Priority 3: Commissioning & Services - Draft deliverables and milestones

Lead: Garry Joyce

Key Blue Complete/BAU Green On Track Amber Delay/Issues Red Significant challenge

#	Action / Deliverable	Owner	Milestones	Progress Update
1.0	**Jointly review our SEND provision to understand demand, identify gaps and plan for future provision across education, health and care.** (Lead) Outcome & Impact Clear understanding of future needs of Suffolk children, young people and families and planning to ensure provision to meet these needs and achieve better outcomes Measures of Success			
1.1	Informing the Sufficiency Plan - Education Informing the Sufficiency Plan - Social Care Informing the Sufficiency Plan - Health	Gemma Morgan Francesca Alexander Codrutz Oros-Marsh Seb Smith Garry Joyce Graham Beamish Tracy Curtis?	Late Spring 2022 – Draft Sufficiency Strategy to Governance Boards	Work on Health inputs has been suspended due to C-19 pressures. Sufficiency Planning will need to pragmatically progress without this **Oct-21** Actions from SEND Independent Action plan to inform the Sufficiency Plan. **Oct-21** - Health data to inform SEND Sufficiency will be collated and inform the sufficiency data likely to be available January 2022. Pre-discussions with Inclusion Services and Social Care to inform this. Including the profile of need, so all on same page. Jan-22 – Discussed progression of sufficiency plan. ACTION – SPCF to have access to Sharepoint (WA to speak to BB) Jan-22 – Progression to coordination of Suffolk Sufficiency planning meeting with key stakeholders Feb 22 – Health anticipate being able to complete their part of this in the next few months. **Jun-22 – ACTION JM to send an email to understand how Social Care, Health &**

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				Education are involved and parent/carers. **WA Note – LC comments regarding attendance add to email to SRO.** **Jul-22 – Plans are underway, data is being analysed, core group are meeting with colleagues across SPCF, SENDIASS and linkin gin with Health & Social Care. Report expected to be available Sept-22.**
1.2	Establish a process (within current governance structures) to continue to review gaps in need informed by feedback from young people, families, SPCF, SENDIASS, Services (I.e. live response to issues raised)	SEND Walter McCulloch Garry Joyce	Milestones to be set with new parent/carer forum pending date	**Oct-21** I statements and feedback via the You said, We did. **Oct-21** Health have requested Healthwatch survey to be extended to families as well as schools – use feedback to inform you said. We did as appropriate. **(WA Look at date/timeline)** **Nov-21** Interim arrangement due to be in place on a lower level of co-production whilst new partner is modelled. Health also looking to re start work Voice group. Co-production has continued as we work with different stakeholders to access the young persons and family's voice. Jan-22 – Initial meeting with chair of SPCF & Walter to progress, and a meeting due to CCG's today (13/01/22) ACTION – Nia to discuss Toni regarding the restarting the Board meeting or to use another meeting within the PL meeting – Further discussion to be had. Feb 22 – discussions ongoing. Phase transfer process has taken priority in last month but commitment to improve processes remains. **Jun-22 – ACTION JM raise in email as per 1.1 and KS to discuss with SPCF at Monthly June-22.**

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				Jul-22 – WA to follow up
2.0	**Increase the number of specialist education places available within Suffolk by completing the delivery of the current Suffolk SEND Capital Programme 2020-2024** (Lead Gemma Morgan) <u>Outcome & Impact</u> Delivery of the SEND Capital Programme that provides the sufficiency of places that meet needs in the right place in Suffolk <u>Measures of Success</u> 870 places by 2024 Statutory timescale for placement allocation times are met for both families and services			
2.1	Deliver the current SEND Capital Programme Plan to increase the number of specialist education places	Gemma Morgan	2020-24	**Oct-21** - LG – Castle EAST is now open and all children are attending. A further 2 units have been completed and now open for their children, the remaining are on their way to completion and no additional delays identified. Question – Can we assure that all places are utilised correctly? LG – this will link in with the Phase 1 review which is mentioned below. C&I Ipswich – Delayed until January 2023 currently working with DfE to put into a contingency plan. All units attached to mainstream schools due in open in Sept 21 will open within the 2021/22 academic year and those that are subject to delay have contingency plans in place. This will not affect any SEP that has been agreed for Sept-21. 2 units (Reception/KS1 Oulton Broad, Reception/KS1 unit at St Ed's Bury St Edmunds) delayed due to site and material issues; demand is assessed at low at the point of agreement to delay. CYP that would have accessed will have provision elsewhere. Delays would have resulted in an Easter opening needing CYP to move twice in one academic year. This is not felt

