated response in identifying, assessing and meeting pupil need. The SENCO Advisory Team offer support to schools and SENCo's in meeting requirements of the role and in delivering statutory and local duties. They undertake monitoring visits, offer a leadership programme and have co-produced toolkits all designed to support learners in school. SEND Statutory reviews are undertaken with selected schools through the LA risk registers/data.

The Educational Psychology Service is developing its core and traded offer with schools so that Educational Psychologists can play a role at the individual, group, and systemic level in terms of early intervention.

Data from the 2024 school census\* and SEN2 reveals the two largest cohort of pupils at SEN Support are in years 3 and 5 (at 9.1%).

Additionally:

- Pupils with SEN Support eligible for free school meals is 43.2%, above the national average of 38.3%
- We know that 61.9% of those pupils at SEN support are male, which is consistent with the national picture (61.97%).
- Pupils who are categorised as receiving SEN Support in Southend schools is 11.58% which is lower than the national Average of 13.63%.

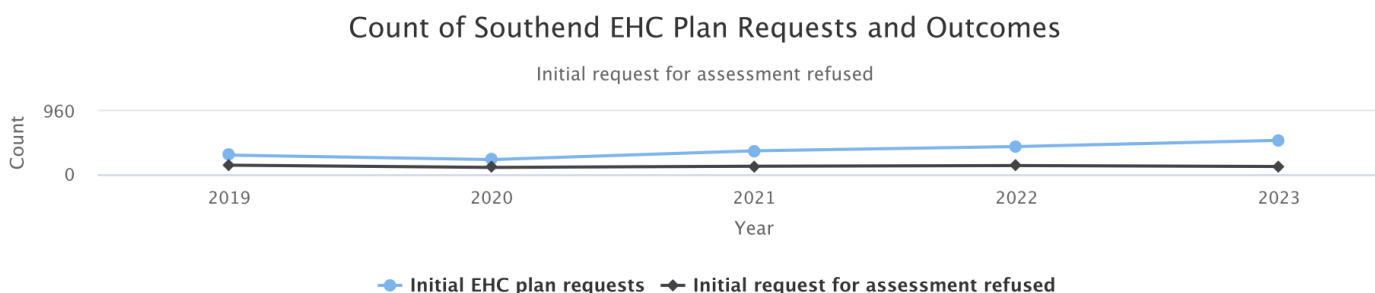


*\*School census data relates to children who attend a Southend school, regardless of the responsible Local Authority.*

**Key issue:** Early identification and intervention in Southend schools is inconsistent and does not demonstrate an effective graduated response. It is expected that the data would at least match national expectations for SEN Support identification. As a result, some children and young people's needs are not being identified correctly nor do they receive specialist support to meet their needs.

### EHC needs request and assessments

The authority has seen significant demand for EHC needs assessments which has increased year on year, almost doubling from 293 requests in 2019 to 517 in 2023. The graph below shows the growth.

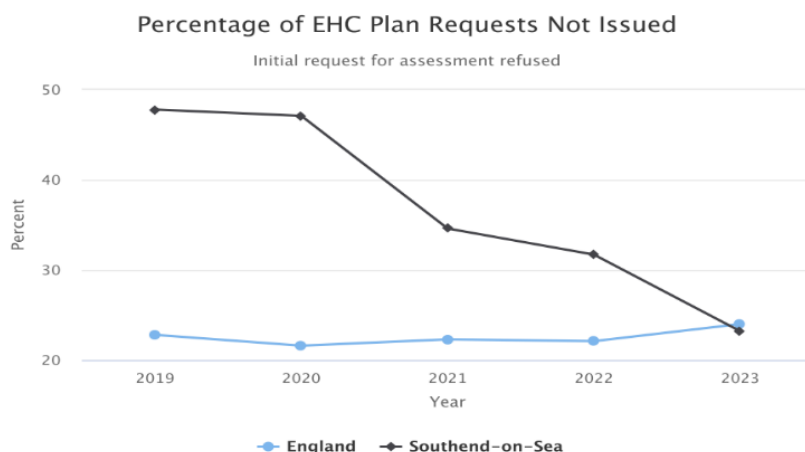


Additionally, from the period March 2023 to April 2024 the authority received on average 44 requests to assess each month.

This growth may, in part, be reflective of a lack of confidence from families that settings and schools can meet pupil need. It may also indicate that settings do not always feel confident in delivering SEN support and provision.

Historically, the percentage of requests that did not proceed to assessment was high in Southend.

In 2023 the percentage of requests that did not proceed to EHC needs assessment in Southend was 23.2% which is more in line with the national average of 24%



**Key issue:** A review the area’s EHC needs assessment decision-making process is needed to improve consistency and efficiency of decision making.

Increasing demand for EHC needs assessments, coupled with difficulties with retention and recruitment in the SEND assessment team and the national shortage of Educational Psychologists has impacted on staff capacity to deliver services at the expected level.

**Key issue:** There has been a significant decline in the authority’s statutory performance of EHC needs assessments. As a result, delayed output has led to monthly, ongoing increases in delayed assessments.

Over the past year the authority has accrued a backlog of over 200 assessments which have not meet the 20-week timeframe. As of June 2024, EHCP’s issued within timeframe is around 5%.

Increased complaints from families and schools over delays is also affecting the capacity of staff to deliver services in a timely way. A capacity review has led to the area developing priority plans to address the backlog and to focus on improving statutory completion rate.

## EHC Plans

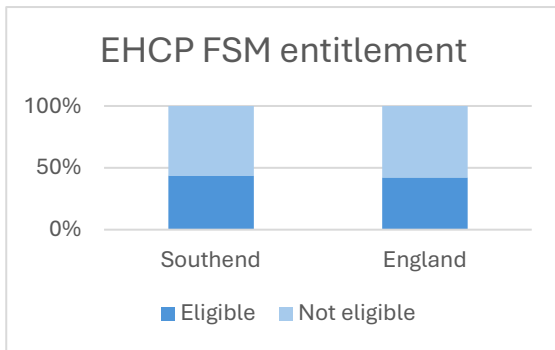
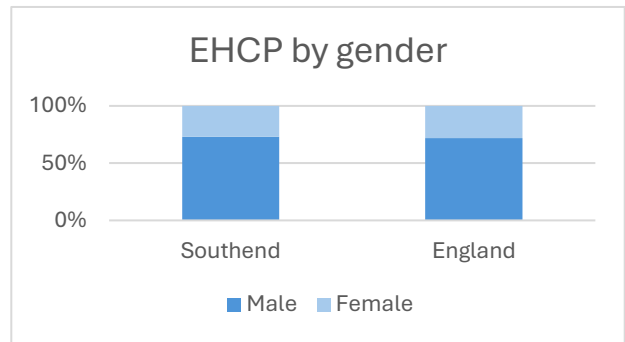
With the increase in assessments Southend has, like most Local Authorities, experienced significant growth in the issuing and maintenance of EHC plans. At the date of the last SEN2 census (18th January 2024) Southend maintained 1737 EHC plans for children and young people with SEND. This accounts for approximately 4% of the school population.

The largest cohort of pupils with an EHC plan are in year 8 (9.9%). ASC/SLCN is the main identified need for 55% of live EHC plans (947) and is the primary and most prevalent need in Southend.

84% of children and young people with an EHC plan are educated within Southend with the majority (42%) in Southend mainstream schools (including additionally resourced bases, which count as mainstream provision) and Early Years settings.

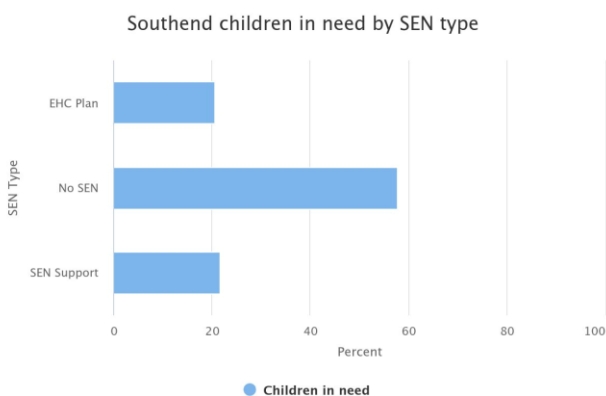
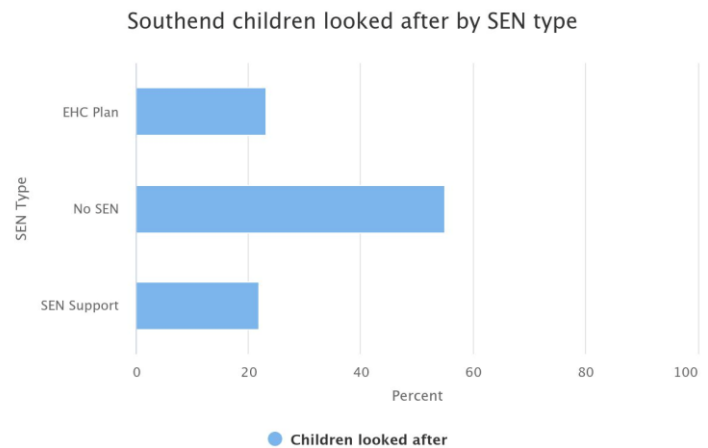
37% are educated in Southend special schools with approximately 11% of pupils with a Southend maintained EHC plan attend out of area schools.

73.04% of pupils with an EHC plan are male which is consistent with the national picture (71.96%).



Pupils with an EHC plan that are eligible for free school meals is 43.7%, compared to 42.2% nationally.

45% of Children classed as 'Looked After' have SEN, which is lower than the national average. 23.1% having an EHC plan.



In Southend 42% of children classed as a 'Child In Need' have SEN, lower than national average of around 50%. 20.5% of these have an EHC plan

Information presented in this section originates from internal IT systems, schools census and the nationally published SEN2 survey, January 2024. Figures quoted relates to all children or young people where an EHC Plan is active and Southend on Sea City Council is the responsible authority.

Whilst assessment data has improved and we understand the demographics of children and young people with EHC plans, review and audits show that the quality of EHC plans is inconsistent, as some plans do not accurately identify the pupil's needs, outcomes and provision.

The SEND assessment team work well with the child, young person family and involved professionals to co-produce the child or young person's EHC plan, but issues remain around the quality of statutory advice received from other agencies when undertaking assessment.

**Key issue:** Some EHC plans are not informed by multi-agency assessments that identify, assess and provide for need.

Quality assurance processes are embedded within the SEND Team and within individual services in the development of EHC plans. A Quality Assurance task and finish group has been formed to agree processes and develop an overriding multi agency quality assurance framework so that EHC plans are of consistently good quality and reflect the child or young person's needs.

### **EHC Plan Annual Reviews**

Most schools and families understand the process of reviewing an EHC plan, however not all reviews take place in a timely manner. The SEND Team have experienced challenges in ensuring the timeliness of EHC plan annual reviews, in ensuring they are held and responded to within statutory timescales. Internal IT systems are not supporting the accurate collection of data to support challenge and monitoring. This has led to inconsistent case-management of reviews and an increase in complaints and placement challenges.

Furthermore, it is noted that professional contributions to annual reviews are not always made or sought and do not always reflect the stage the child or young person is at, nor outlines provision that takes full account of children's and young people's current and changing needs.

Recruitment and retention issues have also impacted on the Team's ability to issue amended plans within statutory timescales.

**Key issue:** Just over a third of EHC plans were reviewed within 12 months of the last review.

Contributions from professionals for Annual Reviews are not always timely and do not always capture pertinent information needed in relation to the child's needs and outcomes.

**Key issue:** Further work is required to improve data reporting in order to track activity and contributions to EHC needs assessments, plans and annual reviews from services.

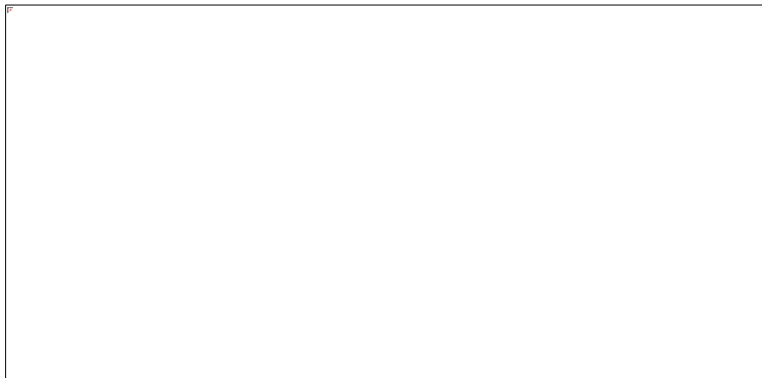
### **Post 16**

Southend has a range of school sixth forms (both mainstream and special schools) and colleges offering Post 16 education, Apprenticeships, Traineeships and Supported Internships, AS/A-levels, vocational qualifications at all levels and bespoke packages of learning.

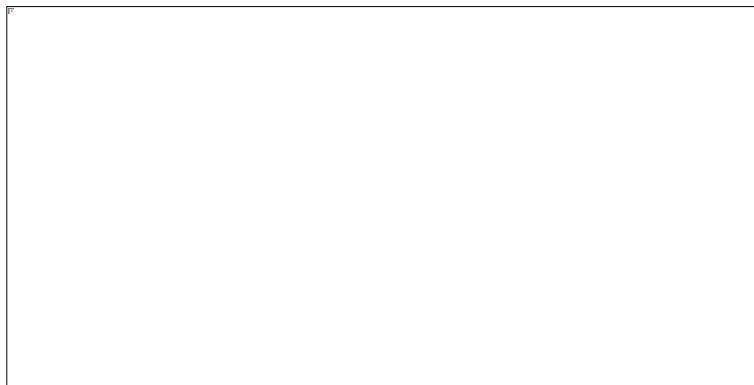
The SEND Preparing for Adulthood team attend year 9 reviews for pupils with an EHCP to ensure there is effective planning and preparation for the next stage of a young person's life.

The Connexions Service have a proactive approach in supporting all young people including those with SEND with careers guidance. They work closely with the special schools and accept referrals from other services as well as offering a drop-in service on a weekly basis.

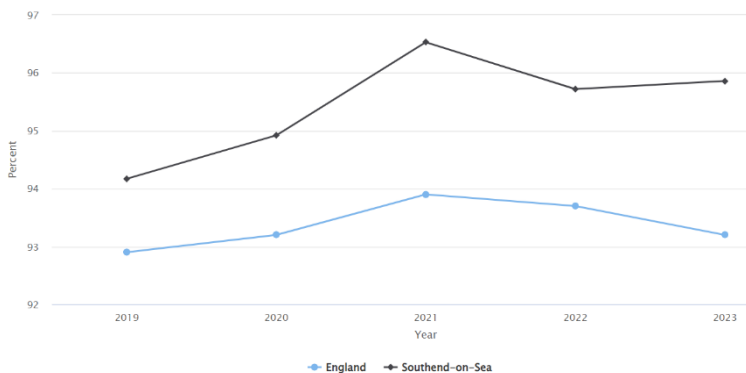
In 2023 (the latest recorded data collection) the proportion of 16 and 17-year-olds recorded as participating in education or training in Southend is higher than the national average. This is true for pupils with an EHCP, at SEN Support and with no identified SEND.



EHCP



SEN SUPPORT



NO SEND

The Proportion of adults with a learning disability in paid employment (2022-23 from the Adult Social Care Outcomes Framework) tells us that 9.59% are in paid employment, which is positive and almost twice as high than the national average of 4.76%.

The Proportion of adults with a learning disability who live in their own home or with their family is 88.45%, which again is higher than the national average of 80.46%.

## The Early Help system

There are a range of services which make up the early help system.



These services are designed to reduce or prevent specific problems from escalating or becoming entrenched when a child or family need more support than can be accessed through universal services.

A new framework for professionals has been created in Southend to outline the targeted support available to all children and young people in need who are assessed and supported according to their individual specific needs, whether they have SEND, diagnosed or not.

The LA continues to provide specialist services at Early Help Level 3 and includes the Supporting Families Team. Data shows that 1% of young people supported have an EHCP and 1% have SEN Support. \*\*

There is extensive data on the impact of intervention carried out by the Supporting Families Team. Data to evaluate the impact of the early help offer across the city is under the remit of the Southend Safeguarding Partnership which is new, and processes are not yet well embedded.

\*\*Info taken from Capital performance data.

## Children's Social Care

The Children with Disabilities Team (CWD) is a small team providing advice, support, and practical help to families with children up to the age of 18 years with a disability, who are substantially affected in their everyday living by profound and severe disabilities. The team's caseload fluctuates pending referrals into the team with external referrals received via the Children's Single Point of Contact (C-SPOC). The team carries out statutory functions consistent with other social work teams and often act as a secondary worker or consult of cases allocated in the wider department.

Children and young people open to the CWD team, benefit from access to a range of services that are identified through an effective multi-agency response tailored to meeting individual needs. This includes various care packages that may consist of direct payments for Personal Assistance support, care or activities at home, care or activities away from home such as after school or holiday clubs; or overnight (short term) breaks away from home.



**Key issue:** We know that the short breaks offer is underdeveloped and does not meet the growing needs of the local area.

As of June 2024, 108 children were allocated to workers in the CWD team. All children have an EHCP, with 107 of them being statutory school age. 16 children are classed as looked after (this includes section 20 (voluntary) and those under a Care Order to the Department) and 3 children are also subject to Child Protection Plans.

The CWD Team also oversees children that require support but do not need to be open to a worker as the support offered is assessed to meet their needs. 65 children are being supported by the team in relation to this.

The CWD team are reviewing systems that monitor their attendance and input into EHCP annual reviews and EHC needs assessments so that statutory duties are met.

Current data for children and young people open to CWD shows that the average school attendance rate is 87.8% with 23 children and young people recorded as persistently absent. The team works with schools to support CYP education achievement and attendance.

More work is needed to understand the nature of school absence for those young people supported by the CWD Team, however given the complexity of their needs and / or disability there may be naturally long term and ongoing health issues that impact on a pupil's attendance.

A review of Child in Need (CIN) census submitted to the DfE notes that 13% of children and young people had a disability as of 31 March 2024.

Children's Social Care teams use data about children and young people with SEND and work closely with colleagues in SEND services and settings to ensure that there is a cohesive and joined up approach in providing support.

| Classification of social care support        | Those with SEN Support*** | Those with an EHCP*** |
|--|---------------------------|-----------------------|
| Child in Need                                | 2.2%                      | 5.3%                  |
| Child Protection                             | 0.6%                      | 0.3%                  |
| Child Protection and Classed as Looked After | 0.1%                      |                       |
| Classed as Looked After                      | 1.1%                      | 1.7%                  |
| Adult Social Care                            |                           | 1.4%                  |
| Youth Justice                                |                           | 0.5%                  |

\*\*\*Info taken from Capital performance data August 2024.

## Preparing for adulthood

The SEND Preparing for Adulthood Team and Children's Social Care work together to identify Year 9 pupils with an EHCP who meets eligibility criteria for Adult Social Care using a matrix (informed by a transition assessment for those within CWD Team). This joint work informs the planning for transition support and into future Adult Social Care.

The CWD Team also link closely with all professionals involved in the young person's life from Health, Education and Adult Services and facilitate a transition for a child/young person into adult services. The work associated to the CWD team is strong and is growing in strength.

A transition protocol is in place to facilitate transfer between the CWD and Adult Social Care (ASC). Transitions planning starts at age 14 with the completion of Disabled Persons Assessment (DPA) and appropriate support/resources are put in place to monitor and support that child and their family. Referrals to ASC is completed at age 16 and a child is allocated to an adult social worker by age 17. This may be earlier when a child is looked after or when they are in receipt of a substantial care package. In 2024/25, 18 people transferred from the team to ASC.

