

SEND - Suffolk

A breakdown of various SEND related data and general activity linked to young people. This includes nationally published data by NHS Digital and also local NSFT, Suffolk County Council and Norfolk & Waveney ICB reporting.

If you require a demo of the dashboards please contact a member of the team via the link below.

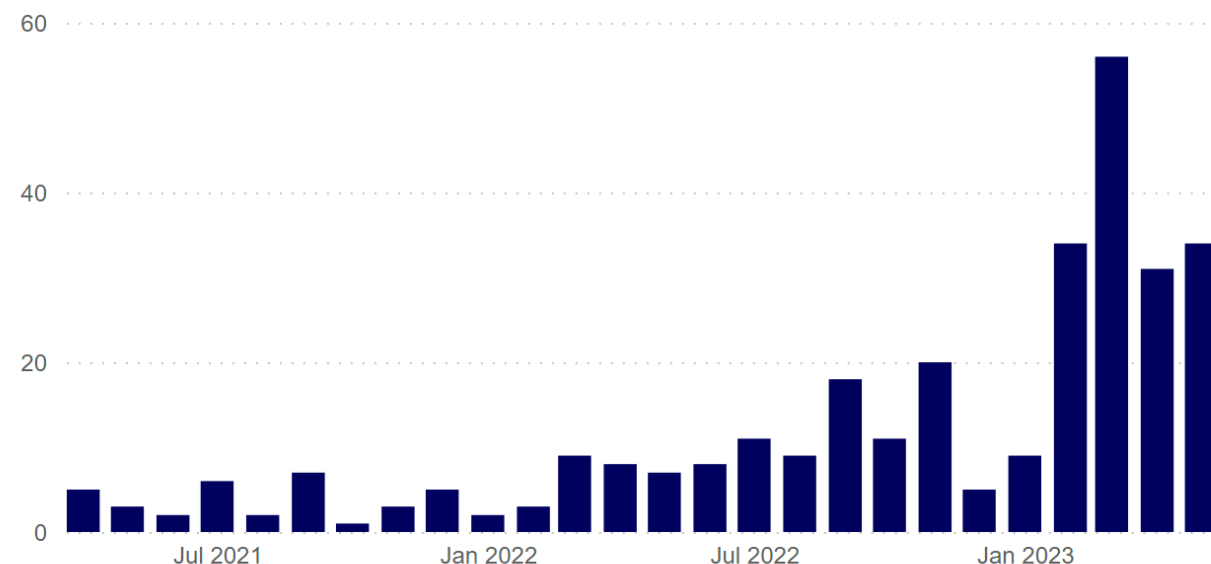
1.0	SEND Identified (Section 23)
2.0	EHCNA Advice Requests
5.0	Emotional Wellbeing
6.0	LD Annual Health Checks
7.0	NSFT Waiting Times
7.1	NSFT Wellbeing Waiting Times
8.0	ADHD Assessment Waiting Times
8.1	ADHD Treatment Waiting Times
8.2	ASD Assessment Waiting Times
9.0	RTT Paediatric Services
9.1	Community Paediatric Contacts
9.2	Community Paediatric Waiting Times
9.3	Waveney SLT Waiting Times
10.0	Dynamic Support Registers (DSR)
10.1	CETRs & Tier 4 Admissions
11.0	Personal Health Budgets

1.0 Health services are required to make a Section 23 notification to the Local Authority if they believe a child under school age has, or is likely to have, special educational needs or a disability (SEND)

Data Source: Suffolk County Council

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021/22	5	3	2	6	2	7	1	3	5	2	3	9	48
2022/23	8	7	8	11	9	18	11	20	5	9	34	56	196
2023/24	31	34											65

Total S23s Submitted



Organisation	2021/22	2022/23	2023/24
Suffolk County Council		90	45
ICPS	16	50	1
Health Visiting Team		12	7
Thurston Health Visiting		5	9
Butterflies Children's Centre	7	3	
Newberry Child Development Centre	9	1	
Forest Heath Health Visiting Team		6	1
Bury Health Visiting Team		5	1
Community Child Health	5		
High Suffolk Family Hub		5	
James Paget University Hospital		5	
Debenham Children's Centre	3	1	
Kirkley Children's Centre	2	2	
Total	48	196	65

Child primary area of need	2021/22	2022/23	2023/24
Speech Language Communication	10	144	45
Autistic Spectrum Disorder	20	29	16
Global Development Delay	11	10	
Complex Health Needs	4	9	
Social, Emotional, Mental health Difficulties		2	4
Hearing Impairment	2		
Specific Learning Difficulties	1	1	
Moderate Learning Difficulties		1	
Total	48	196	65