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				in their best interest. This will not affect any SEP agreed for Sept-21. 13 Units, 3 completed and up and running. Due to view. Delays in gaining building materials have impacted – interim measures are in place for those children that have a place at a new unit. C&I Bungay – October 21 half term. Interim measure is in place. Review of phased 1 of capital programme, locations, referrals – this will be used to identify the demand and influence phase 2. Update from review to be shared with P3 in Spring 22. Risks still remain in the Health provision being available due to the challenges. JAN-22 – Ascertain a process to capture Capital progress ACTION – CF & LG to catch up Feb 22 update (CF) – copy agreed, being published on website this week and in newsletter next week. Regular six monthly update? Feb 22 – update received from LG; will be published next week but Phase 1 progressing well and on track to complete. **Jun-22 – ACTION LG to provide comms for SPCF to share update for Capital phase 1**
2.2	Establish a process outside of the SEND Capital Board to get notification of the allocation of children to placements at the earliest point so that the needs of children in settings can be met, and the workforce is equipped to meet these needs - Review Specialist Education Panel and communication around this (Chair FA)	Francesca Alexander (due to start 17/01/22) Alison Stanford	Milestones are linked to P2 SEND Decision making Panel action plan	**Oct-21** – Extend invitation to Alison Stanford to P3. **Dec-21 –** Extend invitation to Fran Alexander Jan-22 Feb 22 – Co-working and early discussions continue to improve and are working well, with more improvement to come. Updates will come in the next few weeks once Phase transfer placements known. Trial of a different structure

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				to SEP is ongoing. **Jun-22 – ACTION request Fran update** **Jul-22-This sits within priority 2 objective 8 SEND Decision making panels.**
3.0	**Complete our redesign of mental health services for children and young people and implement the new model** (Lead Jaime Hawkins) <u>Outcome & Impact</u> The mental health transformation programme results in the right support being delivered by the right people in the right places at the right time <u>Measures of Success</u>			
3.1	Complete the detailed service design for the core CYP mental health locality delivery model and the more specialist elements	Jaime Hawkins	**Jun 21** - Locality service design and completion of demand & capacity work **Sep 21** – Anticipated launch **Jun-21** All new service specifications and pathways will be in place. **Apr-22** With the view to make services/new pathways fully operational. **Prior Apr-22** - These will be phased in terms of specific service areas. - This work is on track	3 months delay due to C-19 30 Thrive Champions embedded across the system by July-21 – **Jul-21** Update Thrive Champions have been delayed due to resource issues in team. Working across the system to ensure WFD inc thrive MH training more broadly. **Jul-21** – New improved pathways that have been co-designed and with users and key stakeholders, these have now been put into a new service specification. We are now working on a complete view of demand and capacity across the system to enable commissioning decisions to meet critical service demand and to fill gaps in provision. Locality Team workshops run to understand gaps in the system and align delivery to thrive framework. SC and EH engaged and supporting the creation of locality functions/teams. Eating Disorder all age pathway in place and BC in place for next 3 years including significant funding for recovery, VCSE support, project support, Development of ARFID pathway and Intensive Community Treatment. Market place event 24th September 21 –