**Key issue:** The work to support young people to prepare for adulthood does not always start early enough.

The area that we need to develop is transition within the wider social care department. There has been an increased focus on permanence and transitions to support this. Policies and procedures have also been updated to reflect this. Permanency planning meetings are being held and chaired by team managers and service managers. Monthly permanency summits (meetings) are being held focusing on these areas and others to remove any identified obstacles and facilitate positive outcomes for children/young people. The summits are chaired by Head of Service.

The Connexions Service have established systems in place for tracking pupil destinations (up to the age of 25 if an EHCP is in place). Monthly data is collected and analysed to draw comparisons both nationally and with other LA's.

Positively Southend young people classed as NEET (not in education, employment or training) or 'Not Known' is below the national average, with 16-17 year olds above the national average in participating in some form of education and training. The number of pupils with an EHCP in education or training in the 18-24 year age range is significantly above the national average. This indicates that there are good systems in place for young people as they move into adulthood.

However, for those young people who are classed as Looked After and Care Leavers of the same age, the figure is lower than the national average for participating in education or training, meaning there is work to do for some of our most vulnerable.

## Health

ICB colleagues across the Nursing & Quality directorate ensure compliance with statutory duties in relation to SEND and prioritising work related to this above any other SEND development work. They work closely with SCC leaders in education and social care.

The ICB commissions services to meet the needs of the population of Southend, including services for young people with SEND.

The multi-disciplinary team at The Lighthouse Child Development Centre (LHCDC) provided by Essex Partnership University NHS Foundation Trust (EPUT) offer targeted and specialist services for:

- Specialised outpatient care for children and young people up to the age of 19 years of age with significant delay or concern and have, or are likely to require, the support from more than one service or discipline.
- Targeted and specialist support from Community Paediatricians, Physiotherapy, Occupational Therapy and Speech and Language Therapy.

- Neurodisability and an integrated pathway for neurodevelopmental assessment for children and young people with suspected Autism and Attention Deficit Hyperactivity Disorder (ADHD) pathways or other neurodevelopmental needs.
- Children's community nursing teams, including specialist support for epilepsy, diabetes, continence and special school nurses working directly in the special schools in Southend.

**Key issue:** Some children and families experience inconsistencies in levels of support and engagement whilst waiting for health need assessment.

There has been a focus on ensuring appropriate support is in place from health services for children and young people who are awaiting health needs assessments, so that early intervention reduces the risk of any escalation of concern. Over the last two years there have been significant improvements made to the experience, access and outcomes for children and young people. This is evidenced in the progress made towards improving waiting times across all service areas but especially in the waiting times for ASD/ADHD assessments.

**Key issue:** Further work is required to improve data reporting in order to track activity and contributions to EHC needs assessments, plans and annual reviews from health provider services.

The specialist mental health service for children and young people is Southend, Essex and Thurrock Child and Adolescence Mental Health Service (SET CAMHS). SET CAMHS offer targeted and specialist community-based assessment and treatment. The service is provided by North-East London NHS Foundation Trust (NELFT) in partnership with HCRG and includes a central single point of access (SPA) for referrals providing clinical triage leading to; advice and guidance, onward referral to specialist teams (i.e., Eating Disorder, Learning Disability etc.), locality teams and signposting to other services.

**Key issue:** Transition planning for children and young people with SEND accessing child and adolescent mental health services should start sooner to improve continuity of care.

Young people in Southend can access support from Progressions when they are approaching transition age and leaving SET-CAMHS but do not meet the threshold for Adult Mental Health Services. Progressions will provide short term intervention, support young people to access community services to support resilience and thriving and aim to reduce the number of young people seeking help at crisis point.

In Southend, specialist Learning Disability services are provided by Essex Learning Disability Partnership and include both children's and adult services. The LD teams are multi-disciplinary healthcare teams providing support for individuals across Southend, Essex & Thurrock. The services work closely with mainstream community health services to ensure young people receive support from the most appropriate service. However, the current services available in the area do not meet the full range of needs for young people with SEND.

## Health Visiting Service 0-5 years

The health visiting service provides a universal offer of the national mandated Healthy Child Programme to all families in Southend commencing with a first contact by the health visiting service in pregnancy, and then four subsequent mandated contacts between birth and 2 years of age.

Health visitors utilise a range of assessment tools to review children's social, emotional and physical development, and work with parents to provide early support and intervention to promote children's development where appropriate. Where additional support or specialist assessment and intervention is required for a child, referrals are made to specialist services, and ongoing support and information is offered to the family until the referral appointment

### **School Nursing Service 5-19 years**

All school age children, young people, and families with a special educational need or disability (with or without a diagnosis) are offered the healthy child programme 5-19 and have open access to the school nursing service offer.

Children, young people and families can access the school nursing service through a variety of different ways including via parent drop-in clinics in primary schools, chat health text messaging service for both parents/ carers and YP or calling/ emailing into the service. Schools/ professionals can also refer into the service with parent/YP consent.

The school nurse is available to provide support to parent and children and young people on health issues, particularly at transition points in the child's education journey. In addition, the service has a specialist school nurse for inclusion, who is the allocated school nurse for health promotion/advice and support for children and young people attending the Alternative Provision's in Southend.

### **Area Partnership Leadership and Commissioning**

Whilst the Partnership works collaboratively and strengthened governance mechanisms monitors and oversees the delivery of services, it acknowledges there are gaps in the system that may impact on children and young people with SEND. Specifically, there is much work to do around the collection and use of data to inform commissioning but also to support rigorous and effective self-evaluation.

The completion of a Joint Strategic Needs Assessment is underway and will support leaders in this respect both operationally in tracking progress and strategically in further understanding the needs of our children and young people.

**Key issue:** The area does not have accurate data sets across health, education and social care to support self-evaluation and inform joint commissioning. A Southend joint commissioning group needs to be re-established.

The MSEICB and SCC are in discussion about establishing a joint commissioning forum.

### **Feedback**

Southend SEND Independent Forum (SSIF) work closely with leaders across the partnership to ensure that feedback and information shared with them by parents and carers supports an

understanding of wider community issues and the impact on families as they use and navigate services.

The feedback shows that families are concerned about issues we have identified in this evaluation: namely SEND Support in school, EHC needs assessments and the EHCP annual review process, in addition to waiting times.

Positively parents and carers appreciate knowledgeable and family focused staff who understood their child's and family's needs. They felt this led to better outcomes for all. Parents and carers also reported that support groups, coffee mornings and opportunities to meet other families helped them to understand the system and feel less isolated.

SSIF work closely with the SEND Local Offer Team to ensure there is better communication with families, so they understand the support available and actions undertaken to address challenges.

With their contributions SSIF supports the Area Partnership plans to ensure that parent carer voice informs strategic planning.

**Key issue:** Whilst there has been some good work across the area with children and young people with SEND their voice is not embedded in strategic decision making.

Part A has set out the context and identified that key issues in our local area. In the next section this evaluation will consider the quality and impact of services and joint working, against the new Inspection Framework.

## Part B

**Assessment of current arrangements and their impact for children and young people with SEND**

**1) Children and young people's needs are identified accurately and assessed in a timely and effective way**

|                               |  |
|-------------------------------|--|
| <p><b>What we do well</b></p> | <ul style="list-style-type: none"> <li>• The multi-agency core referral team (MACRT) is well established and meets on a fortnightly basis to discuss referrals for the under 5's into the Child Development Centre.</li> <li>• The Early Years Team hold a fortnightly Play and Development group at the Family Centres.</li> <li>• The Development and Play Children's Service (Jigsaws, which is part of the wider Lighthouse Child Development team) offer specialist support to families from maternity to age 8.</li> <li>• An established weekly meeting between the Specialist Health Visitor for children with additional needs, the Educational Psychologist specialising in Early Years and the Early Years SEND Team, discuss next steps for children referred into the early years' service, and consider requests for the SEN Inclusion Fund.</li> <li>• NELFT provide targeted support in Southend through schools Mental Health Support Teams (MHST). Targeted support is currently offered across 10 mainstream school settings and one further education setting as part of a national pilot.</li> <li>• A Better Start Southend (ABSS) offer Specialist Health Visitors Perinatal/Infant Mental Health identifying and supporting mothers with low to complex mental health needs and early intervention in Southend wards</li> <li>• Neurodevelopmental pre and post diagnostic workshops are delivered to provide accessible support to everyone who identifies as autistic/ADHD</li> <li>• The introduction of a nurse-led ADHD service and QB Test Technician at the Lighthouse Centre who work closely with the Community Paediatrician Service.</li> <li>• Improved the experience of "waiting well" for those waiting for neurodevelopmental assessment from the Lighthouse Service.</li> <li>• There is an effective children's therapy triage system.</li> <li>• SET CAMHS assessments are completed within better-than-expected performance indicators</li> <li>• Monthly Multi-Disciplinary Team meetings with CAMHS and the Lighthouse Child Development Centre to ensure joint working and roust support for children with SEND.</li> <li>• Primary care teams undertake annual health reviews for young people with a learning disability in a timely way.</li> <li>• SENCO Advisory Team offer advice and support to schools and SENCo's in meeting expectations of the role, statutory and local duties, and the graduated response. The team lead monitoring visits, offer a school leadership programme, and toolkits and strategies to support learners in school.</li> <li>• SEND Statutory reviews are undertaken with selected schools through the LA risk registers/data.</li> <li>• The Health Visitor offer a targeted pathway for those children that have specific needs.</li> <li>• The school nursing team deliver The Healthy Child Programme and six high impact areas of the healthy child programme (HCP) to all children aged 5-19 including those who are electively home educated.</li> <li>• 100% of the 2 -2 ½ year old assessments within the Healthy Child Programme include the use of the Ages and Stages Questionnaire (ASQ-SE).</li> <li>• All children and young people under the Virtual School have termly reviews of their Personal Education Plan.</li> <li>• Lighthouse Child Development Centre introduced closer collaborative working relationships via joint monthly multidisciplinary team meetings (MDT) that include community Paediatricians, clinicians and SET CAMHS Community Psychiatrist to discuss children and young people with neurodevelopmental aspects of a child presenting with possible autism/ADHD or mental health cases.</li> <li>• Children and young people open to Children's Social Care have timely assessments that assess the holistic needs of them and their families.</li> </ul> |
|-------------------------------|--|



|   |  |
|---|--|
|   | <ul style="list-style-type: none"> <li>• Transition between children’s and adult social care is good with a joint protocol in place</li> </ul>   |
| <p><b>Impact on outcomes</b></p>                | <ul style="list-style-type: none"> <li>• Families waiting for neurodevelopmental assessment receive follow up advice and support at every given stage.</li> <li>• Most children and young people with SEND who are referred to physiotherapy and occupational health services are seen within 18 weeks of referral.</li> <li>• Lighthouse consultant-led waiting times have significantly reduced from 120 weeks to 28 weeks.</li> <li>• There is an improving picture on the uptake of annual health reviews. These reviews support a more individualised approach to meeting the needs of children and young people with SEND.</li> <li>• Children identified with development delay or additional needs are supported by the Health Visiting team who assess, provide early intervention and targeted support and signposting (where appropriate) and/or referrals to additional services.</li> <li>• EHE pupils access school nursing visits in a preferred location upon request.</li> <li>• All children referred to the Early Years SEND Team via a Section 23 or setting referral are seen within 6 weeks.</li> <li>• Early Years pupils supported by the Early Years team, The Development and Play Children’s Service (Jigsaws) and Health Visitor, benefit from personalised support plans that take into account their unique circumstances and needs, leading to more effective interventions.</li> <li>• Joint working with professionals at the MACRT meeting allows for early identification of needs and timely interventions for children in the Early Years.</li> <li>• Holistic planning through weekly meetings with the Specialist Health Visitor the Educational Psychologist and the Early Years SEND Team support effective next steps for individual children through timely and appropriate interventions.</li> <li>• The SEND Play and Development group allows professionals the opportunity to observe children in a setting with peers and assess their needs in an environment other than at home.</li> <li>• Children and young people referred to SET CAMHS are assessed within 8 weeks of referral.</li> <li>• 2 -2 ½ year old assessments using the ASQ-SE focuses on social-emotional development and behaviour in young children.</li> <li>• The educational progress of Looked after Children is closely monitored with further support offered if needed.</li> <li>• Children and young people who have a diagnosis of or are in the process of an assessment for neurodevelopmental conditions like attention deficit hyperactivity disorder (ADHD) receive better coordinated support as the nurse-led ADHD service and QB Test Technicians work closely with the Community Paediatrician Service.</li> <li>• Children and young people who do not have a diagnosis, if they are on the waiting list or if they do not wish to be diagnosed, and those, who against expectations, do not meet the criteria for Autism, are provided with support before diagnosis (for seeking needs/strengths-based assessment or identified based assessment) which is integrated with needs/strengths based post-diagnostic support.</li> </ul> |
| <p><b>What do we need to do to improve?</b></p> | <ul style="list-style-type: none"> <li>• Strengthen early intervention in early years settings through specialist advisory support work.</li> <li>• Increase Speech and Language therapy support for children and young people who attend mainstream settings.</li> <li>• Expand the Educational Psychology core offer to schools to address systemic level issues, such as staff wellbeing, policy development, and targeted group support.</li> <li>• Increase the traded uptake of the Educational Psychology Service in schools to focus on early intervention at the individual, group, and systemic level.</li> <li>• Development of an Emotional Wellbeing Service for all schools</li> <li>• Rollout Emotional Literacy Support Assistant (ELSA) training.</li> </ul>  |

|  |   |
|--|---|
|  | <ul style="list-style-type: none"> <li>• Improve the timescales for providing Educational Psychology statutory advice</li> <li>• Undertake EHC needs assessment within statutory timescales.</li> </ul> |
|--|---|

## 2. Children, young people and their families participate in decision-making about their individual plans and support

|   |   |
|---|---|
| <b>What we do well</b>                  | <ul style="list-style-type: none"> <li>• The EHC needs assessment process continues to involve children and young people and their families at an individual level regarding the assessment of their child and in drafting the plan.</li> <li>• The views of children and young people, and of parents and carers, are captured more systematically as part of the EHC needs assessment processes.</li> <li>• Stakeholders are encouraged to feedback on their experiences of Educational Psychology involvement for EHCP assessments and other work</li> <li>• Schools routinely consult with children and young people with SEND and with their parents and carers as part of the EHC plan review process</li> <li>• Children and young people who are classed as 'in need' or 'looked after' actively participate in meetings about them and share their voice.</li> <li>• Children's Social Care commission advocates for both parents and children.</li> <li>• Social Care work directly with children and parents to ascertain their views which are inputted into assessments and plans.</li> <li>• Every child and young person classed as 'looked after' have an Independent Reviewing Officer and within court, a guardian is appointed.</li> <li>• Care plans are co-produced with children, young people and their parents where possible.</li> <li>• The views of all parents and pupils are sought as part of any Inclusion Panel referral and are fully considered when agreeing alternative provision placements and resources to support further interventions.</li> </ul> |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>• Families co produce EHC plans leading to greater satisfaction and reduced appeals and mediation meetings.</li> <li>• Families feel more confident and have trust in assessments and personalised plans.</li> <li>• Children and young people classed as 'looked after' or 'in need' have their voice heard and their views are included in their plans.</li> <li>• Feedback from parents and pupils on their experiences and outcomes when accessing LA commissioned alternative provision is mostly good or better.</li> <li>• Children's Social Care assessments regularly include voice of CYP, family and those significant to them.</li> </ul>  |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>• Engaging parents and accessing the voice of Electively Home Educated pupils.</li> <li>• A consistent and robust approach to EHCP Annual Reviews.</li> <li>• The short breaks offer needs to meet the growing needs of the local area and support individual choice.</li> </ul>   |

## 3. Children and young people receive the right help at the right time

|                        |   |
|------------------------|---|
| <b>What we do well</b> | <ul style="list-style-type: none"> <li>• The Special Educational Needs and Disabilities Information Advice and Support Service, the Local Offer Team and the Parent carer Forum engage widely with families across the city to help parents and carers to navigate the local offer and access the right support in a timely way.</li> <li>• School staff appreciate the guidance and support they receive from the local authority SEND team to help identify and support children and young people with SEND at an early stage.</li> </ul> |
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|   | <ul style="list-style-type: none"> <li>• Waiting times for ASD assessment have reduced despite increasing demand.</li> <li>• Work on pre and post diagnostic assessment support is progressing: <ul style="list-style-type: none"> <li>○ The Lighthouse ASC team are now hosting a series of post-diagnosis support group sessions across a wide range of community venues.</li> <li>○ Work continues with the development of The Essex Autism Project with children, young people, their families and professionals involved.</li> <li>○ Regular sharing of additional service and support via Southend SEND Partnership e-newsletter (Pier into Southend).</li> </ul> </li> <li>• EPUT has ensured their web pages have information about routes to referrals, assessment and treatment pathways. Resources are also available to provide support and advice for families whilst waiting for assessment.</li> <li>• Mid and South Essex Health SEND Champions forum formed.</li> <li>• Southend Essex and Thurrock (SET) Child and Adolescent Mental Health Service (CAMHS) website has a number of resources available to support a range of difficulties as well as clear information on referral routes and what to expect next. This includes voluntary sector services such as online counselling, for example KOOTH</li> <li>• Children and young people with SEND access a range of services that are available to meet their social and emotional health and well-being.</li> <li>• Schools have received additional £5 million of funding to support inclusive practice.</li> <li>• 3 Alternative Provision (AP) Pilots have been commissioned to support children and young people with additional needs who struggled to maintain their placement.</li> <li>• The Development and Play Children’s Service (Jigsaws, part of the wider Lighthouse Child Development Centre Team) work jointly with the Early Years SEND Team to offer specialist support to families from maternity to age 5.</li> <li>• The Early Years SEND Team offer a SEAS (Southend Early Autism Support) course twice a year for parents/carers. It is also offered to professionals.</li> <li>• The school nursing service has developed resources which are inclusive to support children with SEND needs and provide a signposting resource to local support services.</li> </ul> |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>• Families awaiting a diagnostic assessment understand the process, receive regular communication and are offered monitoring calls support and strategies.</li> <li>• Families receive a consistent offer and are effectively communicated with at key points of the health assessment referral process.</li> <li>• Families receive accurate advice and support on SEND issues from SENDIASS.</li> <li>• Children and young people with SEND access a range of services that are available to meet their social and emotional health and well-being</li> <li>• Children and young people accessing alternative provision pathways are fully supported with a reintegration to mainstream.</li> <li>• Children and young people have the support they need in schools and Early Years settings, through additional funding whilst they undergo EHC needs assessment.</li> <li>• More children and young people with SEND to engage positively in learning through alternative provision.</li> <li>• The Development and Play Children’s Service allows parents to speak with professionals to discuss useful strategies and interventions to support their child and also gives them the opportunity to network and meet other families.</li> <li>• Parents/carers report they have gained a better understanding of autism, and feel empowered and confident to utilise practical strategies and skills for supporting their child by attending the SEAS course.</li> <li>• Families understand and can better navigate the SEND system and know where to obtain advice.</li> </ul>   |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>• Improve the timeliness and quality of EHC needs assessment and EHC plans.</li> <li>• Ensure there is robust systems for sharing information with CAMHS when EHCPs are being requested or reviewed.</li> </ul>  |