1.0 Health services are required to make a Section 23 notification to the Local Authority if they believe a child under school age has, or is likely to have, special educational needs or a disability (SEND)

Commentary

Section 23 notifications

Community Nursing, Children and Young People's Service, Suffolk County Council:

- The increase in the number of Section 23 notifications made has been sustained as can be seen from the data. This is mainly attributable to the increased number of Section 23 notifications being made by Suffolk Health Visiting teams, which is the result of work the teams have done in refreshing their comms to staff
- Closer links have been made with the Early Years Team at Suffolk County Council regarding Section 23 notifications
- Senior managers have encouraged Operational Leads to discuss at team meetings to remind teams of responsibilities, and a more sustained focus on the SEND pathway and Section 23 notifications within Health Visiting teams

2.0 Report of number of EHCNA advice requests received by health provider responded to within 6 weeks of receipt

Data Source: Suffolk Community Services Monthly Report Pack/NSFT

Integrated Community Paediatric Services SEND Advice Requests

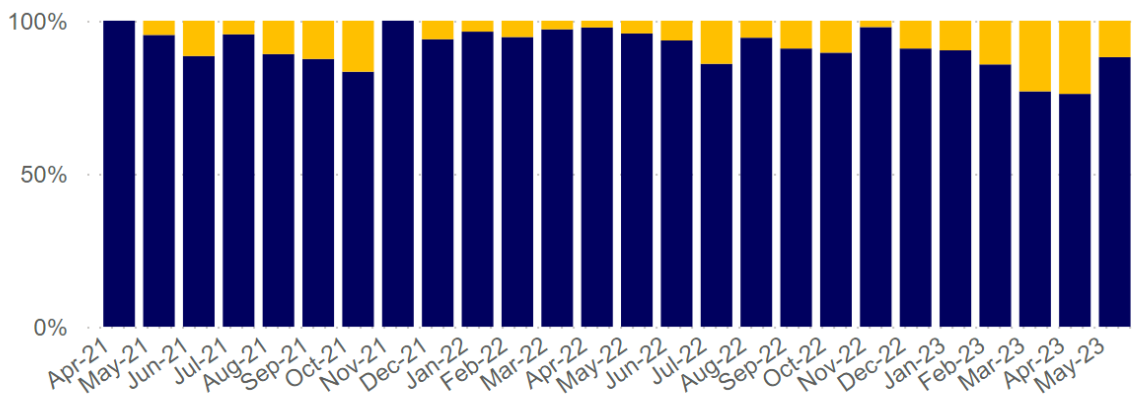
Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021/22	84	95	90	105	79	62	43	11	80	113	57	100	919
2022/23	94	89	102	81	125	76	85	109	114	99	50	76	1,100
2023/24	29	144											173

Integrated Community Paediatric Services SEND Advice Responses

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021/22	59	43	52	45	55	48	48	26	66	56	75	71	644
2022/23	45	72	62	71	72	66	67	48	77	62	49	52	743
2023/24	46	42											88

ICPS Advice Responses

● % Responses submitted within 6 weeks ● % Responses not submitted within 6 weeks



NSFT SEND Advice Requests

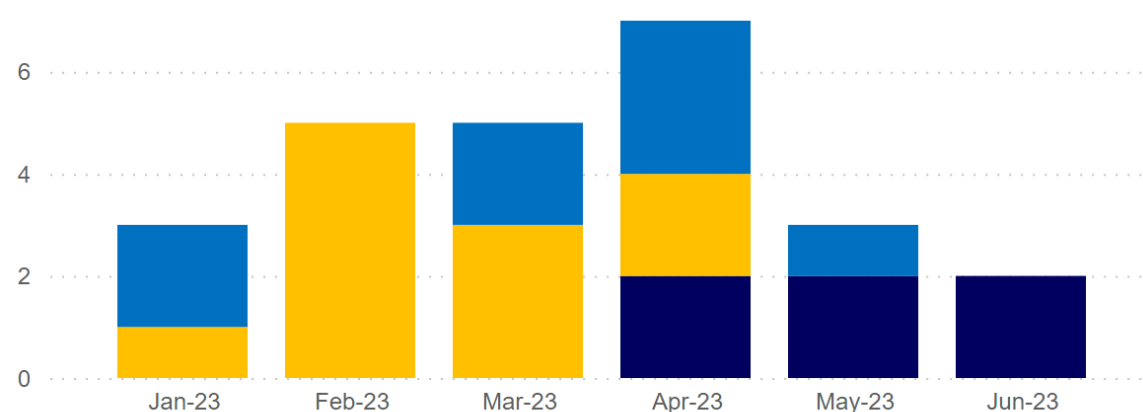
Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2022/23										3	5	5	13
2023/24	7	3	2										12