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				Completed and was successful. **Oct-21** – New event planned for 18th October due to the success of the 24th of September event. Request to focus on CYP. Demand and capacity work are due to be presented, identified there is probably sufficient capacity in the system just not in the right areas. This change will commence in April 22. Attain Project Manager appointed for ARFID pathway and should include dietetics. **Oct-21** Demand and capacity complete, moving to assurance framework mid-November 21. This will identify if current capacity is sufficient if yes move forward to the pathways for 1st April. If no sufficient time is allowed to resolve. **Oct-21** GJ,NSH & WM to discuss TOR and governance review Mental Health Steering group. **Jan-22 –** MHW for CYP initial discussion have started, wanting to ensure that there are key MHW – Jaime H, has made contacted with SPCF **Feb 22 –** new Crisis Outreach team live from 1st Feb. Not a direct referral team but take referrals from other involved services. New Barnado's phoneline also goes live on 23rd Feb – via existing EWH line but with option for callers to be put through to Barnado's advisors. Expectation is that around 100 of the 500 EWB calls each week will be put through to them. More mental health teams into schools from Sept 22, and recruitment underway for increased MH support workers into GP surgeries (1 MH worker per PCN in adults, 1 per 2PCN in children's) Funds available from NHS England from Apr 22 for dedicated keyworkers for LD and Autism – Waveney already have in place (Navigators) following pilot. Ontrack for delivery September **Mar 22- Garry/Jaime to update on Barnado's progress; all else still accurate and**

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				underway. **May 22-** The locality model plan is now in place,– the partnerships workstream has started and work plans/outcomes being agreed. Work with SCC colleagues to agree wider locality development work is underway – task and finish group met in May to agree ToR and high-level plan. I-thrive leadership development and training to support the locality model approach is now moving forward with key leads identified and attending training in May. Train the trainer leads now being identified across the system. Estates strategy now being linked to INT plans. June 22 update The programme remains amber due to system wide resourcing issues including staff and funding. The impacts of the pandemic continue to effect the numbers of young people presenting with mental health issues and higher levels of acuity. The 2022-23 Locality model has been discussed widely across relevant CYP meetings and with system partners and now moves to an implementation stage with workstream plans and meetings being rolled out. My Health, Our Future action plan is being developed with co-production partners, the urgent work regarding children and young people in mental health crisis continues with some Band 7 posts in our Acute Hospitals now recruited to and starting to see our most severe young people. Communication and education for GPs and School staff on basis children and young people's mental health is being to be rolled out and will continue across 2022/23.

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				i-Thrive work will now be re-embedded in the MH and EW workstreams to ensure that implementation of the model is part of system change moving forward. A new Business Case and funding proposal for investment into Children and Young Peoples Mental Health Services and Youth Adolescent Mental Health Services is being presented to CCG Execs in June. **Jul-22** Funding for next 2 years has been ringfenced and plans are in place for spend. Reduction in referrals to EWH and YP people are being seen quickly.
3.2	Review & Agreement & Implementation Planning	Jaime Hawkins	Jun-21	As above
3.3	Phased Implementation	Jaime Hawkins	From Jun-21	As above
3.4	Expansion of Mental Health Teams in schools Currently 2, +2 from Sept, +1 in Waveney from Sept 21 Additional 3 teams over next 3 years taking Suffolk to 49% Coverage (in excess of national target of 35%)	Jamie Mills	September 21	**May-21** - The first Mental Health Support Teams were launched in 25 trailblazer areas announced in December 2018. These include 12 areas that are also testing a four-week waiting time. These trailblazer MHSTs are building up their capacity and capability during 2019. A further 57 sites were confirmed in July 2019, and these started developing 123 Mental Health Support Teams in 2020. Suffolk has been successful in previous rounds of site selection and currently has 4 Mental Health Support Teams in Suffolk either working in schools or being trained. These are in: Ipswich, Leiston, Thurston & Mildenhall. Our current coverage for this programme is at 29% - which is above the national target of 25% coverage – however, we have recently been successful with funding for new sites for the