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|  | <ul style="list-style-type: none"> <li>• Track the impact of the revised early help and family centre offer on children and young people.</li> <li>• Review the area's EHC needs assessment decision-making process.</li> <li>• Ensure there is consistent support to families waiting for health need assessment across all pathways as some experience inconsistencies in levels of support and engagement whilst waiting.</li> <li>• Ensure parents and carers and professionals understand how to access the range of services that are available from education, health and social care, so they can access the right support at the right time.</li> <li>• Improve access to services for individuals with LD &amp; Autism so that the DSR service is not used as a gateway.</li> <li>• Ensuring parents, carers and schools are informed about recovery progress in regard to EHC assessment delays.</li> <li>• Create an Early Years' Strategy, which meets new statutory duties and supports early intervention.</li> <li>• Reduce suspensions and persistent absence from school for pupils with SEND.</li> <li>• Settings that are more inclusive and identify additional needs at the earliest opportunity.</li> <li>• Pupils are referred to inclusion panel at the right time to access early interventions rather than at crisis point with risk of exclusion.</li> </ul> |
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#### 4. Children and young people are well prepared for their next steps, and achieve strong outcomes

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| <b>What we do well</b>    | <ul style="list-style-type: none"> <li>• There is strong partnership working to identify and support children and young people with SEND who are at risk of missing education or who are not engaging with education or training.</li> <li>• SEND PFA Team and children's social care work together to identify Year 9 pupils with an EHCP who meets eligibility criteria for Adult Social Care using a matrix (informed by a transition assessments for those within CWD Team)</li> <li>• SEND Preparing for Adulthood (PFA) coordinators have increased their attendance at Year 9 annual reviews to provide guidance and training to SENCos.</li> <li>• Connexions Service engage well with young people in alternative provision and EHE in addition to the introduction of a SEN Careers Guidance Champion for the Connexions service who offers additional advice, support and guidance to young people with SEND.</li> <li>• A targeted Careers fair held at central library for vulnerable young people in Southend for young people identified as NEET, SEND, EHE, LAC and 16+ Care management.</li> <li>• Robust transition processes and guidance supported by the Early Years SEND Team ensure that settings, schools and families jointly plan transitions for children with EHC plans and those on SEND Support going into reception.</li> <li>• Rollout of the EPUT, Good Practice Transitions, Ready Steady Go programme. Transitions workshop is part of the parent/carers programme.</li> <li>• A protocol in place between adult and children services for transition.</li> <li>• The health visiting service work in collaboration with preschool settings, therapists, and paediatricians and specialist nurses to support the development of an individualised personalised plan for children and liaise directly with the school nursing team to ensure that support is available for a child and family at school entry transition.</li> </ul> |
| <b>Impact on outcomes</b> | <ul style="list-style-type: none"> <li>• Children and young people with SEND who are at risk of missing education or who are not engaging with education or training are identified and supported to be successful in continuing their education once they leave school.</li> </ul>  |

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|   | <ul style="list-style-type: none"> <li>• Joint working informs the planning for children and young people who require transition support now and into future to adult social care</li> <li>• Better quality information in Year 9 Annual Reviews supports effective PFA planning with EHC plans amended and issued to reflect PFA outcomes.</li> <li>• PFA planning prepares SEND young people for meaningful adult lives with opportunities for them to pursue purposeful employment and community involvement.</li> <li>• Ready Steady Go Programme supports the lifelong challenges facing children and young people with neuro-disability and neurodevelopmental conditions as they make daily, life stage transitions to ensure more continuity of support and greater wellbeing.</li> <li>• Children offered support by the Early Years SEND Team settle into school quicker and parents/carers are more confident that their child will receive the support they need from the outset.</li> <li>• Schools receiving children supported by the Early Years SEND Team are able to plan effectively for the child, ensuring continuity in learning and better learning outcomes for the child.</li> <li>• Young people are effectively supported into post 16 education destinations and career pathways, evidenced in lower numbers of young people who are NEET.</li> <li>• The proportion of 16 and 17-year-olds recorded as participating in education or training in Southend (with or without SEND) is higher than the national average.</li> <li>• The Healthy Child Programme underpins the assessment of the health and development of children in their early years to identify children's needs at the earliest possible stages of their development milestones.</li> </ul> |
| <p><b>What do we need to do to improve?</b></p> | <ul style="list-style-type: none"> <li>• All EHC plans that accurately reflect the child or young person's stage and phase of education.</li> <li>• The timely processing of all annual reviews.</li> <li>• Health and social care advice confirms provision or support (where appropriate) to support the outcomes identified in children's and young people's education, health and care (EHC) plans</li> <li>• Educational Psychology assessments carried out within statutory timeframes</li> <li>• Preparation for adulthood begins early and pathways to training and employment are well understood.</li> <li>• Children's Speech &amp; Language Therapy, Children's Occupational Therapist &amp; Physiotherapist will contribute to annual reviews in a timely fashion.</li> <li>• Developing supported internships.</li> <li>• Support improved identification of young people who are deemed eligible to transition to Adult Social Care.</li> <li>• Raise awareness and offer training for school staff about eligibility criteria for young people to transition to Adult Social Care and include other partners across the LA and Partnership.</li> <li>• CWD Transition assessment document being redeveloped in line with the views of children and young people.</li> </ul>  |

## 5. Children and young people are valued, visible and included in their communities

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| <p><b>What we do well</b></p> | <ul style="list-style-type: none"> <li>• Children and young people with SEND are beginning to be more involved in the wider decision-making of the area, such as by taking part in the Southend Youth Council.</li> <li>• Children and young people involved with Children's Social care are consulted on aspect of policies which are being co-produced.</li> <li>• Children and young people involved with Children's Social care developed a welcome pack for those new into the care system.</li> <li>• The HAF programme is fully inclusive, with positive feedback from parents and schools.</li> </ul> |
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|   | <ul style="list-style-type: none"> <li>• Lighthouse Centre engaged children, young people and families to participate with sensory garden design.</li> <li>• CAMHS continue to work with children, young people and their families to identify different support required.</li> <li>• The Virtual School encourage their children and young people to engage in a variety of opportunities offered both within school and the wider community.</li> <li>• Virtual School staff lead on events for children and young people, such as NEET training days, Make Happen events and our Celebration Awards events.</li> <li>• 6 EHE young people (4 of which are recorded as SEND) took part in the Youth Health Champions project and held a community event for over 100 people during Mental Health week 5-9 Feb 2024.</li> <li>• The EHE Team supported home educated pupils with community access to literacy workshops, Mindful Art classes, crochet &amp; knitting, Forward Motion/Bikeability sessions and art classes.</li> </ul>   |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>• Children and young people who are involved in the youth council are positive about the impact of their work. They say that adults listen and act on their ideas.</li> <li>• 80% of EHE pupils returning to formal education were classed as SEND. They reported positive experiences since returning to school.</li> <li>• All EHE pupils who attended, passed the Royal Society of Public Health Youth Health Champion Level 2 Award which is equivalent to a GCSE.</li> <li>• EHE young people feel included in their community as the EHE Team deliver opportunities for young people to develop skills and life experiences, in addition to the core curriculum.</li> <li>• Personal Education Plans for looked after children details hobbies and interests and promotes the importance of extra-curricular clubs within school.</li> <li>• The Virtual School use PEP information to inform events and development of opportunities for young people. They also share this information with our colleagues who lead Children in Care Council to ensure that children are engaged in interests and relevant activities, best suited to their interests and needs.</li> <li>• All Virtual School events and opportunities are shared with Social Workers and Designated Teachers within schools, to ensure that activities are promoted, and that young people have access to the abundance of support and fun activities that are out there within their community.</li> <li>• More children and young people with disabilities are taking up the offer of short breaks.</li> <li>• There is a high level of take up in many of the HAF activities. Children and young people with SEND tell us that they feel included in activities.</li> <li>• In 2023/24 there were 8 organisations accessing the Main Access Grant. In addition, there are 96 children making use of our community access grants. 157 children and young people are receiving respite care, plus 16 who are classed as looked after.</li> </ul> |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>• Widen and develop the range of activities available where children and young people with and without SEND interact.</li> <li>• Although parents and carers and children and young people with SEND are positive about some of the wider opportunities that are available to them within the local community, there are not enough clubs and activities available to children and young people with SEND, including during the school holidays</li> <li>• Children and young people who are involved in the youth council feel it would be better if the needs of children and young people with SEND were more widely understood across the community in which they live.</li> </ul>  |

## 6. Leaders are ambitious for children and young people with SEND

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| <b>What we do well</b>                  | <ul style="list-style-type: none"> <li>• The LA has increased financial support for children and young people with SEND through additional support for interventions, inclusive practice and Action Research.</li> <li>• All Southend City Council departmental service plans set out clearly how they listen to the voice of children, young people and their families in formulating their service priorities.</li> <li>• The use of data and other management information (such as our knowledge of schools) drives our decision-making processes.</li> <li>• SEND Strategy and Strategic Action Plan is in place.</li> <li>• There is revised Governance and reporting structures in place.</li> <li>• A schools SEND Forum has been established.</li> <li>• Membership of the SEND Partnership Board revised.</li> <li>• In 2023/24, over £500k in capital grants was successfully allocated to improve and develop inclusion and SEND provision across their settings</li> </ul> |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>• There has been a 50% increase in capital grant applications for 2024/25 with almost £630k allocated to schools.</li> <li>• Action research projects identified evidence based teaching practices, interventions and support to improve provision and included: <ul style="list-style-type: none"> <li>➢ ‘The Sanctuary’ – an alternative provision to reduce anxiety and support young people with ASD to improve outcomes.</li> <li>➢ Exploring how quality first teaching can improve SLCN in early years.</li> <li>➢ The Neuro-Ambassadors Programme: developed to improve employability skills for neurodivergent learners.</li> <li>➢ Exploring SEND assessment using the Bexley SEND Assessment toolkit across 5 Southend schools.</li> </ul> </li> </ul>   |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>• Embed new processes to build confidence in the system.</li> <li>• The senior leadership teams need to get better at quality assurance and holding services to account.</li> <li>• Re-establish a Southend focussed Children’s Commissioning Forum</li> </ul>  |

## 7. Leaders actively engage and work with children, young people and families

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| <b>What we do well</b> | <ul style="list-style-type: none"> <li>• Leaders in health, education and care work closely with Southend SEND Independent Forum (SSIF) the Parent/Carer Forum, ensuring they are invited as equal partners to policy development.</li> <li>• Key area leads across the partnership work well with SSIF to provide community support and advice to SEND parent carers via the new SEND Network and termly SSIF Seminars.</li> <li>• In response to feedback the new accessible Livewell platform hosting the Local Offer was launched in July 2023.</li> <li>• The local area partnership has worked to ensure parents and carers and professionals receive clear and reliable information about how to access the range of support and services that are available. There are improved communications to stakeholders from across the SEND Partnership via the SEND Network and the SEND Partnership monthly e-newsletter (Pier into Southend).</li> <li>• SEND Champions have been nominated from local groups and organisations via the SEND Network.</li> <li>• Feedback obtained via the SEND Network shaped a project plan scoping out the development of roadmaps to support families navigating the SEND system.</li> <li>• SEND Surgeries are now held in local schools and settings which provides greater access for families.</li> </ul> |
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|   | <ul style="list-style-type: none"> <li>The Virtual School Team work closely with families and Foster Carers to ensure that any issues are identified, and support is provided to the adults that live with and work with looked after children.</li> </ul>  |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>SEND Network members receive up to date communications from the Area Partnership to disseminate amongst their membership.</li> <li>The community are better informed of local area news and updates. There are over 2000 Subscribers to the SEND Partnership e-newsletter (Pier into South-end).</li> <li>30 nominations for SEND community champions have been received.</li> <li>3 Roadmaps are being developed in conjunction with the Parent Carer Forum Seminars between February – June 2024 and will provide families a visual tool to navigate services.</li> <li>3 feedback and co-design sessions were held in developing the look and feel of the Local Offer. With Half termly Your Local Offer Your Way sessions and participants supporting amends to 29 pages and created 5 new pages on the Local Offer.</li> <li>The updated Local Offer feedback survey has evidenced greater satisfaction from users.</li> <li>100% of parent-carers attending SEND Surgeries this academic year stated that the surgery was helpful to them.</li> <li>The collaborative and approachable style of working from staff within the Virtual School has enabled stronger relationships with children &amp; young people, Foster Carers and wider families.</li> </ul> |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>Building trust with parents and carers by improving service delivery across the local area partners.</li> <li>Using the voice of children and young people with SEND to inform strategic decision making.</li> <li>Continue to develop opportunities for children, young people and their families to engage and feedback their experiences.</li> </ul>  |

## 8. Leaders have an accurate, shared understanding of the needs of children and young people in their local area

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| <b>What we do well</b> | <ul style="list-style-type: none"> <li>Revised the membership of SEND specific meetings across the SEND partnership to widen multi-agency representation and to include schools and parent voice.</li> <li>Strengthened reporting from key area leads to SEND specific meetings and the Health and Well-Being Board.</li> <li>Leaders in Health, Education and Social Care have aligned services to ensure that Alternative Provision and SEND is an integrated system.</li> <li>The review of the Integrated Care Board has been completed with roles identified that support the SEND and Children's agenda.</li> <li>Created a Headteachers SEND Forum that supports wider consultation and feedback with regards to service improvement.</li> <li>Improved the collection of data and analysis to track educational outcomes of children and young people.</li> <li>SSIF is making a strong contribution in sharing the experiences of children and young people with SEND and their families.</li> <li>SCC data team has updated the existing education/social care data to include reports on early identification of SEND at early years settings in comparison with schools.</li> <li>Completed the annual refresh of the publicly available SEND data tool, which incorporates a large variety of education-based published SEND data and allows Southend to be compared against other authorities.</li> </ul> |
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|   | <ul style="list-style-type: none"> <li>• A SEND Joint Strategic Needs Assessment that includes data across education, health and social care has been drafted.</li> </ul>  |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>• New governance arrangements have led to clearer functions for reporting and tracking progress against strategic action plan across meetings.</li> <li>• SEND Strategic Board members have clearer oversight of the delivery of SEND Services and the impact of them.</li> <li>• Leaders in Health, Education and Social Care are held to account on the delivery of services.</li> <li>• There is greater stakeholder engagement through the creation of the SEND Headteachers Forum, SEND Network and Educational Strategy Group.</li> <li>• SSIF remain equal partners to policy development and strategic planning.</li> <li>• Leaders have been empowered to take improvement actions.</li> <li>• Schools are now more engaged with the shaping of services and have a better understanding of the wider picture.</li> <li>• Data from education teams at the council is being shared through SEND meeting to outline service delivery and impact.</li> </ul> |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>• The availability of a new health data dashboard so that senior leadership teams can hold services to account.</li> <li>• Data related to the All-Age Dynamic Support Register and Care Education Treatment reviews needs to be included in the area's joint data set, and shared formally through to the Strategic Partnership Board</li> <li>• Data Quality Improvement Plans (DQUIP) will be required to ensure timely and accurate reporting.</li> <li>• Clearer joint needs assessment focused on SEND so that identified gaps can be responded to through joint commissioning.</li> <li>• Improve the collection of SEND statutory service data.</li> </ul>  |

## 9. Leaders commission services and provision to meet the needs and aspirations of children and young people, including commissioning arrangements for children and young people in alternative provision

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| <b>What we do well</b> | <ul style="list-style-type: none"> <li>• Additional special school places commissioned outside annual commissioning cycle to meet increasing demand.</li> <li>• Reviewed the city-wide training requirements and offer as part of the Inclusion Review and led to the development and improvement of Outreach Support Services for SEND.</li> <li>• Strengthened the Early Years and Childcare Service with the appointment of additional Early Years advisory teachers.</li> <li>• 46/53 Southend schools have engaged with relational practice and trauma informed training. Each school was provided with a specific programme, suitable to their strengths and needs.</li> <li>• Relational practice training has also been delivered to professionals in Children's Services, Education, Inclusion and Early Years departments and Southend parents and carers.</li> <li>• 28% Southend Schools have Mental Health Support Teams (MHSTs), in place.</li> <li>• The Kids Autism Hub was commissioned by the Mid &amp; South Essex, Suffolk &amp; Northeast Essex and Hertfordshire and West Essex ICBs for young people who have newly received a diagnosis of autism or who are on the diagnosis pathway, and their families.</li> <li>• The Autism Keyworker Service has been developed as a response to the NHS Long Term Plan.</li> <li>• Educational outcomes for children at LA commissioned alternative provision places are better than national figures.</li> <li>• Prioritised the delivery of Autism Education Trust' (AET) Schools Good Autism Practice for teachers and support staff and ARBs.</li> </ul> |
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|   | <ul style="list-style-type: none"> <li>The local authority awarded Small Capital Bid Grants to successful schools that included the development of sensory rooms, SEND specialist classrooms, nurture Base, sensory garden spaces, wellbeing intervention rooms, life skill kitchen areas and accessibility adaptations to school buildings.</li> </ul>   |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>Additional Specialist Support Services and the increased offer to schools, children and young people with SEND will support the Early Years Foundation Stage (EYFS) Key Stage outcomes to be in line with or better than national expectations.</li> <li>The Early Years Integrated Service including Family Centres increases support for settings and for SEND identification.</li> <li>Most schools are in the process of reviewing or changing their behaviour policies to reflect relational approaches which will strengthen inclusive practice and support schools to meet the needs of children within mainstream settings.</li> <li>Children's Services staff trained in relational practice provides consistency for families.</li> <li>Inclusive practice across schools increase access to education and reduces suspensions and modified learning plans.</li> <li>MHSTs support mental health and wellbeing of pupils and students, working closely with pupils, families and staff to promote positive mental health and improve emotional wellbeing as well as providing targeted mental health support, early on, where needed</li> <li>Data has highlighted the need to improve inclusive provision within mainstream schools, creating greater capacity for specialist provision in both mainstream and special schools.</li> <li>Data has indicated the greatest identified need was for support for pupils with Speech Language and Communication needs.</li> <li>Health data has identified the importance of support services for those who are neurodiverse.</li> <li>Significant investment is being made in developing a Specialist Teaching Support Service to support schools and settings.</li> <li>Families will have more options for the education of their child.</li> <li>The Kids Autism Hub helps around 10% of young people and their families understand more about autism and the different ways autism can affect people, offering a range of guides, resources and direct support.</li> <li>All autistic children and young people, and/or those with a learning disability aged 0-25, in the community with the most complex needs, will have the offer of a designated keyworker to reduce the number of autistic children and young people and/or those with a learning disability in inpatient settings or at risk of being admitted (to Mental Health hospital).</li> </ul> |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>Develop a consistent approach to place planning.</li> <li>Develop a commissioning strategy.</li> <li>Invest in early intervention.</li> <li>Education data reveals that the greatest need was for support for ASC and Social and Communication needs.</li> <li>Review our SEND estate to create more specialist provision in both special schools and Additionally Resourced Provision.</li> <li>Rollout our relational practice to health teams</li> <li>Revise the current inclusion and exceptional SEN funding model to ensure consistency and increase uptake.</li> <li>Invest in a new Specialist Teaching Service from September 2024, an Education Well-Being Service and a Speech and Language Education Support Service</li> <li>Enhance access arrangements in schools and settings for children and young people with SLCN and other therapy needs.</li> <li>Embed Southend attendance at multi agency DSR meetings for CYP and adults.</li> <li>Ensure SEND Partnership Board has feedback from LD/A HE Board and NHSE re DSR oversight and escalation.</li> </ul>  |



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|  | <ul style="list-style-type: none"> <li>• Further develop, commission and implement permanent alternative provision places for all ages including sixth form.</li> </ul> |
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## 10. Leaders evaluate services and make improvements