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				next 3 years and await an outcome on this from NHS E. The sites chosen in Suffolk for this include Wave 6 - Stowmarket/Stowupland, Wave 8 - Sudbury/Hadleigh, Wave 10 – Framlingham. This will take us to 49% coverage across all schools in Suffolk. We see the development and further implementation of the MHSTs in schools across Suffolk as a fundamental element of ensuring effective MH support for CYP that compliments other programmes and interventions. The funding received from NHSE for this programme of work (if we are successful for the next 3 rounds) will be close to £2m. All 4 High schools in Lowestoft and 19 of primary schools – Mental Health ambassadors to support with Early Intervention – Lowestoft rising. **JAN-22 –** Second phase of rolling out into Stowupland area. JH requested involvement of SPCF and YPN. ACTION – JH & SPCF to progress. **May 22-** Confirmation next MHST wave will be looking at Stoke High, East Bergholt and Holbrook with feeder primary schools. Expansion into Stowupland and Stowmarket is ongoing **Jun-22 Engagement process from schools, decision to work with these schools were made by JM, NSFT and following a needs review and capacity. ACTION – JM to draft comms for SPCF and to share with partners. Present to team meetings – JM to discuss with team.**
3.5	Review of Emotional Well-being Hub	Garry Joyce	June 2021 November 2021 – Triage of calls to hub will be launched by Barnardo's.	GJ to update Project Manager in place, trajectories are in place to bring the numbers down to 'normal' currently waiting list 1912 (as of 01/09/21),

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			November 2022 – Review and consider permanent.	slightly behind trajectory by 34. School return may impact this. 10 staff from NSFT & 5 from Barbados. Interim plan for IAG helpline, looking to award and implement from end of October. Weekly monitoring meeting with NSFT to monitor progress, Trust SCC & CCG. **Oct-21** - Waiting list below 1800, looking at introduction of another function to deal with low level queries of ADHD/Autism – Implementation Next few months to be delivered by Barnardo's. 12 Month pilot this links to ensure referrals to the hub are appropriate and pulls out those that do not need to be sent to the hub. Should be mobilised November 21. ACTION GJ to share comms with DW & CF **DEC-22 –** Reduction in waiting list to 1000, this is still concerning but is an improvement. Improvement in Red & Amber cases are accessing treatments in a timely manner. ACTION – Further update for Communication regarding EMH – GJ to update. **Feb22** – see above for update – Barnado's support live from 23 Feb. Waiting lists down from 2000 to 1200 – around 500 in relation to ADHD/Autism referrals. Waiting times down from 120 days to 60 days – target is 28 but good progress being made. Crisis referral targets of 1 day and urgent referral targets of 3 days are being met. **Mar 22** EWH waiting list 1041 as of 6/3 (tbc by GJ) NDD cases represent 57% of that caseload. Planned transfer of these to the new NDD pathway from 1/4. Wait times down to 48 days.

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				Average waiting time for MH green cases (non-NDD) continues to decrease and is currently28.8 days. The Hub continue to be more responsive to higher intervention cases (red and amber cases): Reduction in red waiting times to approx. 1 day and in amber waiting times to approx. <3 days. **May 2022-** The Hub caseload has reduced to 942 -a reduction of 60% (1393 cases) since July 2021. The green caseload is now 898. This will reduce further once unallocated under 18 NDD cases are offered the new NDD pathway, but it is currently difficult to predict by how many it will reduce. June Update • Caseload- 101 Green cases (green cases have been clinically triaged as non-urgent) in total (excluding 461NDD pts, 93 allocated to workers, 43 waiting allocation. EWH KPI is 10 days, with the recovery KPI 28 days, the average wait for green cases is 13 days. There is an increase in red and amber cases referrals, all are managed within the day of referral. We are reviewing previous years referral data to see is this a seasonal peak or could be due to other factors. • EWH staff working with Barnardo's to ensure referrals are being directed to the right place, the impact of the VCSE is too soon yet to see the impact of the daa • The Admin team have been working to manage the large volume of letters from the EWH , 2000 letters were sent

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				in May, there are 435 outstanding, additional admin has been provided, all GP letters are now emailed and the team have been focusing on the quality of the letters also. • NDD- All letters for patients who are moving to the NDD pathway from the EWH have been sent by Barnardo's on behalf of the EWH. This follows the agreed process from the NDD Pathway group. 298 letters were sent and pts will be closed off the EWH caseload 3 weeks from the letter being sent to give recipients time to come back to the EWH with queries. There has been an increase in calls to the EWH since the letters were sent and is being monitored. • The Recovery plan for the EWH is near completion, we are looking to support the core teams with the agency staff who currently work in the EWH to support the waiting lists and transformation. • Recovery plans for the core teams to be the next focus, Katrina Gardner commences in post as joint PMO for Suffolk CFYP and the CCG. Her focus will be transformation which will enable the other project managers we have to focus on the core services. **Jun-22 JM Action – To gather consistency of update on data (**The Hub caseload has reduced to 942 -a reduction of 60% (1393 cases) since July 2021). Waiting no more than 10 days KPI for hub.

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				Urgent referrals same day. (Red case). 101 Green patients (hub) 461 (NDD patients) Average wait 13 days for Hub– report due soon. ASD assessment (NICE guidelines 13 weeks for assessment to start by) **Updated to green as on July 2022, as EWH are meeting their targets.**
4.0	**Complete the development of the neuro-developmental pathway for children and young people and implement the new model** (Lead Garry Joyce) <u>Outcome & Impact</u> To provide appropriate, timely support to families for neurodevelopmental conditions (e.g. ASD, Autism) without the need for a clinical diagnosis <u>Measures of Success</u> Autism and ADHD assessment wait times			
4.1	Investment of £700k pa recurring investment in supporting VCS delivery of support to families	Garry Joyce	Jul 21 - Tender awards	On Track. £2m of submissions received Tender responses 26 April Contracts were awarded in July 2021, 7 contracts awarded 3 mobilised and delivering the remaining 4 will be ready by Mid October.
4.2	Design and implementation of Formal Clinical Pathways for diagnosis, (incl Workforce, Estates, Training, IT)	Garry Joyce	Sep 21 – Pathways in place	3 month delay due to C-19 Pathway has been signed off as agreed pathway, delays in coordination function for the launch and testing
4.3	Establish Co-ordination Function and Triage Function to help families navigate Neuro- Developmental Services	Garry Joyce	Oct 21 – Pilot Coordination and Triage function in place as 'soft' launch to ensure capacity is sufficient to meet requests. Jan-22 Soft launch of triage Apr 22 – Full launch	**Oct-21** - Coordination to be based in EWB Hubs. **Oct-21** Pin notice has been awarded to Barnardo's **Dec-21 ACTION – How will Waveney link in with, CCG re NDD Pathway** **ACTION –** JH to find update ASAP for P3 Group and PB Report

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				Feb22- Barnado's will be main first point of contact for signposting etc. £700k pa also committed to support voluntary agencies to support families at the first point of contact (no diagnosis required and whether families go down a diagnostic pathway or not) Families on the new pathway will get the support offer straightaway and will be triaged, but won't take precedence over families already waiting for assessments. Currently testing forms, systems and processes – live testing phase starts next week and will last a couple of months to identify any issues. 0-18 launch focussing on ASD/ADHD initially; will look in future at 18-25s and other neuro diagnoses. **Mar22-** Looking to transfer NDD referrals into the EWH to new NDD pathway from 1st April. Confirm whether Barnado's helpline has gone live? **May-22-** Pathway launched 25th April 2022. Co-produced letter to be sent to families on Hub waiting list this week (experienced delays due to admin processes) to inform them of new pathway and in order to obtain additional information required for new way of working. Barnardo's have sent out over 100 referrals so far and matched 5 families to support providers. Positive feedback received from SPCF around support provider. Teething issues have been experienced as with any new service going live. Some confusion within comms and referral criteria age. NDD Oversight Group agreed preschool pathways to continue as they do now through Health Visitor referrals. As already an MDT approach and support package in place. Preschool will have access to support providers in new NDD pathway. Comms have been circulated via CCG press release, PCN leads, primary care bulletins, SCC