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| <b>What we do well</b>                  | <ul style="list-style-type: none"> <li>• Leaders have been empowered to take improvement actions with an ambitious transformation programme and service reshape.</li> <li>• Small Capital Bid Grants used to award £1 million to schools over 2023/24 and 2024/25 to strengthen SEND provision.</li> <li>• Completed an inclusion review of alternative provision options, the effectiveness of the SEND graduated response, how children and young people with SEND are educated successfully alongside peers in a mainstream school, and exploration of practise, service provision, modelling, and training to meet the growing social, emotional, mental health, anxiety and related medical needs of children and young people in Southend.</li> <li>• Service data from health, education and social care is now shared individually through SENDAP Operation Group with escalations to Board</li> <li>• The local area partnership has consulted on the local area's strategic priorities for improvement.</li> <li>• Increased the use of data in decision making.</li> <li>• Secured more investment in SEND services.</li> <li>• Increased support to Early Years, school-based settings and for SEND identification.</li> <li>• Created a SEND Forum as a venue to keep schools abreast of our plans, but also to consult with, and hear from, them with regards to service improvement</li> <li>• Southend Inclusion Review led to the creation of 3 new alternative provision pilots.</li> <li>• Developing an ELSA Network in partnership with EPS and Health</li> </ul> |
| <b>Impact on outcomes</b>               | <ul style="list-style-type: none"> <li>• Significant service changes will support children and young people with SEND.</li> <li>• Quality assurance of plans takes place within individual service areas.</li> <li>• Data analysis guided where investment was needed for a new teaching service.</li> <li>• Schools are now more engaged with the shaping of services and have a better understanding of the wider picture.</li> <li>• With parents, co-produce resources and facilitated parent support groups, in addition to school's universal offer with a particular focus on SEMH.</li> </ul>  |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>• Quality assurance of EHC plans.</li> <li>• Timeliness of EHC needs assessments.</li> <li>• Timeliness of annual reviews</li> <li>• Accurate data that supports Health and Social Care colleagues to deliver on statutory duties for EHCNA and AR's</li> <li>• Improve system wide understanding of therapy provision as specified in EHC Plans.</li> <li>• Performance and data teams across the partnership develop a joint dashboard with all information feeding into a central repository.</li> <li>• Data from the Learning Disabilities/Autism Health Equalities team to be shared back through the partnership via the members</li> <li>• Develop a more efficient system for administrating statutory EHCP processes.</li> <li>• Ensure SEND team capacity to meet demand is in place.</li> <li>• Ensure multi-agency panels and decision making is effective and efficient.</li> </ul>   |

## 11. Leaders create an environment in which effective practice and multi-agency working can flourish

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| <p><b>What we do well</b></p>    | <ul style="list-style-type: none"> <li>• Revised membership and functions of the SEND &amp; AP Operations Group</li> <li>• Established a schools SEND forum</li> <li>• Regular reporting to Health and Wellbeing Board and the Growing Well Board</li> <li>• Effective multi-agency working between education, social care and the police helps reduce identified safeguarding risks for children and young people with SEND.</li> <li>• Agencies involved in the support of children and young people with SEND work well together. There are several examples of close and integrated working</li> <li>• Joint work on addressing Speech and Language need with Integrated Health Board.</li> <li>• Education, health and social care teams and the Parent Carer Forum engaged with DfE “Rise” programme to work on coproducing an Outcomes Framework.</li> <li>• An ICB wide approach to an all-age Dynamic Support Register (DSR) is in place.</li> <li>• Systems for supporting children and young people through the use of care, education and treatment reviews (CETR) are developing well.</li> <li>• CAMHS have established weekly multi-agency triage neurodevelopmental referrals and monthly joint CAMHS case discussions meetings.</li> <li>• Creation of a Southend Employment forum, including local FE colleges, business leaders and the chamber of commerce in conjunction with a Business Enterprise event.</li> <li>• An Early Help Framework for professionals so that the wider local area is aware and communicate their service offer and provide outcome data to support evidence of impact.</li> <li>• There is strategic oversight for senior managers through attendance and contribution to multi agency decision making panels.</li> <li>• Child in Need plans and plans for those who are Classed as Looked After are multi-agency and includes health and education components.</li> <li>• Autism Keyworkers are identified for all children/young people that meet the criteria.</li> <li>• Colleagues in education, health and social care work collaboratively with the SEND local offer team in respect of information and attendance at SEND Surgeries.</li> </ul> |
| <p><b>Impact on outcomes</b></p> | <ul style="list-style-type: none"> <li>• There are clearer governance structures in place across agencies with improved strategic oversight from leaders at SEND Strategic Partnership Board, Health and Wellbeing Board and the Growing Well Board.</li> <li>• There is improved collaboration on addressing operational challenges and solutions through the revised membership of SEND &amp; AP Operations Group</li> <li>• Effective partnership working through DSR meetings ensures that children and young people’s mental health needs are met by a multi-disciplinary team in the community.</li> <li>• Multi-agency DSR meetings identify children and young people at risk of admission to a mental health inpatient setting</li> <li>• CAMHS multi-agency meetings and joint case discussions support children and young people with assessments and strategies to each individual health need.</li> <li>• Southend Employment forum brings improved placements and job opportunities for Young People with SEND.</li> <li>• Leads in education, health and social care work collaboratively in decision making panels to unblock obstacles in relation the outcome for the child or young person.</li> </ul>  |

|   |   |
|---|---|
|   | <ul style="list-style-type: none"> <li>Virtual School has a visible presence within a range of services and proactively engages with professionals from the right service in a time efficient way which reduces any drift or delay to the learner.</li> </ul>   |
| <b>What do we need to do to improve</b> | <ul style="list-style-type: none"> <li>Multi agency reviews of EHC plans to ensure a comprehensive review of a young person's needs and how these can best be supported through a joint, multi-agency approach.</li> <li>Co-production to develop individual EHC plans with sufficient contributions from health and social care.</li> <li>Improve collaborative working with schools.</li> </ul> |

The priorities identified in part B help the area to plan more effectively and inform improvements that will lead to better outcomes and experiences for children and young people with SEND and now forms part C.

## Part C

### **Actions and Priorities for the next 12 months to improve the experiences and outcomes of children and young people with SEND.**

The SEND Area Partnership is ambitious to make the changes necessary to improve services. We will do this by focussing and prioritising our efforts to ensure that the key issues emerging from this SEF dovetail into the Strategic Action Plan and other plans, both corporate and service- driven. Operational priorities and actions are detailed in the action plan, specifically the year 2 milestones (to July 2025) and associated workstreams.

The following over-arching priorities are:

*Leaders in education, health and social care are empowered to drive forward improvements at pace so that the Southend SEND Partnership strategy impacts positively on the experiences and outcomes of all children and young and people with SEND*

- SCC and ICB will implement a Southend specific Children's Commissioning Forum. This will report jointly into the Growing Well Board and the Area SEND Partnership Board.
- The Growing Well Board will refresh its terms of reference to ensure SEND Service improvement continues to be a priority
- The Education Strategy Group, Children Services Improvement Board and Southend Safeguarding Partnership Board will oversee the impact of the early help offer across the city.
- Stakeholder from the Southend SEND Forum and Early Years Forum will report on the impact of early intervention in education provision and work in partnership with SCC services to drive delivery.

*The local area partnership should evaluate the quality and impact of services and joint working more effectively, to inform improvements that lead to better outcomes and experiences for children and young people with SEND.*

- The Speech and Language Central Support project will report on the effectiveness of early identification and support to children in early years settings and in primary and secondary schools. It will evidence its impact on improving the knowledge of workforce in schools and the impact on the educational experience of children and young people with speech, language and communication needs in mainstream schools.
- The Central Specialist teaching service, the emotional well-being team and Early Years Services will report on their impact in adding to the capacity of the workforce in schools and settings to identify and support children and young people. Services will demonstrate the impact of their support and training offer and, where appropriate, direct impact on children and their families.
- The Area will implement a co-designed inclusion charter across all Southend settings and establish a measure of engagement as to its effectiveness in enabling provisions to commit to inclusion expectations and implement these in practice.
- The Area will co-produce a Preparation for Adulthood strategy to strength commitment, pathway awareness and knowledge across the system.
- The LA will review its inclusion and SEND panels to improvement efficient and effective decision-making and the deployment of resources so that arrangements and support to children and young people can be swiftly provided.
- A review of the short breaks offer/practice will be completed to inform the future offer.

*Local area partnership leaders should improve the effectiveness of joint working to support the co-production of EHC plans and annual reviews so that at each stage the provision that is planned takes full account of children's and young people's current and changing needs.*

- The LA will implement a reorganisation of the SEND Assessment and Review Service so that parents and providers have timely and effective officer support throughout the statutory SEND processes, during assessment and annual review phases.
- The LA will implement the recommendations of the SEND service audit review, including use of IT systems, improved monitoring and case-management.
- Targeted EP and LA officer resources will be in place to ensure swift improvement in meeting Statutory timescales is made.
- Statutory advice giver services will implement monitoring and quality assurance processes in regard to EHCPNA and Annual reviews and will report progress to the SENDAP Operations Group

*Local area partnership leaders should ensure that they share accurate data across health, education and social care to support rigorous and effective self-evaluation and inform joint commissioning*

- Accurate data sets across health, education and social care to support rigorous and effective self-evaluation and inform joint commissioning will be available and shared at SENDAPs and the Board.
- Progress on a shared data dashboard will be evident with clear implementation timescales in place.
- Complete the Joint Strategic Needs Assessment so that informed decisions in regard to service provision and commissioning across the area can be made.

*The local area partnership should ensure that appropriate support is in place from health services for children and young people who are awaiting health needs assessments, so that early intervention reduces the risk of any escalation of concern.*

- Rollout of the Neurodevelopment digital referral, advice and guidance portal, MyCareBridge
- To identify and implement a reporting mechanism on parental experience whilst waiting

*The local area partnership should make sure that parents and carers and professionals receive clear and reliable information about how to access the range of support and services that are available.*

- Improved information will be provided through the use of roadmaps supporting parents to navigate the services on offer in Southend.
- SEND champions across the area will be in place.
- The Local Offer Team will provide a report on the impact of the local offer SEND communication plan.
- A SEND Youth Engagement lead to support children and young people's voice in Southend will be in place and evidence of CYP voices will be present in area wide strategic developments, including PFA Strategy.

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# Terms of Reference

## Children's Joint Commissioning Group (CJCG)

### 1. Purpose of the Children's Joint Commissioning Group

- 1.1. To provide opportunities to enable collaborative commissioning that supports the the ambition of SEND Area Strategic Partnership, Transforming Care and Growing Well Board, that all children and young people in Southend have the right support at the right time.
- 1.2. To deliver the above purpose, the Children's Joint Commissioning Group will:
  - Co produce a joint action plan every two years
  - Work with openness and transparency
  - Influence delivery of services at a local level
  - Work collaboratively with children, families and professionals
  - Identify new opportunities for joint commissioning
  - Use local data and intelligence to inform commissioning plans
  - Measure impact and outcomes for children and young people in Southend

### 2. Status and Authority

- 2.1. The Children's Joint Commissioning Group operates to provide a collaborative commissioning function for the delivery of priorities.
- 2.2. The Children's Joint Commissioning Group is not a separate legal entity and therefore the decisions of the Children's Joint Commissioning Group will be the decisions of the members, based upon the authority delegated by the member organisations to their representatives on the Children's Joint Commissioning Group.
- 2.3. The Children's Joint Commissioning Group functions through engagement between its members so that each member is enabled to express their views to support the joint and collaborative commissioning functions.

### 3. Core functions of the Children's Partnership Commissioning Group

- 3.1. To ensure members of the group has a shared understanding about what each part of the system is commissioning in terms of services for children and young people and associated impacts.
- 3.2. To support the identification of individual and collective commissioning responsibilities through having a clear view of system performance against shared outcomes.

- 3.3. To ensure our collaborative commissioning reflects a shared commitment to co-production with service users and stakeholders.
- 3.4. To plan, deliver and report on collaborative commissioning activity that makes best use of resources and enables children and young people to get the right support at the right time.

#### 4. Responsibilities

The Children's Joint Commissioning Group will carry out the following responsibilities in order to deliver the core functions:

- 4.1.1 To ensure members of the group has a shared understanding about what each part of the system is commissioning in terms of services for children and young people and associated impacts.**
- 4.1.1. Sharing and maintaining an up to date log and pipeline of commissioning activity that helps identify opportunities for collaboration.
- 4.1.2. Mapping the scale and range of resources being deployed in response to children and young people across sectors and partners.
- 4.1.3. Supporting and working with the Southend Safeguarding Children Partnership.
- 4.1.4. Supporting and working with the Integrated Care System (ICS NHS Board and ICS Health and Care Partnership).
- 4.2.1 To support the identification of individual and collective commissioning priorities through having a clear view of system performance against shared outcomes.**
- 4.2.2 Identifying local current and future needs and commissioning priorities, taking account of any shared outcomes framework, Southend's joint strategic needs assessment, other intelligence and policy requirements.
- 4.2.3 Taking or supporting collaborative commissioning action in relation to services of concern where performance may impact on our collective response to children and young people.
- 4.2.4 Making recommendations on the further development, or conduct, of any procurement within the market for children and young people's services in Southend.
- 4.3.1 To ensure our collaborative commissioning reflects a shared commitment to co-production with service users and stakeholders.**
- 4.3.2 Actively seeking and acting on the views of children, young people, parents and carers to shape our commissioning of services.



- 4.3.3 Using insight on the views and preferences of children, young people and families from a range of sources to inform our collaborative commissioning.
- 4.3.4 Engaging with wider stakeholders to inform and shape our collaborative commissioning of services for children, young people and their families.
- 4.4.1 **To plan, deliver and report on collaborative commissioning activity that makes best use of resources and enables children and young people to get the right support at the right time.**
- 4.4.2 Overseeing the development and delivery of a shared commissioning plan that supports the priorities.
- 4.4.3 Mobilising commissioning activity in response to the strategic direction and requests received from the SEND Area Partnership.
- 4.4.4 Providing updates and reports on key commissioning projects as required to the SEND Area Strategic Partnership, Transforming Care and Growing Well Boards as required.
- 4.4.5 Pursuing and enabling collaborative commissioning approaches, consideration of alliance contracting and agreements, use of pooled and shared resources.
- 4.4.6 Overseeing the development of a Joint Commissioning Framework for children and young people with SEND, including the shared delivery of agreed actions.

## **5 Accountability**

- 5.1 The Children's Joint Commissioning Group is accountable to the SEND Area Strategic Partnership, Transforming Care and Growing Well Boards.
- 5.2 Individual members of the Children's Joint Commissioning Group remain accountable through their own organisational governance frameworks.

## **6 Operation of the Children's Joint Commissioning Group**

- 6.1 The Children's Joint Commissioning Group will meet bi-monthly.
- 6.2 It will be chaired by an agreed named member of the group, for an initial term of 12 months.
- 6.3 Administrative support will be provided in terms of agendas, note taking and arrangements for meetings.
- 6.4 The Children's Joint Commissioning Group will be quorate if three of its members are present, subject to the members present being able to represent the views and decisions of the members who are not present at any meeting.
- 6.5 Conflicts of interest are to be declared and recorded at the beginning of each meeting.

- 6.6** The Children's Joint Commissioning Group may establish task and finish groups to support it in the discharge of its functions.
- 6.7** Information obtained during work of the Children's Joint Commissioning Group must only be used for the purpose it is intended. The purpose of sharing such information is to carry out the functions of the Children's Joint Commissioning Group and should not be used for other purposes.
- 6.8** Members of the Children's Joint Commissioning Group are expected to protect and maintain as confidential any privileged or sensitive information.
- 6.9** Children's Joint Commissioning Group meetings will not be open to the public or providers.

## **7 Membership**

### **7.1 Membership of the Children's Partnership Commissioning Group:**

- Children's Commissioning - Southend City Council
- Specialist and Complex SEND Placement and HNB Commissioning - Southend City Council
- Director Education, Early Years and Inclusion Services - Southend City Council
- Head of Specialist Support Services - Southend City Council
- Quality Assurance and Policy Officer - Southend City Council
- Children's Social Care, Southend City Council Children's Services
- LD, mental health and autism, Southend City Council Adult Services
- Commissioning Lead - Public Health Southend City Council
- Deputy Director BCYP – Mid & South Essex ICB
- Senior Manager for Children, Young People - Mid & South Essex ICB
- Office Police and Crime Commissioner
- Representative - Southend SEND Independent Forum

Other members/attendees will be co-opted as necessary.

- Finance Business Partner - Children's Services
- Director of Commissioning Finance - Mid & South Essex ICB
- Strategic Commissioners - Children's Services
- Commissioning Managers - Mid & South Essex ICB
- Lead Commissioner for CAMHS
- Subject experts as required

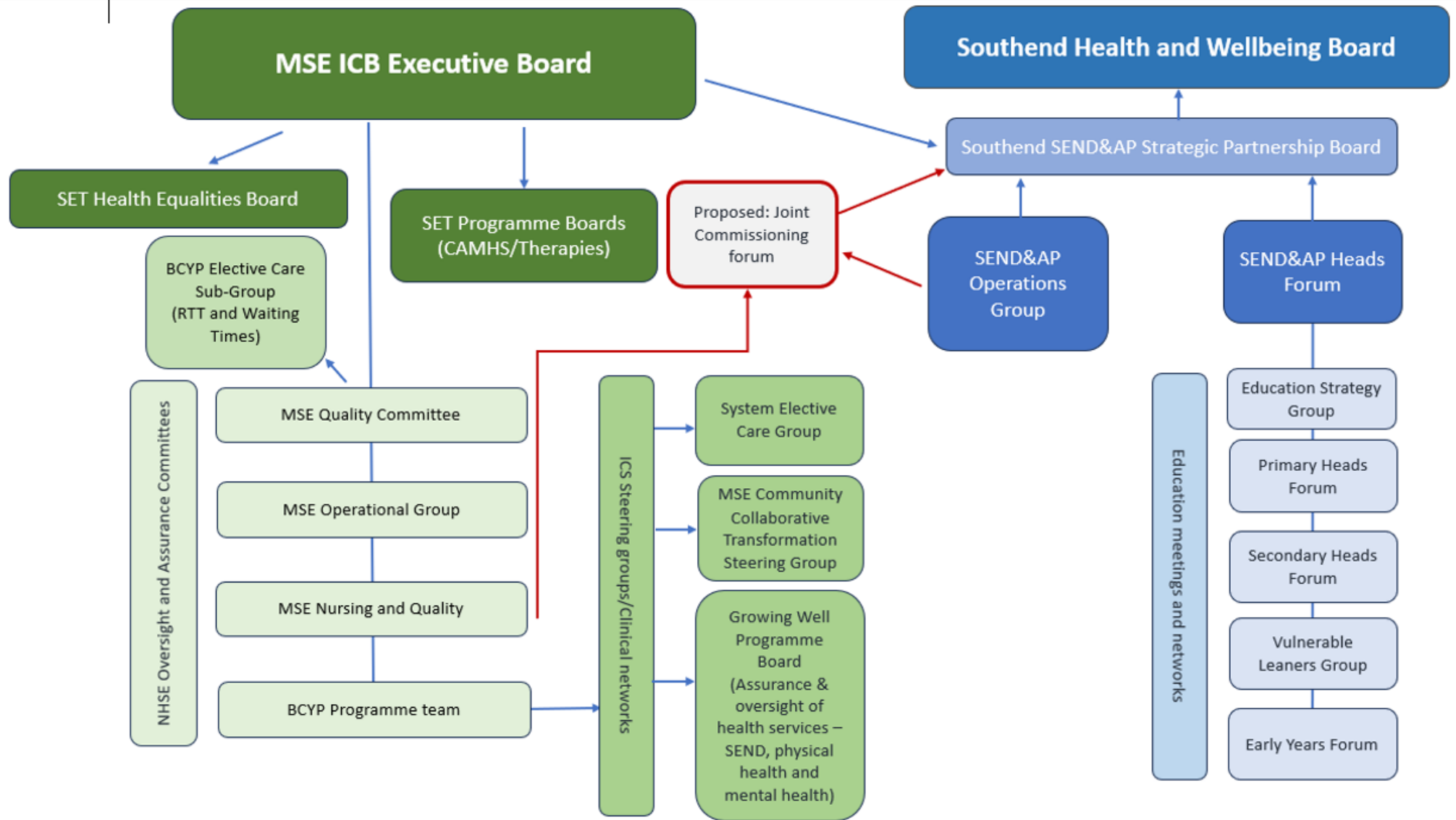
- 7.2** Where a member cannot attend a meeting, the member should nominate a named deputy to attend. Deputies must be able to contribute and make decisions on behalf of the member that they are representing.

## **8 Review**

**8.1** These terms of reference will be formally reviewed six months after initial adoption and annually thereafter.

Date of issue:  
Date of review:

DRAFT



**Meeting:** Health and Wellbeing Board  
**Date:** December 2024  
**Classification:** Part 1  
**Key Decision:** No  
**Title of Report:** FOR INFORMATION ONLY: Adult Social Care Strategies  
Annual Report April 2023 - March 2024

**Executive Director:** Mark Harvey  
**Report Author:** Nicola Mickleburgh  
**Executive Councillor:** Councillor Maxine Sadza

## 1. Executive Summary

- 1.1. To provide the Health and Wellbeing Board with the end of year summary report of the three Adult Social Care Strategies for period April 2023 to March 2024.

## 2. Recommendations

### **It is recommended that Cabinet:**

- 2.1. The Board to acknowledge the Adult Social Care Strategies Annual Report for 2023/24, covering the three core strategies – Ageing Well, Caring Well and Living Well.

## 3. Background

- 3.1. The Council's five year Adult Social Care Strategies (Ageing Well, Caring Well and Living Well) have been co-designed with people who use services, along with their friends and families. They focus on how the council will support individuals across the city, including older adults, those with care and support needs related to learning disabilities, mental health challenges, autism, and additional physical or sensory difficulties, as well as the friends and family of individuals with these needs.
- 3.2. The three core strategies, Ageing Well, Caring Well and Living Well set out priorities until 2027.
- 3.3. Annual action plans have been established to advance the delivery of each strategy. Partnership Groups are formed to manage the development, implementation, and monitoring of these yearly action plans.

3.4. All action plans aim to further develop co-production and ensure alignment across services, as well as other department plans and strategies, to reduce duplication and make efficient use of available resources.

3.5. All partners will be working together to refresh all three core strategies in the coming year.

#### **4. Reasons for Decisions**

4.1 The governance of the three strategies require the submission of an end-of-year report to the HWBB.

#### **5. Other Options**

5.1. N/A

#### **6. Financial Implications**

6.1. The aspirations and outcomes of these strategies are to prevent, reduce and delay need. This provides efficiencies across the service whilst balancing the rising demand and complexity of need.

#### **7. Legal Implications**

7.1. The Adult Social Care Strategies are in line with the Council's Adult Social Care responsibilities, set out in relevant legislation such as the Care Act 2014, the Mental Capacity Act 2002 and the Mental Health Act 1983, as well as associated regulations and Statutory Guidance.

#### **8. Policy Context**

8.1 Care Act 2014 compliance and best practice.

#### **9. Carbon Impact**

9.1. N/A

#### **10. Equalities**

10.1. In delivering their Care Act functions, the Council takes action to achieve equity of experience and outcomes for all individuals, groups and communities within Southend-on-Sea; they are required to have regard to the Public Sector Equality Duty (Equalities Act 2010) in the way the strategies are delivered each year.

#### **11. Consultation**

11.1. N/A

#### **12. Appendices**

12.1. **Appendix 1:**

[Adult Social Care Strategies - Annual Report 2023 to 2024 FINAL v4.docx](#)

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# Adult Social Care Strategies Annual Report April 2023 – March 2024

Caring Well / Living Well / Ageing Well

Author: Strategic Commissioning Team  
Version: FINAL Version 4  
Review / Revision Date: June 2024

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# 1. Background

## Transforming Care and Support

The council's overall direction for adult social care is built on three core strategies named [‘Ageing Well’](#), [‘Caring Well’](#), and [‘Living Well’](#), setting out priorities until 2027. The three strategies were co-designed with people who use services and their friends and families. They focus on how the council will support people across the city, whether they are older people, those with a care and support need with learning disabilities, mental health challenges, autism, living with additional physical or sensory difficulty, or the friends and family of people with additional needs.

We have annual action plans to move forward the delivery of each strategy and take us to where we want to be by 2027. Partnership groups have been formed to manage the development, delivery, and monitoring of the yearly action plans for each strategy. These will build on the work of the previous year and in reaction to emerging needs and trends.

All action plans contain a desire to further develop co-production and ensure links across services and other department plans and strategies to reduce duplication and make efficient use of available resources.

The first year of work was focused on gaining a clear understanding of what was already in place which could be further developed and measured for progress, alongside what could be done within the first year to give us a starting point to measure progress in oncoming years. Year 2 has looked at setting priority tasks and achievable outcomes clearly outlined in each Strategy's action plan.

## 2. Common Priority Areas

### Links to Other Priorities and Strategies

The aim to optimise resources and minimise duplication by collaborating with other health and local authority strategies and projects has continued.

To achieve this, the three primary partnership groups: Living Well, Caring Well, and Ageing Well meet typically every 6 weeks to review and discuss each Action Plan and provide updates. These groups consist of representatives from various sectors, including council, health and service providers. The members of these partnership groups gather input and updates from different forums in Southend, Mid & South Essex, Greater Essex, and the wider region. This effective process ensures strong connections throughout the system. It has also identified other strategies both internally at SCC and wider which have potential links to the Action Plans – e.g. a new Economic Development project and a Domestic Abuse strategy. A key update for 2023-2024 is the Accelerated Reform Fund, provided by the Department of Health and Social Care. Southend Council will be working closely with Essex County Council and Thurrock Council to increase the identification and support offer for carers.

### Coproduction and Engagement Development

Across all Strategies and Partnership groups, there is a continued commitment to include local voices. To achieve this outcome, we have produced:

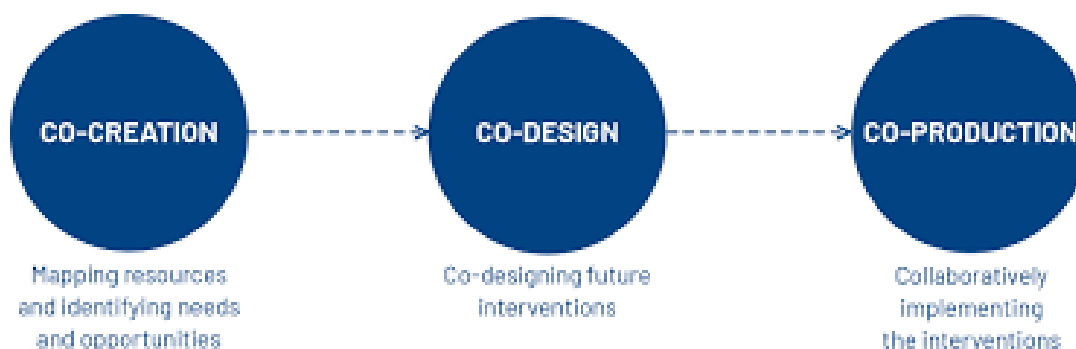
- A new SCC coproduction Framework was published in December 2024. This is available on the Intranet and Your Say Southend.

- Our coproduction lead has supported the setting up of the Learning Disability User Voice Group in partnership with Project 49.
- An Over 55's User Voice Group is now regularly meeting, in collaboration with SAVS.
- Co-design and co-production have started with these groups. For example:
  - The LD User Voice Group had input into the council's new Complaints Policy in terms of reasonable adjustments and directly affected changes to the Voter Passport document created to help individuals with LD vote.
  - The LD Group is starting to prepare to vote for a Chair and Co-chair and these individuals will be invited to attend Strategic Partnership and Livewell meetings.
- A Carers User Voice Group also takes place, typically monthly, and they have fed into projects such as the Carers Relief Fund, reviewing financial assessment forms, corporate website updates and the Caring Well Your Say Southend engagement page.
- Plans are in place to create a Mental Health User Voice Group and a similar Group for individuals with Autism and Neurodivergence.

Initially hesitant to be part of a more formal board structure, trust has been gradually building – particularly in this second year. Confidence in the process is now evident with the desire that over time they will be happy to be part of more formal partnership groups.

The online resident engagement platform 'Your Say Southend' has specific areas for each Strategy – Ageing Well, Caring Well and Living Well are live, with an area for Surveys to be completed as part of consultation activity. These pages will be further updated in line with any revisions made to the core Strategies.

These platforms will remain open throughout the duration of the strategies, providing a blend of online engagement and consultation alongside face-to-face sessions and coproduction to ensure to ensure inclusivity and equal opportunities for all.



### 3. Caring Well

Our 'Caring Well' strategy is a joint strategy with health colleagues that focuses on the needs of unpaid carers, sometimes called 'hidden carers', which can be children or adults that find themselves in a position caring for a family member, partner or friend. These carers play a significant role in preventing the need for a more formal care provision, and the health and social care system relies on this unpaid support.

Priorities and action plans within this strategy focus on the priority areas of:

1. identifying, respecting and valuing carers
2. providing suitable information and support
3. developing carers voice, knowledge and understanding
4. assessing carers needs
5. maintaining carers balance by connecting with communities and being able to take a break
6. recognising health and wellbeing needs,
7. helping carers stay in, enter or return to work education or training (if appropriate)
8. being prepared for changes and encouraging integration and partnership working to meet people's needs.

*Priority Areas (Total 10)*

**3.1.** Links to Other Priorities and Strategies, covered above as part of 2.1 (Page 3 and Page 4)

**3.2.** Coproduction and Engagement Development, covered above as part of 2.2 (Page 3 and Page 4)

#### 3.3 Identifying, Respect and Valuing Carers

Identifying carers and encouraging them to come forward and to self-identify as a carer is an important step in preventing them from developing needs of their own and enabling them to remain safe and well.

A number of activities were undertaken and measured for effect, these focused on:

Increasing the number of registered carers:

- There has been an increase from 1,442 to 1,755 registered with Carers First.
- There has been an increase from 7,000 to over 9,000 registered with a GP (circa 5.7%).

Increase in Carers GP health check:

- Due to capacity issues in Primary Care, this work has not progressed consistently however, the offer for health checks has been based on acute need. A new Carers Health check template has been developed in collaboration with EPUT (Essex Partnership University Trust) with the intention to offer health check as an enhanced service offer for local practices and Primary Care Networks (PCN) increasing ability to resource and offer this service. Due to financial capacity this has been put on hold to review in 24/25. The template developed is in use by EPUTS Carers Intensive Support Wellbeing offer roles.

Increasing health checks:

- Carers Intensive Support team have received 495 referrals, for Southeast Essex, with a total of 207 referrals from Southend residents. All carers were responded to within 5 working days, all carers were also responded to within 24 hours for immediate risk, all carers had their health check and Freda assessment completed and all carers were supported face to face. The service has received referrals from local carer organisations, Health Teams, Social Prescribers and Council led services.

Increased awareness of young carers:

- Carers referrals have now been updated to a children's single point of contact (C-SPOC) and all referrals including from children's social care are made through this. School census data shows an increased number of young carers being identified. 38 referrals have been made by two schools. Contact has been made with all registered young carers to update records and to identify if they are still in a caring role and whether further support is needed.

Carer registration will further develop in the next year to fully embed a standard operating procedure in all GPs, PCNs, Carers Support agencies and Local Authorities. Within the health settings, Mid-South Essex Foundation Trust (MSEFT) are working towards adopting similar IT systems, to identify carers across hospital and GP settings, with the aim for community hubs and other agencies to embed the same operating procedure for adults and young carers.

To increase carers health checks as a proactive measure, financial ability to enable practices and PCNs will be reviewed to provide this service.

Future plans to increase health checks includes continuation of funding to advertise CIS team with more professionals and continued working relationships across health and social care. As well as continuation of opportunities for EPUT to work with all partners to re-engage carers with out of home activities.

The future plans to increase young carer awareness include understanding the barriers and challenges schools face due to the lack of referrals being made. Young carers referred from schools will be tracked after enquires and referrals are made to ensure referrals into service. In the next year school assemblies and training offer will also continue to be offered. In the coming financial year, we will also be commissioning a Young Carers Service as part of our contract with Carers First.

### **3.4 Information and Support for Carers: Access to information**

In the 2020 Southend-on-Sea Family Carers Survey, 44% of carers said they were not able to access the information, advice and guidance they needed to support them in their caring role.

*To achieve this outcome, the actions set included:*

Improving advice and guidance on discharge from hospital:

- As part of the Accelerated Reform Fund, Southend Council are working with Thurrock to develop a Carers Identification Card, which will be available to carers to register. The card will help blue light services to identify those who are carers, and provide a standard approach across both local authorities, improving patient experience.
- Carers Hospital Discharge information booklet developed by Carers First remains available on the Your Say Southend – Caring Well engagement page.

Young Carers access to information and advice:

- The training offer has been on going. For example, training session with Children's Society took place on April 13<sup>th</sup>, with attendance from schools, school nursing and children's social care. All schools within the borough were invited, with 9 schools attending.

- In terms of young support in schools, young Carers school groups have started at Prince Avenue and Barons Court, other carers group continue ongoing include Milton Hall, Chase High, Shoebury High.
- Carers First now has a whole family approach, supporting young carers to link in with the young carers service and supporting young carers with transition to Carers First offers at 17 years old.

#### Transitions young Carers 17+:

- There is ongoing discussion between children's social care and Carers First to improve transitions support offer, however due to capacity issues, this hasn't progressed at pace. SCC young carers team are engaging with Southend Carers Young Carers group, to see whether a joint approach can be achieved to increase transitions support and share best practice.

#### Updates to the council website and information for carers:

- The new Livewell digital platform was launched in June 2023. Local service directories were reviewed and updated by using user friendly format to make it easier for residents and professionals to search for information and advice on events and wellbeing topics and local services. Since June 2023, 47,125 residents have used the site, with positive feedback received. New features on the website show events, increasing public engagement, such as the Youth Mental Health Week and Measles vaccination clinic. The website offers monthly newsletter to keep subscribers up to date.
- The Livewell platform remains one of the main communication channels for Public Health messages as well as its social media account. During the year 2023/24, 32 campaigns took place which focused on Mental Health & Wellbeing, Healthy Weight & Physical Activity, Harm Reduction & Disease Prevention as well as LGBT, Women's & Men's health.
- Information pages are continuously audited for quality purposes and future enhancements. The Livewell digital platform meets accessibility requirements, which was also validated by a recent random audit in March 2024 undertaken by the Government Digital Service.

#### Updates to the Council's Corporate Website:

- Following consultation with carers on information they would like to access and topics that are important to them, the corporate website has been updated to reflect this, providing information on defining, who is an unpaid carer, what a carers assessment is and how they can access information, advice and guidance.

The accelerated reform fund projects will be implemented in the next year, with a part time role recruited in to organise the delivery of the carers cards, as well as working with GPs and health colleagues to improve the communication and collaboration on identification of carers in Southend.

To increase access to information and advice for young carers, assemblies will be offered to schools, to emphasise the importance of carers identification. School forums will be supported to be established to help come together once a term, to discuss things that have been going well and how young carers can be further supported by SCC and schools.

To improve transitions, SCC and Carers First will be working together, providing resources and increase Carers First collaboration at 16+ youth groups to help build relationship and rapport with young people.

Future work on the Livewell platform will look to introduce a social prescribing tool, improve the quality of the directory content through feedback, promote public health events and campaigns and overall improve the Livewell offer in Southend. With regards to the corporate website, information will be reviewed at intervals, to update with relevant information for carers.

### 3.5 Carers Voice Knowledge and Understanding

Many carers have told us they do not feel listened to and are often cut out of conversations between health and care professionals. We were also told that they needed help in navigating the systems and in developing their understanding and resilience.

*To achieve this outcome, the actions set included:*

Ensuring carers know what support they can access:

- Following feedback from carers, a carers resources booklet has been created by ICB team detailing the service offer to carers, along with contact details of organisations who are able to support carers. The document has been shared with the partnership group members to share with their network and also, uploaded onto the Caring Well Engagement page for Carers to access online.

Developing carers understanding and resilience:

- Caring confidently courses have been delivered by Carers First. In 2023-2024, 124 carers have taken up the Caring Confidently course.

People attending peer support:

- Groups and events have been embedded into the Carers First programme, carers regularly attend and feedback from these groups have been positive. There are 4 regular groups held over a month. Coffee morning in particular is used to increase knowledge and understanding of caring role, guest speakers are regularly invited to attend to share information and practical tips on services they offer, guest speakers have included Everyone Health, financial assessment team, fire brigade etc. Male carers support groups support men in Southend and help them engage and take a break from the caring role.

Helping to measure carers progress:

- Progress Report from Carers First (Year 2023/2024), Carers First conducted an assessment of carers' experiences. The findings indicate positive developments in their caring roles, as reflected in the Carers STAR ratings. Specifically:
  - 86% of carers reported an improvement in their caring responsibilities.
  - 100% of carers experienced an enhanced caring role.
- Several factors contributed to these improved scores:
  - Increased Personal Time: Carers benefited from breaks for appointments and special occasions, allowing them more time for themselves.
  - Statutory Assessments: Enhanced assessments helped identify specific needs, leading to better support for both carers and those they care for.
  - Day Services: Identification and utilisation of day services further improved the overall caregiving experience.
- Despite these positive trends, financial concerns persist among carers. The rising cost of living remains a significant challenge. However, Carers First has provided support through the Southend Emergency Fund, including benefits checks and grants.
- Looking at the support offered by the Carers Intensive Support team. Carers are better informed on looking after their health and wellbeing, supporting them in their caring role. Carers are being informed of what they are entitled to from both health



and care system. Carers intensive support team facilitate monthly carers drop-in group in partnership with Southend Adult Community College, and they have a weekly drop in at Queensway Surgery. The Shoebury Health Inequalities Carers Support Worker has joined SCC Poverty Strategy Group, is working with SECH on a carers digital programme, as well as linking with Housing to establish a carers support group within sheltered housing schemes.

#### Carers Relief Fund:

- Carers Relief Fund distributed by Carers First and SAVs supported carers living with their adult cared for person at home. A total of 49 carers were supported between November 2023 to March 2024 to access equipment to help them in their caring role. This included 11 air fryers, 8 laptops, 4 washing machines, 10 household items, 3 hoovers, 3 garden items, 9 household electricals, 1 epilepsy monitor, and an osteopath payment. SAVs distributed the funds to support establish carers groups in the community. Of the 6 applications made, 4 of these projects were successful, including a men's breakfast club, heritage upholstery group, wellbeing activities with live music, and a brew, biscuit, and banter social group.

Partnership work will continue with the ICB, to review the information contained within the carers resource document being downloaded, it will be reviewed and updated at intervals to ensure the information is up to date.

Caring confidently courses will be promoted to increase uptake and include a combination of online and face-to-face session to include those who are digitally excluded.