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				headlines and bulletins. Information also available on Suffolk Infolink. SPCF have posted on social media page. Further comms in coming weeks. Presentation to SENCos end of March 22, further planned for GPs (July), Health visitors and Headteachers. Parent carer event also to take place with SPCF. Animated video is being created in coproduction with working group. Barnardo's will have access to S1 as minimum. CCG have received unit. SCC to implement smart cards and training – in progress. NDD Oversight Group to continue to meet on a monthly basis and closely monitor demand and capacity seen by the pathway. Evaluation to take place at 3 and 12 months. **June-22 –** Pathway continues to be embedded across the system as above. 113 referral forms distributed by Barnardo's in May (NB. not full month of data), 28 received back, 13 incomplete, 7 families referred to commissioned support providers and 2 referrals accepted by Triage Panel. Compliments via email: • Afternoon Lucy – many thanks for sending. The guide is so helpful, eligibility and clarity. • Thank you so much for this! Seems like a very welcome change! • That is amazing news. XXX and Mum will be so pleased. Thank you so much for the update. • Please could you also pass on to Viki Soar a huge thank you from me for all her support and advice to me, and for advocating so strongly for XXX Thank you. Focus on tweaks to referral form and flow chart following feedback from GPs. Referral form and flow chart now available via DXS. Updated comms to be circulated via PCN leads and Deputy Head of PC.

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				Further comms to be circulated in SCC Headlines to education setting as in most cases now it is more suitable for staff in education to support families with referral form than GPs. Health visitor event took place last week to provide clarification existing pre-school early developmental pathway will remain the same. However, families to receive support offer of NDD pathway if required. Summary of feedback and lessons learnt to be collated with Barnardo's for evaluation at 3-month point. To be taken to Oversight Group at end of July. Jul-22 Positive feedback has been received from families and services. A few issues have been identified but are known and solutions are being identified.
4.4	Ensuring the wider system (incl schools, SEND workforce, Families) understand that a diagnosis is not a pre-requisite for service and linking this to the Graduated Response Link to Priority 1 to communicate and embed in training for practitioners	Garry Joyce Loretta Greenacre SENDIASS	Continuous feed	**Oct-21** Ongoing work on communication, developing around Myth Busting, draft press release will be released once all 7 providers are mobilised. Is included as a FAQ to assist in transparency. **Jan-22 –** JH & GJ & WA to further discuss and development timeline and a deadline for completion. **May-22** – SENCo presentation delivered end of March with clear messaging pathway for those with or without a diagnosis. This message has continued to be delivered in recent comms that have gone out. As above, further presentations to be delivered. Working with Fran Russo and Gemma Wixley in terms of comms and engagement. Gemma to support with setting up website on Emotional Wellbeing Gateway with all information around NDD pathway. Providers as part of the pathway to upload individual and personalised videos to this platform. Referral guidance, checklists and flow charts

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				have all been developed to support families and professionals with referrals to NDD pathway. As coming months will still. **JUL-22 – Action - JM to gather update from Garry, SENDIASS have updated website with details the diagnosis is not a prerequisite.** **Jul-22 Consider involving new Comms & Engagement Officer in running an campaign for no need for a diagnosis.**
5.0	**Co-produce a new offer of Care, Education and Treatment Reviews, supported by the Transforming Care Partnership that is based on a fuller understanding of children and young people's needs.** (Lead Kathryn Searle) <u>Outcome & Impact</u> Ensuring the pathways and provision for care and support are joined up so that more children with a learning disability, autism or both can live in the community, with the right support, and close to home. <u>Measures of Success</u> Community provision is used wherever appropriate in preference to in-patient provision National delivery requirement is that for children and young people, no more than 12 to 15 children with a learning disability, autism or both per million, will be cared for in an inpatient facility.			
5.1	Ensure agencies are joined-up within Care, Education and Treatment Reviews (CETR) and that there is visibility and monitoring to: • ensure the right children are on the dynamic risk register and the right pathways and provision is in place • ensure common understanding of the key contacts around each child/family	Kathryn Searle as of Oct-21	Work for this sits within the Transforming Care Partnership.	**Oct 2021** updated from NHSE around the provision of CETR moving back to a face-to-face implementation and specific quality standards which must be met as there are concerns around inpatient care for young people with Learning Disabilities and/or Autism. In the context of CETR's where CYP at risk of admission, work is being planned for a system wide escalation pathway to support these situations where a Tier 4 bed is not available. **Feb 22** – CETR improvement plan submitted by KS to NHS England – awaiting feedback. Recruitment upcoming. Dynamic support register relaunched in Jan 22 with refreshed membership and a CYP focus based on the NHSE good practice recommendations.