Carers First will continue to support groups of carers including parent carers, and work to reach hard to reach minority groups in Southend.

Carers First will continue to measure progress to increase the number of Carers having a Carers STAR outcome and increase the outcomes and engage with more carers at events and increase the number of breaks provided. EPUT will look at the continuation of funding to enable CIS to facilitate an Ageing Well Carers Education Programme with bespoke information to Southeast Essex.

The carers relief fund will be reviewed to gain feedback from those who received the funding.

### **3.6 Assessing Carers Needs**

The feedback from carers is that they do not understand what the carer's assessment is for, with many viewing it as an assessment of their finances or their ability to care for the person.

*To achieve this outcome, the actions set included:*

Online screening questions and self-referral for a care act assessment for carers:

- Updated Southend Council webpage has been launched, providing information on the care act assessment and requirements.
- Completed carers assessments are being shared across the LA and Carers First, to reducing duplication and simplifying the information pathway to carers.
- Carers First have been working with carers to identify those who require carers information.

Pilot with Carers First completing carers assessments:

- Through a joint partnership with the Council, Carers First have been delivering carer assessments.

- 22 assessments and 17 reviews have been completed so far, there is currently no waiting list for carers assessments.

Feedback from Carers on experience with assessment process:

- A dedicated member of staff was employed to complete SCA on behalf of Southend. From her starting these in September 2023 to end of year 22 were completed along with 16 reviews.
- Positive feedback from carers received around the process and outcomes. Good working relationships built with social care teams and support teams, leading to a more joined up informed service.

Streamlined referrals for young carers:

- Young carers are now referred through C-SPOC system, ensuring referrals are made within the same way in children's service.
- Schools and other providers requesting children's services are able to request services on one form, which is known by all. Everyone being referred into Young Carer services is contacted within a timely manner. To enhance transitions, we have developed and finalised the transition assessment.

Carers First pilot assessment will be reviewed for the following year, to look at how assessments and reviews can be increased along with a formal feedback process for carers to provide feedback on their experience of a carers assessment.

Transitions assessments will be rolled out in the next year and look to increase young carers referred into COOL (younger age carers) and CHIL (Teenage carers) sessions.

### **3.7 Maintaining Balance including connecting with communities, taking a break and Health and Wellbeing**

From the 2011 census we know that carers have worse general health than those who do not provide care and that generally their health deteriorates the more hours of care they provide. Similarly, carers have told us that their role can often feel all-encompassing, meaning they lose their sense of self and are no longer able to do the things they used to do or continue with the relationships they once had.

*To achieve this outcome, the actions set included:*

Ensuring carers receive quality time to be themselves, able to consider their own health and wellbeing needs and increasing carers connection to the wider community:

- Carers First continues to support carers in accessing breaks to attend medical appointments and special occasions with friends and family. 136 breaks have been provided over 23/24.
- Carers have been able to attend their own medical appointments but alongside this, carers have been to family celebrations, had lunches with friends and attended music concerts.
- Peer support groups and guest speakers offer increased support and increased knowledge to carers, this supports their emotional and physical wellbeing. Carers have accessed Everyone Health for gym memberships and exercise classes. Carers have also attended falls prevention classes with their cared for.
- Using the Carers STAR 82% of carers feel this has improved in the last 3 months.

Utilising Community Builders / Connectors to identify and support carers needs:

- Community Builders, working in specific Southend wards have regular liaison with Southend Association of Voluntary Services (SAVS) and frequently meet local people with skills, interests, businesses.
- Promoting and signposting carers to the Your Say Southend Engagement page and relevant support / services.

Exploring digital and technological solutions to understand how this could help deliver care and provide support and reassurance to carers:

- Assistive Technology – a new project is underway to identify assistive technology and how the disabilities facilities grant can be better utilised to assist families.

Development of Carers Experience Days

- Carers days are being arranged with museums colleagues to showcase different areas of Southend.
- Carers Week events held by Carers First, involved professionals, organisations and carers from across the city.
- Wellbeing referral programme year 1 pilot ended in October 2023, the system is now embedded with partnership working with Fusion Lifestyle and Everyone Health. Waiting times for courses are minimal with high standards in course delivery.

Future work will focus on continuing the Community Builders relationships in the community to increase awareness and engagement with services. Carers First will continue to increase the number of breaks provided and the amount of care agencies worked with to widen reach.

The Assistive Technology project is ongoing with commissioning looking at options for use of assistive technology moving forward.

Carers Experience Days will be progressing with monthly sessions with museums colleagues to attend SUFC and RNL. the Carers Lived Experience group also will be continuing on a monthly basis. Along with Annual Carers Week events. Wellbeing referral program will continue with fusion lifestyle, working to promote the programme and maintain engagement.

### 3.8 Helping Carers

The carers we spoke to told us that whilst they recognised how important being active was for both their mental and physical health, it was just not a priority due the demands placed on them. Many carers also told us it was important to have something to keep them going and to help them maintain their personal identity. This could be work, volunteering, pursuing an interest, or anything that is not directly related to their caring role.

*To achieve this outcome, the actions set included:*

Stakeholder engagement with a view to change:

- Carers were involved in the supported living tender, attending and reviewing presentations from prospective providers of supported living and providing their feedback.

Better Employee Offer:

- Workplace health offer has been promoted in the community to support businesses and organisations to sign up. Public Health Team are working with neighbouring Local Authorities on Work Well Partnership strategy to support people into work.

Employer engagement and understanding:

- Carers First continue to attend events to build recognition of carers in employment and training.

Building links with employers and considering employment carer recognition:

- Carers First have attended Southend Business Partnership Breakfast event and also South Essex College Breakfast forum aimed at employers in the Care Sector.

Future work will focus on supporting carers to identify leisure and employment offers to improve their outcomes and assist with their care plans. Plans are in place to review if Southend should join the Employers for Carers membership, which will offer training support and policy advice for SCC and for SME organisation in Southend.

### **3.9 Prepared for Changes**

In the Southend-on-Sea Family Carers Survey 2020, 72% of carers said they did not feel prepared for changes in their caring role.

*To achieve this outcome, the actions set included:*

Contingency planning – increase the number and quality of contingency plans:

- Contingency planning is being included as part of the Accelerated Reform Fund bid, as is the introduction of carers cards, to help blue light services identify carers in an emergency and provide support measures.
- All carers completing a carers assessment are offered Contingency planning session to help them plan for an emergency.

Increase the number and quality of contingency and change plans for young carers:

- SCC Young carers workers are attending meetings with health colleagues to help identify how young carers can be identified and sharing contingency plans across systems.

Ensure carers are better prepared for changes in the future, both for the carer and cared for:

- The Local Authority is working with Health colleagues to share contingency plans for carers across the system through shared data.
- 71 respite breaks, year to date for appointments provided through Carers First.

Conversations are ongoing in the health area to create standardised contingency planning for young carers.

### **3.10 Integration & Partnership**

When we spoke to carers, they told us they found the health and social care system to be very complex and it was hard to understand the roles of the different councils and health systems.

*To achieve this outcome, the actions set included:*

Contingency plans shared with relevant organisations, working to ensure saved on GPS system one:

- Carers First register all carers with their GP as a carer (if they want to be) or are supported to do this independently if they wish following the process set.
- Carers as a result have greater support from GP services, carers have reported they received a text from GP surgery checking if they are a carer and offering support.

Identify and create “Champions” within departments across health and social care:

- Adult Social Care Social Team have identified Carers champions and identified other partnership group members who would like to be a part of the Champions network.

Future plans include increased carers recognition in Primary Health Care to ensure carers receive greater support.

In terms of Carers Champions, a Terms of Reference will be developed, and a group will set up to coordinate the role and feedback loop from Carers Champions to the partnership group.

## 4. Living Well

The 'Living Well' strategy focuses on the needs and well-being of working-age adults with additional requirements, including physical, sensory, learning difficulties, mental health challenges, and autism. Research on best practices has demonstrated that our residents facing these challenges would benefit from a person-centred approach to care, enabling them to live independently and actively participate in their local community.

Priorities and action plans within this strategy focus on the priority areas of:

1. improving people's health and wellbeing promoting health lifestyles
2. preventing the number of hospital and care home admissions.
3. developing suitable housing and principles of housing support.
4. delivering health, care, support, and housing in a more joined up way.
5. enabling people to remain part of and active in their communities and to be digitally included.
6. encouraging community inclusion and ensuring integrated person-centred services that enable people to take control of their care and focus on their strengths.

*Priority Areas (Total 11)*

- 4.1. Links to Other Priorities and Strategies, covered above as part of 2.1 (Page 3 and Page 4)
- 4.2. Coproduction and Engagement Development, all aligned priority areas covered above as part of 2.2 (Page 3 and Page 4)

### 4.2 Coproduction and Engagement Development (Living Well only)

In Southend, we have recognised the need to develop a specific Action Plan for Autism and Neurodivergence. Our aim is to evaluate the current areas which work well and identify key areas of improvement. This review will result in the formation of a new Autism and Neurodivergence User Voice Group, who will feed into the Action Plan and will form part of the wider the Living Well strategy.

*To achieve this outcome, the actions set included:*

Work collaboratively to establish an Action Plan for Autism and Neurodivergence:

- A two-day workshop was held last year to identify the key areas of improvement.
- Four priority areas were identified: lack of training, services, mental health support and social inclusion.
- Some online workshops have already taken place in 2024 around lack of training and the services currently available, with specific speakers attending to explain their involvement / provider offer.

Future plans will be to complete the remaining online workshops, establish a Partnership / Stakeholder group and use co-production to formulate a dedicated Action Plan for this.

### 4.3 Health & Wellbeing – Promoting healthy lifestyles for the adult population

Recognising the significance of promoting healthy and active lifestyles among Southend's adult population is crucial. Individuals dealing with mental and physical health conditions often experience poorer health outcomes compared to the general population. Therefore, it is essential to provide supportive services that focus on promoting good health and overall well-being.

*To achieve this outcome, the actions set included:*

Initiate local hubs at venues such as day opportunities, links to Everyone Health, Sexual Health and NHS:

- This programme of work is still in development and forms part of the offer being discussed with Southend Care.

Increase in uptake of NHS Health Checks:

- We have already mentioned the Carers Health Check work in section Caring Well Section 3.3. This section will focus on working age adults who are not carers.
- For general NHS Health Checks, we have taken an approach to reduce intra-locality as well as intra-city health inequalities across Southend. This requires more targeted efforts in areas of higher deprivation and/or lower uptake as part of place-based commissioning to ensure that Health Checks reach those with the highest health risk and need.
- There has been introduced higher incentives to Health Checks delivered to patients living in Southend's most deprived communities and introduced higher targets for 13 GPs who are in the most deprived areas. As a result, 48% of Health Checks have been delivered to residents in more deprived areas (this figure was only 37% for the previous year).
- 23 practices out of the 24 delivered NHS Health Checks in 2023/24 compared to 16 GPs delivered Health Checks the previous year.
- Health Check uptake has increased this year by 471 compared to last year (3,444 Health Checks in 2023 / 2024 vs 2,866 in 2022 / 2023).

The focus for Year 2 will be to continue to see significant increase in the delivery and uptake of the NHS Health Checks and reach our target in 24/25. There will be a special focus on the 10 GP practices in the most deprived wards to reduce intra-city health inequalities across Southend. Ensure that all GPs are signed up and deliver the service and focus on increasing men's uptake on NHS Health Checks.

Increase Health Checks for Learning Disabilities and Mental Health:

- Approaches to promote an increase in the uptake of Health Checks for Learning Disabilities and Mental Health remains part of the community-based support services. Providers are continuing to support residents with their health checks and wider health appointments including sexual health, female health and dentistry.
- As at 30/04/24, the uptake of completed LD health checks has increased to 1,083, (87% of those on the register), and the uptake of SMI MH health checks has increased to 1,928 (80 of the target for completion).

Increasing awareness and referrals to the new Drug and Alcohol service and increasing joint working between Drug and Alcohol and Statutory Social Care Delivery Services:

- The Drug & Alcohol Treatment Service contract, during its second year, has increased the number of successful completions and exit from the service.
- 187 successful completions during January 23 to December 23, out of 948 in the service, an increase on 2022 / 2023.
- The aim to increase the number of people accessing the Drug & Alcohol Treatment Service has been challenging, due to recruitment issues, but this is now an improving picture and numbers have increased during the early part of 2024.

During 2024/25 to the drug and Alcohol service will continue with recruitment to develop a full system complement which should result in increased service capacity and continue to refine pathways, including pathways for older adults, so that rates of successful completion continue to rise.

Joint working with Department of Work and Pensions and economic development teams to consider opportunities:

- This is joint priority area and is detailed within Ageing Well (Page 28).

Ensure that the IAG offer is accessible to a range of residents, meets the needs of those most vulnerable and meets the service outcomes:

- This is a joint priority area and is detailed within Ageing Well (Page 29).

Future work will focus on continuing to consider our Day Opportunities offer. Also, a focus on recruitment within the Drug & Alcohol Team to ensure capacity is able to meet the increased number of referrals.

#### **4.4 Prevention – Preventing people from going into hospitals and care homes**

We want to reduce the number of hospital and residential care admissions in Southend. We recognise that our current offer of support for people in their own homes needs modernisation.

Feedback from residents on preventing admission to care home and hospitals included positive experiences with Mental Health support whilst in hospital however once they returned home, there was a lack of support – and residents wanted to see this improved. The focus on this year has been focused on supporting people in their discharge process, by increasing awareness of the support offered through the information and guidance service when they return are back home.

*To achieve this outcome, the actions set included:*

Ensure the IAG offer is accessible to a range of residents, meets the needs of most vulnerable and meets the service outcomes:

- This is joint priority area and is detailed within Ageing Well (Page 29).

Learning Disability transformation work, refining pathways:

- The Learning Disabilities pathway projects have been working in improving awareness of clients' pathway and a refined service delivery, through ensuring organisational policies and procedures reflect duties, laws and allow people to have choice and control.
- During 23/24 this has been reviewed and amended by Adult Social Care and a learning disabilities lived experience user voice group has been established.
- During 21/22, 38 individuals assessed LD supported living, which increased to 50 in 22/23 and reduced to 24 in 23/24. Those leaving the service during 2021/22 were 29, during 22/23 were 42 and 14 in 23/24.

Mental health transformation:

- The return of the Social Care Adult Mental Health Team was completed on Monday 20 November 2023, bringing the team back within the Council.
- Social Care are now able to engage with people experiencing mental health at an earlier stage, developing alignment with our health colleagues within primary MH Health services and supporting the individuals who do not meet the threshold for specialist mental health services.
- Adult Social Care now have direct access to the specialist mental health knowledge, advice and information for all social work teams, and to ensure the right support at the right time.
- The Southend Essex and Thurrock Strategies both for Mental Health and Dementia have been completed and agreed with a wider strategy implementation group in place to progress work across the areas with targeted work groups looking at a range of topics.



Therapy led projects that have a focus on prevention/wellbeing to keep people safe at home:

- Assistive Technology – a new project is underway to identify assistive technology. Several innovative initiatives are being explored to identify services and equipment to support people's needs using digital approaches.
- The Council is looking to create a self-assessment tool to allow faster access to minor equipment to keep people safe and well at home.

The focus for the coming year continues to be prevention, supported by a range of positive initiatives including Falls Prevention, "Slipper Swap" and "Able Like Mabel". We will be looking to introduce a new Digital Maturity Toolkit to help providers identify where digital and system improvements can be made.

#### **4.5 To establish an Action Plan for Autism and Neurodivergence - Co-Production & Engagement**

An initial all age Autism workshop was held including all partners during the Autumn of 2023 that identified 4 main focussed areas of concern to be considered for the Autism action plan, training, lack of services, mental health and social isolation. Separate workshops for each theme are being held during 2024. The findings of the workshops will feed into a wider discussion to develop an Autism action plan moving forward. An autism user voice group is being explored and will be set up by 30/10/24.

More widely, the LD User Voice Group is increasing in membership and feedback from the Group has impacted around services via Health (hospital admissions), Tourism & Culture, developing services on Southend Pier and wider system engagement via Shields. An Autism & Neurodiversity group and a Mental Health user voice group are also being developed during Summer / Autumn 2024.

#### **4.6 Housing – Deliver health, care and housing in a more joined up way**

We need to ensure suitable accommodation and care or support if needed is available across the city to enable people to live as independently as possible. Other care models are being explored such as Extra Care, Supported Living or Shared Lives to reduce the overuse of residential provision.

*To achieve this outcome, the actions set included:*

Review of individual accommodation without associated care:

- This is joint priority area and is detailed within Ageing Well (Page 21 and 22).

Refine and deliver commissioned Transitional Supported Housing and Housing First:

- The Transitional Supported Housing contract was reviewed and renewed following a procurement process going live in June 2022,
- A further short extension is being sought to allow a further review of the current offer across all cohorts during 2024 to ensure the provision is fit for purpose and meeting the outcomes required.

Investigate use of assistive technology:

- This is joint priority area and is detailed within Ageing Well (Page 21 and 22).
- In addition, a new Digital Relationship Manager role was created in February 2024. They have subsequently been liaising with care providers to help utilise funding available from NHS England, which aims to make the most of digital technology to enable better person-centred care.

The Strategic Commissioning team continues to work collaboratively with the housing team to evaluate upcoming properties, ensuring they align with the specific needs of individuals. Additionally, they work together to establish guiding principles for property management and home development. We will be investigating a different approach to older people's housing, with a view to testing this once a site has been identified.

#### **4.7 Community – Involved and digitally included**

Digital literacy and connectivity empower individuals to stay informed, access benefits, find employment and connect with others. However, there is currently insufficient training and equipment available, potentially leading to feelings of exclusion. It is crucial to ensure that people are well-informed, connected to opportunities and provided with necessary assistance.

*To achieve this outcome, the actions set included:*

Develop the work of Community Builders and the schemes they promote e.g. Small Sparks Fund:

- This is joint priority area and is detailed within Ageing Well (Page 24).

Digital inclusion included in Tackling Poverty strategy:

- This is joint priority area and is detailed within Ageing Well (Page 27 and 28).

Promote and raise awareness of the offer of Social Prescribers and Community Connectors based in Locality Integrated Networks:

- This is joint priority area and is detailed within Ageing Well (Page 24).

Livewell digital platform review and refresh:

- This is joint priority area and is detailed within Ageing Well (Page 29).

Monitor the Wellbeing Referral Programme (delivered by Fusion Lifestyle and Everyone Health):

- This is joint priority area and is detailed within Ageing Well (Page 23).

Increase engagement of older adults in sport and physical activity opportunities and understand wider outcomes surrounding social connection:

- This is joint priority area and is detailed within Ageing Well (Page 23).

The future focus of work will be implementing the Social Prescribing Digital Tool and continued support of Social Prescribers and Community Connectors in the council. Further work with local organisations to target specific groups such as over 50s. Understand how digital and AI could potentially support residents.

#### **4.8 Integrated Strengths-based Person-Centred Care – enable people to take control of their care and focus on their strengths**

Use a strengths-based approach to support the persons individual resilience and focus on what they can achieve. It is crucial that individuals need only share their story once. Our aim is to engage with people holistically, understanding them as unique individuals and addressing the needs of both the individual and their carer(s), enabling them to achieve outcomes that are important to them.

*To achieve this outcome, the actions set included:*

New more defined model of delivery for social care:

- This is joint priority area and is detailed within Ageing Well (Page 25 and 26).

Use of contracts and brokerage for a strength-based approach:

- New contracts for service provision have now been put in place during 2023 and 2024, such as the Supported Living contract. This Framework Agreement has been developed via co-production and has been implemented following a successful tender in late 2023. The use of strength-based and person centred approached was both an area for specific evaluation within the tender and is a key component oof the new contract management.

The future focus of work will be to continue to implement new framework agreements for other Adult Social Care services for homecare, residential and nursing which follow a similar principle as described above.

## 5. Ageing Well

This Ageing Well strategy considers the needs of people as they get older. Whilst similar strategies are typically aimed at people who are 65 and over, which has traditionally been when people have retired, many people may not regard themselves as 'old' at this age. It is for this reason that the Ageing Well Strategy does not limit its ambition to an arbitrary age but instead aims to create an environment and a community that embraces ageing and allows people of all ages to live well together in Southend.

The age range covered by the strategy includes a wide variety of needs from the active and well to those who will have significant care needs. The strategy builds on the priorities set out in the Adult Social Care Milestone Recovery Plans 2020-2022. Projects taken forward under these plans have already begun to address long-standing inequalities. It is important to recognise that this strategy was just the starting point in an ongoing conversation with people and we will continue to review this strategy based on those conversations. The Ageing Well Strategy includes a delivery plan which is updated annually and co-produced through engagement with support groups across Southend.

Priorities and action plans within this strategy focus on the priority areas of:

1. World Health Organisation (WHO) 'Age Friendly City'
2. Outdoor Spaces and Buildings
3. Transport – Transport that is age-friendly
4. Housing – Bring housing up to modern standards
5. Social Participation – connecting communities
6. Respect and social inclusion
7. Civic Participation and employment
8. Communication and information
9. Community Support and health and social care services – focus on keeping older people physically active to maintain their strength and mobility and promote positive mental health

*Priority Areas (Total 11)*

**5.1.** Links to Other Priorities and Strategies, covered above as part of 2.1 (Page 3 and Page 4)

**5.2.** Coproduction and Engagement Development, covered above as part of 2.2 (Page 3 and Page 4)

### **5.3. World Health Organisation (WHO) 'Age Friendly City'**

The World Health Organisation (WHO Age-friendly Cities network connects cities and organisations with the common vision of making their community a great place to grow old in. The focus is on local level action that fosters the full participation of older people in community life and promotes healthy and active ageing. It is the ambition that within the five-year Ageing Well strategy period, Southend will become a member of the Age Friendly Communities network.

*To achieve this outcome, the actions set included:*

To finalise consultation with residents against the WHO checklist to use as a baseline for Southend:

- Feedback has already been gained from previous resident consultation activity. Meetings have been held with Ageing Better and other Local Authorities who are already part of the Age Friendly City network (eg Kirklees and Barnsley).
- Southend City Council is currently considering a new Age Friendly internal strategy linked to The Age-friendly Employer Action Framework from The Centre for Ageing Better.

- Southend remains committed to embed the age-friendly approach and join the UK Network.

The future focus of work will be to continue to work on Southend becoming an Age Friendly city in the future by securing senior officer and cabinet approval to actively progress this ambition.

#### **5.4. Outdoor Spaces & Buildings**

The outside environment and public buildings have a major impact on the mobility, independence and quality of life of older people. Work continues to ensure that there is good design process in place for older people and future plans will incorporate their views.

*To achieve this outcome, the actions set included:*

Accessible public spaces including parks, seating and public toilets:

- Work continues with the parks in Southend with more new benches now put in place.
- There are no more spaces on the seafront to place additional seating now with existing seating regularly maintained.
- More benches will be available in the parks across the city.

This action set will be continuing into the next year, as there is still a need to establish the baseline for Southend in terms of how residents currently feel about the city's outdoor spaces and buildings. We need to liaise more with the Infrastructure and Environment teams, as well as using the new Older People User Voice Group to support our ageing community.

#### **5.5. Transport – Transport that is age-friendly.**

For individuals aged 65 and over, the primary reasons for not utilising public transport are its lack of convenience and limited coverage of desired destinations. As driving rates tend to decline with age, it becomes crucial to improve transportation options within age-friendly communities. To address this, we will work with the Infrastructure and Environmental teams on transport availability.

*To achieve this outcome, the actions set included:*

All transportation options are safe and comfortable:

- Work has continued to ensure all transportation is accessible, supported by the promotion of public transport in the city.
- Bus Shelters have had work on them to ensure they are not on grass banks and support the ageing population.
- Ensuring robust bus routes is more challenging, as that is a decision made by the private bus companies.

Awareness of concessionary fares:

- Partnership group suggestions of areas to investigate have included a transport-accessible solution for older people such as door-to-door transport services, taxi card, capital card or dial-a-ride, which are offered in other areas. There is a current dial a ride service within Southend but it is not widely known or utilised.
- A key bus route to Hamlet Court Road in Westcliff has now stopped and parking nearby has been changed to resident permits so parking is restricted in this location. This makes it more difficult to attend The Haven Community Hub which is a key

centre providing support, advice and services to older people in Southend and the surrounding communities.

Feedback has been limited from the relevant Team therefore more positive engagement will be required for Year 3 to understand this area fully and the potential options available.

Ensuring accessible parking standards:

- Accessible parking spaces have been relined at car parks and additional disabled parking bays created in the Seaway car park.
- SCC remains consistent with ensuring parking remains free for those with a valid disabled blue badge.

For the Transport team, the focus for next year will be to consider and implement accessible parking spaces for those with accessibility issues, particularly along the central seafront area. The exploration of “Park Access” a new accreditation which will enable everyone, regardless of their accessibility needs, to identify car parks and facilities when they plan their journeys. We will continue addressing these issues, to secure more information from the Transport team and to seek more resident opinion to gain the latest feedback. The relatively new Older People User Voice Group will also help to support this.

## **5.6. Housing – Bring housing up to modern standards.**

We need to move away from an over-reliance on residential and nursing care homes for older people. This will significantly reduce council commissioned care home use. The shift will continue to be towards a home first model and an ambition to increase Extra Care Housing over the coming years. This will be realised by an increased investment in reablement and short-term care, a significant increase in care at home and a programme of cultural and practice changes to be embedded into Adult Social Care operations. With the new aspirations of homecare covered and supplied by the upcoming Homecare Framework Agreement it is anticipated that the coming year will support more people at home.

*To achieve this outcome, the actions set included:*

Using feedback from the Older Person’s Needs Assessment and the WHO Survey to understand the needs in Southend and develop priorities:

- A notice of motion was raised last year by Councillors around the use of sheltered accommodation. SCC has been working jointly with South Essex Homes to respond to members and consider options for better use of sheltered accommodation and managing it with emerging need.
- Engagement with adult social care and commissioning on accommodation for older people, especially older people who are homeless and facing hospital discharge or need step down from a high support bed.

The focus for the next year will include the embedding of the Supported Housing Act 2023 – by 2025, including a Supported Housing strategy which a number of Council departments will need to work together on. We will also continue to move forward on potential sites through our housing pipeline where it is felt a 'later life' living type development could work.

Review of individual accommodation without associated care:

- We are in a much clearer position on understanding the changing needs/wants of older people and how housing stock may need to reflect this. This has been backed by data analysis and shared understanding from many partners.
- Pipeline developments and developments outside of the Council are progressing. Consideration of later life living/older people’s housing and how we may want to

already adapt what we have, is a running agenda item within many different projects. This includes the Stock Optimisation Group, a workstream that reviews all of our Council stock; temporary accommodation, sheltered and general needs housing, to look at how we make best use of it.

- The development of housing to meet changing needs is by nature a long-term programme. Therefore, it is difficult to realise significant achievements each year. Furthermore, a proportion of this work forms part of wider development/pipeline activity with many competing priorities.

Undertake further engagement to understand the wider population in Southend, including homeowners:

For the coming year, a key aim for Year 3 will be to produce a proposal for a site offering a different approach to older people's housing, even if just an example. This will help us to understand what possible and what costs and commitments may be required.

Investigate the use of Assistive Technology:

- The Assistive Technology paper was completed, and recommendations made at a Senior level.
- The review found that SCC underutilises certain types of Assistive Technology and its Disabled Facilities Grant.
- Commissioning options and opportunities for use in social care are now being considered by the Director of Commissioning. This will likely be seen as a new workstream and there will be specific outcomes to match.
- A new Digital Relationship Manager role was created in February 2024. They have subsequently been liaising with care providers to help utilise funding available from NHS England, which aims to make the most of digital technology to enable better person-centred care.
- The grant has allowed 80% of care providers to adopt a Digital Social Care Record system of their choice from an approved supplier list. These new systems capture real time information and have allowed providers to move away from paper-based care planning.
- Further funding will be made available for sensors and remote monitoring technology to alert care providers to falls. This allows for care to be transformed thanks to digital innovation by using technology to monitor a person to support their social care needs.

The future focus of work will include understanding of SCC's digital maturity, working in line with 'what good looks like'. The Digital Relationship Manager will be launching an online Survey for care providers to self-assess their own digital maturity level. This will generate a score which will allow us to work closer with those providers who need more support with digital innovation. The rating generated will also provide links to help the provider better themselves.

## **5.7 Social Participation – Connecting communities.**

People over 50 who volunteer or actively participate in their community tend to be happier as a result. Interacting with people is essential to help prevent loneliness. Circa 10,000 older people living alone at home in Southend will be supported to connect with well-established Southend social networks.

This will be via referrals from their GP or other contacts to 'Community Connectors' – people living in the Borough who volunteer to help through their local knowledge and networking skills.

*To achieve this outcome, the actions set included:*

Review the leisure activities and clubs available for older people:

- Between April 2023 and March 2024, 541 people completed the wellbeing referral programme. This number was well below the annual target of 2,250 course completions. However, it should be noted that the target was established without a benchmarked baseline for this type of service activity.
- Embedding the Programme has taken some time, including establishing referral mechanisms and engaging with the necessary partners.
- Referrals were lower initially and due to delays in mobilisation, there was a waiting list for courses through Fusion which was subsequently reduced later in the year.
- Whilst the number of people completing the Programme was short of the annual target, the benefits realised are:
  - The system is now embedded, meaning that partnerships are established for referrals.
  - There is a good relationship between Fusion Lifestyle and Everyone Health.
  - Triaging takes place more efficiently, waiting times for courses are minimal and course delivery is of a high standard.
  - The Programme is still operational, and this is likely to remain the case.
- A suitable business model will be available to ensure that this Programme continues at a reduced rate to participants.

The future focus of work will be for Programme provider Fusion Lifestyle to further promote the course (individuals and groups). The aim is to increase new participation and to contact those that have dropped out of the programme to support their return.

Ensuring participation in social activities helps to prevent social isolation:

- “In Conversations With” – neighbourhood meetings continue to take place across Southend, Rochford and Castle Point. With support from the Southeast Essex Alliance, groups have been visited to hear the voice from the community and share news and views.
- Several user groups have been set-up over the last year which will ensure that information on specific services and activities are shared with residents.

Consider additional funding to be able to develop a ‘gold standard’ volunteer hub:

- SAVS has been awarded a Shared Prosperity Grant (notified in February 2024) so this task will be carried over and achieved in 2024 / 2025. This will lead to the employment of a dedicated Volunteer Hub Co-ordinator, who will be able to increase the volunteering hubs’ capacity to attract more opportunities and match more volunteers.

For the coming year, a Volunteer Passport will also be developed with support from the new Co-ordinator to allow volunteers to demonstrate their experience and training. This will allow them to move easily between volunteer placements.

Develop the work of the Community Builders and the schemes they promote – e.g. the Small Sparks Fund:

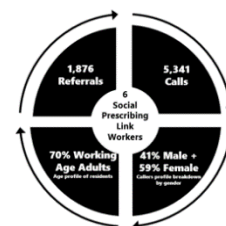
- The Community Builders are in place until June 2024 and we are looking to have their funding extended, along with allocating some more funding for the Small Sparks Fund.
- The Small Sparks Fund provided grants of up to £100 to residents, businesses and community groups who wanted to make positive change within their communities. A total of £3,300 was available in the Southend areas of Milton, Shoebury and Victoria. The fund has helped to support 64 community projects.
- Some examples of the projects the fund has helped to support are:



- The Hungry Cupboard, a programme to highlight and reduce the stigma of food poverty. The Hungry Cupboard was designed and made using 3d printing and this was supported by a book which follows a story for children to understand.
- The Renew and Wellbeing Café, a wellbeing Café at Shoeburyness and Thorpe Bay Baptist Church. The funding enabled them to purchase craft supplies for wellbeing activities.
- The fund also enabled Yoga4Recovery to run free yoga classes and purchase yoga mats they could provide to residents for free.
- The EAL Homework Club by Welcome to the UK. An ongoing project offering a weekly 1-hour session where children aged 6-15 come into the hub and receive help with their homework. Volunteers from South Essex University tutor children in Maths and English. They have used the fund to purchase stationery, as well as workbooks suitable for students they currently support. Each week, they are supporting between 4 and 8 children with their homework.

Promote the offer of Social Prescribers and Community Connectors based in Locality Integrated Networks:

- During 2023/24, social prescribing has been an integral resident offer in General Practice through dedicated Social Prescribing Link Worker roles.
- Eight social prescribing link workers have supported general practice in four Primary Care Networks (PCNs).
- Resident outcomes for social prescribing for three PCNs have been reported by SAVS in quarterly reports and biannual long reports. The full year data (2023/2024 annual report) is currently being collated and will be published in Spring 2024. Data from the PCN that host their own social prescribing link workers is under review and development for reporting from spring 2024.
- Presented right is the SAVS social prescribing link worker data for the period April 2023 to December 2023:
- The Public Health Team working in partnership with Council IT Business Support; the Digital Tool Supplier; Social Prescribing Link Workers; SAVS; Everyone Health Lifestyle Service; and wider partners has developed a social prescribing digital tool. From April 2024 this has been running in test phase.
- The Southeast Essex Alliance has drafted a new social prescribing delivery plan.
- The Mid and South Essex Integrated Care System took a systems-led approach to social prescribing.
- The Social Prescribing Maturity Matrix (a quality improvement tool to support leaders at System, Place and Neighbourhood levels to work together strategically to embed social prescribing and enable it to be as effective as possible) has been reviewed and completed.



The key objectives for the coming year will be for the Social Prescribing Digital Tool to be 'live' and in operational use by all Social Prescribing Link Workers based in the four Primary Care Networks. This Tool will also be an integral embedded offer within the Livewell Southend digital platform. Data will be collated and presented for all four Primary Care Networks through one new streamlined process.

Increase engagement of older adults in sport and physical activity opportunities and understand wider outcomes surrounding social connection:

- The Wellbeing Service provided by Everyone Health has had an increase in people aged 65+ accessing the service since last year.
- The number of adults aged 65+ engaging with a physical activity offer via the Wellbeing Service increased from 101 in 2022-23 to 239 in 2023-24. The programmes and locations are varied through the community, increasing community accessibility.

- The wellbeing service also runs a Falls Prevention programme, which consists of a 36-week strength and balance course. One measure of success is the 'CONFbal' scale, which is used to assess balance confidence in an individual. Percentage of service users with an improved reading on Confbal test increased from 77% in 2022-23 to 81.54% in 2023-24. The service has received positive feedback from individuals about how they are moving better and have improved circulation, feel more confident to live their everyday lives.

The focus for Year 3 will be to increase on the baseline the number of individuals aged 65+ engaging with a physical activity and further increase the percentage of individuals with an improved reading on the CONFbal scale. This ties in with wider ambitions to get people more active at an earlier age. The council is also looking to increase the funding for falls prevention with an aim for extra sessions to be delivered within Care home and sheltered housing settings.

## 5.7. Respect & Social Inclusion

The World Health Organisation defines respect and social inclusion as 'enhancing the opportunities for people of all ages to (i) cultivate social relationships, (ii) have access to resources and support, (iii) feel valued and respected and (iv) feel part of their community'. Our continued priority will be to promote intergenerational understanding and respect through positive messages about the value of older people in Southend and their community contribution. Also, by increasing the opportunity for older and younger people to work together in the City including reviewing SCC's own internal policies.

*To achieve this outcome, the actions set included:*

Embed the strengths-based approach through the 3-conversation model and social care intervention rollout via Innovation Hubs:

- The 3-conversation model is no longer in use and has been replaced by a new delivery and approach under the new "Connected Southend" model.
- The Councils 'Adults and Communities' directorate continues to work together across Adult Social Care, Commissioning, Culture/Tourism/Leisure and Heritage to embed the Connected Southend Approach.
- This is a whole service approach to community practice, personalised enablement, new models of commissioning and social care support across the city.
- Connected Southend was actively launched to SCC staff at the beginning of 2024 and roll out will continue across the next two years.
- Bringing together practitioners, commissioners and providers, as well as our wider culture, arts and leisure services, we aim to change the way we support and enable people to live the lives they choose to live.
- Connected Southend is underpinned by the core concepts of the Care Act, ensuring community opportunities, citizenship and personalised outcomes and is now core to Southend's Social Services plans for the future.
- The model itself sets out standards, principles and approaches for staff delivering services. It places more emphasis on prevention and enablement, and supporting people to live the life they want. It can be applied to every area of work in adult social care – from frontline social work to the systems we develop, our leadership and commissioning to our library staff, our care providers to the way in which we support our neighbourhoods and work alongside communities. This systemic approach will be underpinned by a culture change and a learning and development programme to ensure sustainability, action and real change for the better.
- Key principles include:

- A model at the heart of every commissioning stage, from strategic planning designing pathways, procurement, contract management and monitoring.
- Working together with people, care providers, social care workers and partners to agree and deliver good outcomes for people and communities.
- Understanding what is available locally and empower communities to make the most of their local assets.
- Giving people a choice by developing and stimulating all sectors of the market to make the most of resources available.
- Being risk-positive and trying new things – co-producing services with people that use them.
- To support practice, SCC has invested in and launched the new Practice Governance and Information Service, to support quality assurance in social work and occupational therapy practice.
- SCC has also launched and continues to develop a range of new Connected Southend practice guidance documents and governance approaches, focusing on several areas, for example:
  - Redesign of Adult Social Care (Operations and Commissioning Services) to align with the Council's three core strategies and to aid the rollout of Connected Southend with further work ongoing to maximise the experience of people upon first approach to the Council.
  - The launch of the new Practice Governance Board & Ethics Panel.
  - Launch of the Strategic Workforce Development Board to oversee the development and refinement of our Connected Southend Internal Workforce Plan and the development of an external provider workforce development plan.
  - Development and launch of a range of Connected Southend practice guides:
    - Working Positively with Risk Enablement (Risk Assessments)
    - Concerns for Welfare process.
    - Transport Policy.
    - Accessible Information Standards.
  - Adoption and rollout of the pan-Essex PSW Network Anti-Racist Practice Standards across Adults and Children's Social Care
  - Overhaul of our Transition pathway, supporting young people and their carers, as they move from childhood to adulthood.
  - Development and launch of new Carers' Offer in partnership with Carers First

The future focus will be to continue the plans for rollout and embedding this service model. This will include a Connected Southend Festival of Practice in November 2024 for internal staff and partners. The revitalisation of all assessment and care provision documentation on the Liquid Logic client database to align approach with the Connected Southend ethos and to maximise practitioner time with people. Working between Operations and Commissioning to ensure synergies in terms of intelligence leading to robust market shaping. Overhauling the Livewell site as the Council's website for information, advice, guidance and intervention to support the best experience for people and to support self-determination. The implementation of portals for people, carers and families who wish to self-refer and to support professionals referring into the Council.