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				Mar 22 – KS still awaiting feedback on the improvement plan. Dynamic support register – definitive guidance being issued Q1 22 (Apr-Jun) linked with keyworker initiative being discussed at March Prog Board. **Jun-22** – NHSE have contacted to advise writing in recognition of reaching young with LD and autism are not admitted to hospital and received support in the community. **Jul-22** - Still improving, now out to advert for QA nurse that will support with CETR improvement plan. Additional person to support is key.
6.0	**Extend the respite offer for under 18s to include children and young people with disabilities and challenging behaviours who are not currently supported by the Disabled Children's Team.** (Lead Paula Benneworth) <u>Outcome & Impact</u> Extend access to regular short breaks (respite), both in home and in external provision, to families beyond those supported directly by the DCYP Service, and for who Activities Unlimited may not be able to meet the need Ability to meet need in event of school exclusion <u>Measures of Success</u> Difficult to determine before understanding budgets			
6.1	Within the Social Care S17 Assessment process, ensure that a Parent/Carer Needs Assessment is triggered where this is appropriate, and consider how best provision can be made to incorporate short-break (respite) provision where this is appropriate to meet needs	Fran Arnold (tbc) SPCF Tracy Curtis		Fearn Bennett & Julia Read (DCYP) have developed and promoted Parent/Carer Needs Assessment. The assessment can be therapeutic in its own right, help with signposting to community & service support to help with emotional wellbeing and family networking to for contingency planning in case of illness etc. **May-21** - Concern raised that relatively few social care section 17 assessments result in Parent/Carer Needs Assessments (and would not be able to deal with demand should all families request an assessment) **Oct-21** SC Sufficiency strategy approved at DMT, due to launch Jan-21. Partner engagement events to be planned for Autumn - 21

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				JAN-22 – Request update direct to Fran. **Feb 22** joint capital funding bid unsuccessful but the intention is still to move forward with funding the Felixstowe Ferry site development. **Jun-22 –** Request an update from Fran Arnold/Tracy Curtis **Jul-22** – GJ to email Owners of objective to ascertain status of this action.
6.2	Review requirements within the planned Short Break tender and Short Break Commissioning Plan to incorporate access to: • In Home respite (currently only Personal Budget) • Regular respite • Meeting mental health needs • Meeting behaviour that challenges (without a diagnosis) needs	Paula Benneworth Kathryn Searle (Oct-21)	**Dec 21**– Procurement for new service begins **Sep 21** - Short Break Commissioning Plan in place **May 22** – New contract in place **Apr 23** - New Service in Place PB to review milestones	**Sep 21** – Overnight contract extension agreed to March 23 to allow for thorough review. **Nov-21** - Walter to lead on a Short Break Provision Review. **Oct/Nov-21** – Bid to convert Felixstowe Ferry site to convert to pods for DCYP, shared care provision and SEND Hub. **Oct/Nov-21** –variation to current contract agreed to convert “themed breaks” into smaller sleep over club available to those not meeting DCYP but still managed via a panel. To begin in April 2022. **Oct/Nov 21**- Short Break Provision event took place to gain feedback, ideas and solutions from stakeholders. **Oct 21** – exploring additional short break provision for those who don’t have an education placement. **Sep 21** – Grant Commissioning plan published and focussed on developing more provision for higher level of need with appropriate pricing structures in place. **Nov –21** - new overnight provision available in the north via Purist support. Offering holiday overnights at Fritton Lodge via persona budgets. To link to new Crisis Mental Health Outreach service