## **5.8. Civic Participation & Employment**

Good quality volunteering in later life has a measurable positive impact on mental health and paid work can have a positive impact on wellbeing, as well as finances. The opportunities for this diminish with age: 72.3% of people aged 50-64 are in work, compared to 85% of people aged 25-49. We continue to work with the existing VCSE sector, such as Southend Association of Voluntary Services (SAVS) and Volunteering Matters, to coordinate a volunteering bureau and expand the range of opportunities for older people to get involved in volunteering.

*To achieve this outcome, the actions set included:*

Review current contracts and subsequent activities (to expand the range of opportunities for older people to get involved in volunteering or paid work):

- SCC's Economic Development team has a number of activities that link to this task area:
  - "Halo" – a Training Support Programme funded by the NHS with different cohorts. Aim to place people into care roles to work for a local care provider/NHS. SCC works with Job Centre Plus and the Southend Adult Community College to offer this. Signing up provides an "Introduction to Health and Social Care" online programme which lasts 5 weeks.
  - A Better Start Southend Work Skills – assists parents by delivering courses and events based on gaps in sectors and workforce, including understanding parents' needs/wants. This also links to Livewell.
  - "Multiply". Fully funded events and classes for ages 19+ aimed at all persons who do not hold a GCSE A-C in Maths. For employers and individuals. In Year 2 of a 3 Year Programme. Funded directly from Government and largely delivered by the Adult Community College.
- This task area also directly links to the Volunteering Hub model (see Page 23).

The focus for next year will be to link with the new Volunteer Hub Co-ordinator, who will be looking to increase the Volunteering Hub's capacity to attract more opportunities and match more volunteers. Wider funding opportunities still also need to be considered to expand the Volunteer Hub model.

## **5.9. Communication & Information**

While most information is now shared online, digital exclusion is a reality for many people. Less than half of those aged 75+ use the internet regularly, and out of the four million people who have never used the internet in the UK, 3.7 million of those are over the age of 55. Southend has a diverse range of Information, Advice and Guidance (IAG) services targeting older people in Southend. A streamlined IAG service offer has targeted those most at need and the Livewell Southend digital platform has been extensively reviewed and enhanced.

*To achieve this outcome, the actions set included:*

Digital Investigation as to what is on offer in the local areas to aid people learning to use "online":

- Our new Tackling Poverty Manager has worked closely with SAVS, Essex County Council and other community partners to map the current digital inclusion provision available in the City.
- A draft digital map on One Southend has been created to detail the digital inclusion provision. Local organisations can indicate the digital support they offer and update any details via an online submission form on the webpage. This ensures the information stays up to date.

Digital inclusion included in Tackling Poverty strategy:

- A list of funding opportunities to improve the universal digital offer in Southend has been shared with all community partners involved in the Tackling Poverty Forum. This includes The Community Organisations Cost of Living Fund, Hubbub and Virgin Media O2 Tech Circular Economy Funding, HMRC Funding for VCS organisations and the Public Health Accelerator Bids (PHAB).

- Relevant data is also now collected from the South Essex Community Hub who provide digital learning support through their Learn My Way sessions and Digital Support sessions.

In Year 3, our priority is to ensure that residents have clear access to support for enhancing their digital skills and knowledge, enabling them to navigate the online world effectively. To achieve this, we will undertake the following:

- Online Map of Digital Support: We will publish an online map detailing digital support services available through One Southend.
- Community Partners: We will ensure that all local community partners receive a comprehensive list of local digital support resources in paper format. This will enable them to guide residents toward relevant assistance, including services provided by our libraries.
- Expanded Support: Our goal is to increase the availability of digital support options for residents across the city.

Ensure that the IAG offer is accessible to a range of residents, meets the needs of those most vulnerable and meets the service outcomes:

- SCC's improved IAG offer provides outreach hubs across the city to deliver a holistic offer to support people to live independently.
- There has been a significant increase in clients seen and an increase in those who report having their primary need met.
- The Information Advice and Guidance (IAG) service delivered by Citizens Advice Southend supported 20,450 clients in 2023-24, which is a significant increase on 13,884 clients seen in 2022-23. The number of cases and issues increased proportionately with the number of clients seen.
- The service has maximised peoples' income, supporting clients to access a total of £8,342,626 in 2023-24 across various streams, including Personal Independence Payment, Pension Credits, Attendance Allowance, Relief Funds and more. This is an increase on £3,586,664 income accrued by the service for residents in 2022-23.
- The IAG service supported residents to access £213,954 in Warm Home Discounts in 2023-24 and increase on £19,375 in 2022-23.
- The IAG service supported residents to receive £778,661 in Universal Credit and other benefits.
- During 2023-24, on average, 75% of people using the service reported having their primary need met by the service, and 81.5% reported high levels of satisfaction with the service. 84 people received a home visit. 2,081 people were engaged at community events and 8,700 people were engaged via the website.

For Year 3, we would like to review our IAG offer to identify any further commissioning opportunities to improve this service for residents. We would also like to see an increase in the percentage of people reporting primary needs met and reporting high satisfaction, as well as the income maximised for residents.

Ensure the Livewell digital platform is reviewed and up to date:

- The new Livewell digital platform was launched in June 2023. All local service directories were reviewed and updated using an improved user-friendly format, making it easier for the residents and professionals to search for information and advice on various health and wellbeing topics and local services. There have been 47,125 individuals who have visited the Livewell website between June 2023 and the end of March 2024. Positive feedback has also been received by a SEND parent support group.
- New features have been embedded, such as the events function which has strengthened public engagement and support across all ages. Examples include

various well attended local events such as the Youth Mental Health week and the Measles Vaccination Clinic during February 2024.

- A monthly Livewell Newsletter shares valuable information with the subscribers while keeping them informed on what is happening locally. There are currently 4,310 people who are signed up to receive this communication (as at year end March 2024).
- The Livewell platform remains one of the main communication channels for Public Health messages, as well as its social media account. During the year 2023/24, 32 campaigns took place which focused on Mental Health & Wellbeing, Healthy Weight & Physical Activity, Harm Reduction & Disease Prevention as well as LGBT, Women's & Men's Health.
- Information pages are continuously audited for quality purposes and future enhancements. The Livewell digital platform meets accessibility requirements, which was also validated by a random audit in March 2024 undertaken by the Government Digital Service.

For 2023 to 2024, the focus of work will be to continue working on further enhancements to the Livewell digital platform and to introduce a new digital social prescribing tool. To improve and sustain the quality of the directory content by actively seeking to gain public and professionals' feedback. To continue promoting Public Health events and campaigns through the Livewell platform and related social media accounts. To continue improving links to the Livewell offer across all services in Southend.

#### **5.10. Community Support & Health and Social Care Services**

Increased investment in falls prevention will lead to longer-term savings and promote better outcomes for older people. Existing physical activity programmes should continue to target the more deprived areas in Southend and communities with poorer health outcomes and the existing frailty pathway should be further developed. A stronger assessment / early identification of people likely to fall is continuing with a review of the current offer, placing a stronger emphasis on preventing falls, rather than just the fall recovery.

*To achieve this outcome, the actions set included:*

Improved information and promotion of: Falls Prevention, Physical Activity and Make Every Contact Count (MECC):

- In the last year, the Wellbeing Service attended more community events – 6,974 residents were engaged with at face-to-face events in 2023-24, a significant increase on 3,665 in 2022-23. The total number of people engaged in person through referrals and events in 2023-24 was 10,660, an increase from 6,312 in 2022-23. The number of engagements via the Everyone Health wellbeing service website and social media channels increased to 25,614 from 17,608 last year.

Reshape of the homecare style services into supporting independence services:

- Work is well underway to review and implement a new Homecare Framework Agreement with a target tender live date of from October 2024.

Redesign of the short-term assessment and reablement pathways and support models:

- A redesign of the short-term assessments and reablement model is currently underway between SCC and partners – the Mid & South Essex Integrated Care Board (ICB) and the Mid & South Essex NHS Foundation Trust (MSEFT).
- A 3-month pilot is now in place for the Southend Enhanced Discharge Service (SEDS) which involves Southend Care Limited acting as a third-party provider.
- Further work is in progress for long-term care as part of our Care at Home Aspirations and new Homecare Framework.

The focus for next year is to implement the homecare provider framework and to ensure short-term assessments along with reablement pathways have a clear flow for patients to remain independent in their own homes. We will continue to use feedback from engagement with homecare providers to help reshape the service to support independence.

## 6. The Year Ahead

Throughout the second year of these strategies, it has been recognised how far the local system has moved and changed since their implementation, therefore in May 2024 a decision was made at adults and communities DMT to move forward with a review/refresh of all 3 current Strategies, Ageing Well, Living Well and Caring Well.

This will allow us to align them to current organisational changes, evolving priorities and wider change in the political climate. We are currently in a position where we are scoping the required activities and building a project plan which interacts along with the Year 3 action plans.

Action Plans are detailed work plans that shape and guide the most important part of the Strategic Commissioning process.

The overall focus for Year 3 will be to:

- Maintain existing Caring Well / Living Well / Aging Well partnership groups to further develop and manage each of the Action Plans, ensuring Health, Social Care, Providers and people with lived experience are accurately represented.
- Review the strategy documents based upon local changes and updated good practice.
- Work to regularly review where we are now against the established baseline, to allow us to monitor progress on where we want to get to by 2027.
- Use a standardised process for ongoing engagement and co-production and continue to build on these open discussions.
- Ensure that co-production is at the heart of what we do – “Nothing about me, without me” was a powerful statement used at one of our User Group Forums by a resident with Autism and Neurodivergence.
- Continue to provide Annual Reports demonstrating the progress of the Action Plans for Caring Well / Living Well / Ageing Well in Southend and the future focus of work.



Note: All information has been provided by stakeholder partners and is not audited by the Strategic Commissioning Team.

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**Meeting:** Health and Wellbeing Board  
**Date:** December 2024  
**Classification:** Part 1 / Part 2 (Confidential)  
**Key Decision:** No  
**Title of Report:** FOR INFORMATION ONLY: 2024/25 Better Care Fund  
 Quarter 2 Submission

**Executive Director:** Mark Harvey  
**Report Author:** Nicola Mickleburgh  
**Executive Councillor:** Councillor Maxine Sadza

## 1. Executive Summary

- 1.1. This report provides an overview of the Better Care Fund and details of the 2024/25 Quarter 2 submission.
- 1.2. The Section 75 document has been signed by both Southend-on-Sea City Council and NHS Integrated Care Board which was a requirement of the submission.

## 2. Recommendations

### It is recommended that Cabinet:

- 2.1. For information only.

## 3. Background

- 3.1. The Better Care Fund (BCF) programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.
- 3.2. An expenditure plan, confirms the financial overview for Southend-on-Sea in respect of the period 2023 – 2025:

| Funding Sources                   | Income Yr 1        | Income Yr 2        | Expenditure Yr 1   | Expenditure Yr 2   |
|-----------------------------------|--------------------|--------------------|--------------------|--------------------|
| DFG                               | £1,721,065         | £1,721,065         | £1,721,065         | £1,721,065         |
| Minimum NHS Contribution          | £15,977,498        | £16,881,824        | £15,977,498        | £16,881,824        |
| iBCF                              | £7,797,498         | £7,797,498         | £7,797,498         | £7,797,498         |
| Additional LA Contribution        | £368,848           | £0                 | £368,848           | £0                 |
| Additional ICB Contribution       | £0                 | £0                 | £0                 | £0                 |
| Local Authority Discharge Funding | £1,093,197         | £1,821,922         | £1,093,197         | £1,821,922         |
| ICB Discharge Funding             | £1,198,780         | £1,666,320         | £1,198,780         | £1,666,320         |
| <b>Total</b>                      | <b>£28,156,886</b> | <b>£29,888,629</b> | <b>£28,156,886</b> | <b>£29,888,629</b> |

#### **4. Reasons for Decisions**

- 4.1. The Health and Wellbeing Board are asked to note that the Better Care Fund Quarter 2 Submission for 2024/25 has been completed and submitted within the respective timescales.
- 4.2. The chair of the Health and Wellbeing Board is required to sign off the Better Care Fund Quarter 2 template ahead of the submission, which was undertaken.

#### **5. Other Options**

- 5.1. N/A

#### **6. Financial Implications**

- 6.1. There are no direct financial implications arising from this report.
- 6.2. The Better Care Fund is overseen by the Better Care Fund Management Board. This is co-chaired by the Director of Commissioning at Southend-on-Sea City Council and the Deputy Alliance Director at South East Essex Alliance. Both organisations have appropriate financial representatives and oversee the spend of the budget through this board.
- 6.3. Any financial implications arising should be considered and agreed as necessary by the Council and/or the Integrated Care Board (ICB).

#### **7. Legal Implications**

- 7.1. The Care Act 2014 amended the NHS Act 2006 to provide the legislative basis for the Better Care Fund. It allows for the mandate to NHS England to include specific requirements to the establishment and use of an integration fund.
- 7.2. The NHS Act 2006 allows named partners (NHS bodies and local social services authorities) to contribute to a common fund (pooling resources), which can be used to commission health and social care related services. This power allows a local authority to commission health services and NHS commissioners to commission social care services. It enables joint commissioning and commissioning of integrated services.
- 7.3. The Better Care Fund is a National Programme which requires local authorities and Integrated Care Boards (ICBs), to pool budgets through a section 75 agreement.

#### **8. Policy Context**

- 8.1 Every year, the Department for Health and Social Care publish a BCF Policy and Planning Requirements. These set out the conditions and framework under which BCF plans must be created, delivered, and include mandatory BCF plan templates and a timetable for submission. As in previous years,

the BCF policy set out two overarching objectives to be delivered through BCF plans:

- enabling people to stay well, safe, and independent at home for longer.
- providing the right care, at the right place, at the right time.

8.2 The BCF Policy also set out two key priorities that align with the overarching objectives:

- Improving overall quality of life for people, and reducing pressure on Urgent and Emergency Care, acute and social care services through investing in preventative services
- Tackling delayed discharge and bringing about sustained improvements in discharge outcomes and wider system flow

## **9. Carbon Impact**

9.1. N/A

## **10. Equalities**

10.1 The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

10.2 An Equalities Impact Assessment is not required in relation to this report.

## **11. Consultation**

11.1. N/A

## **12. Appendices**

12.1. **Appendix 1:**

[BCF Q2 Report - DMT October.docx](#)

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## Appendix 1: Better Care Fund Quarter 2 Submission 2023-24

### 1. Purpose of Report

The purpose of this report is to Update DMT on the Better Care Fund Quarter 2 submission for 2023-24

### 2. Decision(s) Required

For Note

### 3. Summary

This report provides an overview of the Better Care Fund and details of the Quarter 2 submission.

The Section 75 document must be signed by both Southend-on-Sea City Council and NHS Integrated Care Board, with the Better Care Fund Quarter 2 template asking for confirmation that this has been actioned.

Falls Metric is above target, and we anticipate the figure will continue to rise during the winter months.

### 4. Background

The Better Care Fund (BCF) programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.

An expenditure plan, confirms the financial overview for Southend-on-Sea in respect of the period 2023 – 2025:

| Funding Sources                   | Income Yr 1        | Income Yr 2        | Expenditure Yr 1   | Expenditure Yr 2   |
|-----------------------------------|--------------------|--------------------|--------------------|--------------------|
| DFG                               | £1,721,065         | £1,721,065         | £1,721,065         | £1,721,065         |
| Minimum NHS Contribution          | £15,977,498        | £16,881,824        | £15,977,498        | £16,881,824        |
| iBCF                              | £7,797,498         | £7,797,498         | £7,797,498         | £7,797,498         |
| Additional LA Contribution        | £368,848           | £0                 | £368,848           | £0                 |
| Additional ICB Contribution       | £0                 | £0                 | £0                 | £0                 |
| Local Authority Discharge Funding | £1,093,197         | £1,821,922         | £1,093,197         | £1,821,922         |
| ICB Discharge Funding             | £1,198,780         | £1,666,320         | £1,198,780         | £1,666,320         |
| <b>Total</b>                      | <b>£28,156,886</b> | <b>£29,888,629</b> | <b>£28,156,886</b> | <b>£29,888,629</b> |

### 5. Quarter 2 Performance

The submission date for the Better Care Fund Quarter 2 template is on 31<sup>st</sup> October 2023

The Better Care Fund Quarter 2 submission focuses on Metrics and Capacity & Demand which includes Guidance and Assumptions, Hospital Discharge and Community. The Quarter 2 submission does not focus on any finance or expenditure of the fund.

The Better Care Fund submission for quarter 2 (2023-24) will be submitted to the Better Care Fund Team on 31st October 2023. The submission request relates to Metrics along with Capacity and Demand. The latest performance is as follows:

### Metrics

This section requires information on any challenges faced in meeting the planned target, highlighting any support that may facilitate or ease achievements of metric plans. The section also requires any achievements, impact observed, or lessons learnt to be considered when improvements being pursued for the respective metrics.

There are five metrics to report on, confirming the progress against the metric plan for the reporting period:

| Metric   | Target | Q1    | Q2    | Comments  |
|--|--------|-------|-------|---|
| Avoidable Admissions   | 243.3  | 253   | 253   | Ongoing rollout of Urgent Care Response Team and working with the ambulance service on the stack.   |
| Discharge to normal place of residence   | 95.47% | 94.9% | 94.9% | SEDs and development of transfer of care hubs at locality. This is in early stages and building on the good work of the adult discharge teams.  |
| Falls  | 2,100  | 627.9 |       | We anticipate the figure will continue to rise during the winter months. There are a number of initiatives being undertaken for this metrics. This includes Slipper Swap and some providers using Raizer Chairs.  |
| Residential Admissions   | 549    | 549   |       | The aim of this measure is to minimise, and this quarter's figures are below target. SEDs contributes significantly for this as it helps people stay at home along with reablement offer. Brook Meadows assessment beds, which relates to care in a bedded setting. |
| Reablement<br>(Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / | 80%    | 74.5% | 78.6% | The aim of this metrics is to maximise. However, the latest quarter figures are below target by 2.4%. SEDs contributes significantly for this as it helps people stay at home along with reablement offer.  |

|                           |  |  |  |  |
|---------------------------|--|--|--|--|
| rehabilitation services). |  |  |  |  |
|---------------------------|--|--|--|--|

**Capacity and Demand – Guidance and Assumptions**

An update has been provided for a set of specific narrative questions. These questions are in relation to both hospital discharge and community sections. The response given, provides an update on refining the small winter planning in respect of capacity and demand for admissions avoidance and hospital.

**Capacity and Demand – Hospital Discharge**

Data submitted in June 2023 reflects the previous year's information regarding capacity and demand. The Quarter 2 template is prepopulated based on the submission in June 2023.

As baseline data has not been collected in the previous year, Southend-on-Sea faces challenges with estimating capacity and demand. Therefore, an increase of 10% has been applied for November 2023 and March 2024 and a 20% increase for December 2023, January 2024, and February 2024.

**Capacity and Demand – Community**

Data submitted in June 2023 reflects the previous year's information regarding capacity and demand. The Quarter 2 template is prepopulated based on the submission in June 2023.

As baseline data has not been collected in the previous year, Southend-on-Sea faces challenges with estimating capacity and demand. Therefore, an increase of 10% has been applied for November 2023 and March 2024 and a 20% increase for December 2023, January 2024, and February 2024.

**6. Conclusion**

DMT are asked to note that the Better Care Fund Quarter 2 submission has been completed and submitted within the respective timescales.

This report will be submitted for the next Health and Wellbeing Board to provide them with the information. This report will be retrospective due to the schedule of meetings.

The chair of the Health and Wellbeing Board is required to sign off the Better Care Fund Quarter 2 template ahead of the submission date.

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