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				Feb 22: SB market event and commissioning meeting postponed due to staff sickness. Intention is to have the specification ready by end March but staffing capacity may threaten this. Aim is to broaden out the remit of CYP who can access the service; scoping work still underway to understand the needs of CYP. CS currently writing service spec – CS and KS to meet regarding this. Changed to amber. **Jun-22** – Working with health to extend the criteria for shortbreaks. NSFT are due to start attending shortbreak panel, and TOR are being updated. Need to develop referral criteria. Out for tender for overnight contract, included function if people would prefer respite in the home this can be provided. Working and linking with DCYP of families that do not meet DCYP threshold but Shorbreak is not enough. **ACTION – Request DCYP report update from Fran Arnold** • Meeting mental health needs Working with NSFT on how we provide respite support for this. **Jul-22** - Following tender process provisional award is due to be announced, this provider will be in place for April 23. Short Breaks panel has been extended to include health colleagues, who will attend and look at solutions for young people as well agree provision from short break panel.

We worked with our Young People's Network to ask children and young people with SEND in Suffolk what was important to them.

Here is what they told us:

Commissioning and Services

I want...

- To be involved in recruiting and training staff to embed the 'Ideal Worker' principles.
- To be involved in choosing the right services for children and young people with SEND.
- Support from a young age with my mental health, like anxiety, how to calm down and how to deal with and communicate complex feelings.
- To be supported to take part in activities and to pursue my hobbies and interests.
- Support to access and be part of my local community
- To have breaks and holidays.
- Places and activities to be accessible for people using wheelchairs and who have other disabilities.

To be involved in recruiting and training staff to embed the 'ideal worker' principles	Oct-21 • Young People involved in recruitment for Assistant Director of Inclusion and Head of Corporate Parenting Jan-22 • HOS SEND Service

To be involved in choosing the right services for children and young people with SEND	Oct-21 • Young people involved in design of Neuro development pathway with CCG's • Young people involved in choosing face to face or virtual appointments for Speech and Language Therapy • Young people attend the CYP Board and will be involved in the Shadow Board as well Jan-22 • Specialist Provision, CYP rep include in panel of interview for SEMH Groups • CYP panel for Specialist Provision
Support from a young age with my mental health, like anxiety. How to calm down and how to deal with and communicate complex feelings	Oct-21 • Secured £100k which can be used by any education and learning provider a bid process is currently live. Bids can be for Staff training, Audit of secondary schools on their emotional health and wellbeing provision, Early years AANT Consultation, or bespoke opportunities. **Jan-22 JM to gather feedback**
To be supported to take part in activities and to pursue my hobbies and interests	Oct-21 • Ask Paula Benneworth Jan-22 • Survey to YP re likes and dislikes for activities • SEND Friendly Work – link to YPN Presentation to Programme Board • Communication with partners to share what is available for YP Feb22 • AU Feb half term short breaks activity guide is out • New community activities page on AU website • Increased short break opportunities with special schools and HAF team
Support to access and be part of my local community	Jan-22

	• SEND Friendly Work – Development of QR code pilot in West Suffolk
To have breaks and holidays	Oct-21 • Ask Paula Benneworth Jan-22 • YP Have access to Teaming up through Avenues East to access activities such as Cinema, pub for Post 18 • Leading Lives – Overnight breaks have started (this was closed during Covid)
Places and activities to be accessible for people using wheelchairs and who have other disabilities	Oct-21 • All new provision developed within the SEND Capital Programme is accessible, we have work surfaces at two levels, all entrances have ramps and have no thresholds to ensure no bumps, low level interactive whiteboards, changing rooms are in every setting, consideration of colour palettes have been used to ensure a calming scheme, gardens have been sensory planned, sensory/quiet rooms have been provided where they can be accommodated. Jan-22 • Thorpe Woodlands, plans when funds are available via capital • Window stickers and QR codes • Local Offer website includes details of accessibility of activity providers (This is also being reviewed in partnership with the providers)