NSFT SEND Advice Responses

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2022/23										1	5	3	9
2023/24	4	2	2										8

NSFT Advice Responses

● Responded within 6 wks ● Responded after 6 wks ● No Response/Overdue



Note: NSFT advice request data contains incomplete response dates and hence may change over time as responses are sent and dataset is updated

2.0 Report of number of EHCNA advice requests received by health provider responded to within 6 weeks of receipt

Commentary

Education, Health and Care Plan Needs Assessment (EHCNA) Advice Requests

Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust:

- There is an increasing number of requests coming through to ICPS teams, in addition to the team receiving all EHCNA early warning notifications which places additional burden on the clinical team admin staff locally.
- Compliance has dropped when there has been a higher number of requests sent to teams. Most ICPS services are compliant with 6 weeks with challenges to meet full compliance seen in Medical and Paediatric Speech and Language teams. SLT and Paediatricians receive more advice requests and are the services under most operational pressure currently with high service demand.

Norfolk and Suffolk NHS Foundation Trust:

- NSFT have revised the process for EHCNA advice requests and have now managed to commit clinical time to the management alongside dedicated admin.
- This has been in place for the last 4 months. We now have clear oversight of the requests coming in and improved our data collection methods.
- The outstanding requests are largely due to having to manage a backlog that developed at the end of 2022 when we were unable to cover the work adequately.
- ADHD team have developed a new care plan which will support the timely response to requests in their service which represents a significant proportion.

5.0 Emotional wellbeing and mental health services have a positive impact for SEND

Data Source: NHS Digital - Quarterly IAPT data

Alliance	Oct-20	Jan-21	Apr-21	Jul-21	Oct-21	Jan-22	Apr-22	Jul-22	Oct-22	Jan-23
Ipswich & East Suffolk										
Under 18										
Percentage Deterioration			15						18	
Percentage Improvement	42	62	46	41	72	62	51	53	57	57
Percentage Recovery		38		34	56	34	34	42	39	29
Percentage Reliable Recovery		38	34	34	56	28	31	33	36	29
18 to 25										
Percentage Deterioration	4	6	5	5	7	8	6	6	7	9
Percentage Improvement	66	64	57	62	66	60	63	60	67	71
Percentage Recovery	45	47		42	47	41	42	40	48	46
Percentage Reliable Recovery	44	45	39	38	45	39	40	36	45	43
West Suffolk										
Under 18										
Percentage Deterioration				22	24					
Percentage Improvement	45	69	57	61	44	59	61	54	57	67
Percentage Recovery		44		36	29	53	50	28	41	40
Percentage Reliable Recovery		31	41	36	25	47	44	28	33	35
18 to 25										
Percentage Deterioration	10	6	5	7	6	11	11	6	7	6
Percentage Improvement	68	60	66	66	60	56	62	66	66	71
Percentage Recovery	51	42		45	43	43	39	50	47	46
Percentage Reliable Recovery	49	39	45	42	39	40	37	46	44	43

Definitions

Deterioration

The number of referrals ending the period having finished the course of treatment where the following is true:

- there are two or more PHQ-9 scores and two or more ADSM scores (known as 'paired scores').
- where there is an increase from the first to the last score on either the PHQ-9 measure or the ADSM measure, or both, that is greater than the reliable change threshold for that measure.
- neither the PHQ-9 measure nor the ADSM measure has a decrease from the first to the last score that is greater than the reliable change threshold for that measure.

Improvement

There is a clinically significant improvement in condition following the course of treatment. Measured based on first and last scores on patient questionnaire

Recovery

A referral has moved to recovery if they were defined as a clinical case at the start of their treatment (at 'caseness') but not when they finish the course of treatment

Reliable Recovery

A referral is reliably recovered if they meet the criteria for both the improvement and recovery measures

Note: the above percentages are calculated from figures where those lower than 5 have been suppressed and should therefore be applied cautiously
Percentages within given groups will not add up to 100 as a single patient may have one or all three of improvement, recovery and reliable recovery recorded

6.0 Number of young people aged 14-25 with learning disability receiving annual health check

Data Source: NHS Digital

Summary - 14 to 17 Year Olds

Apr-23

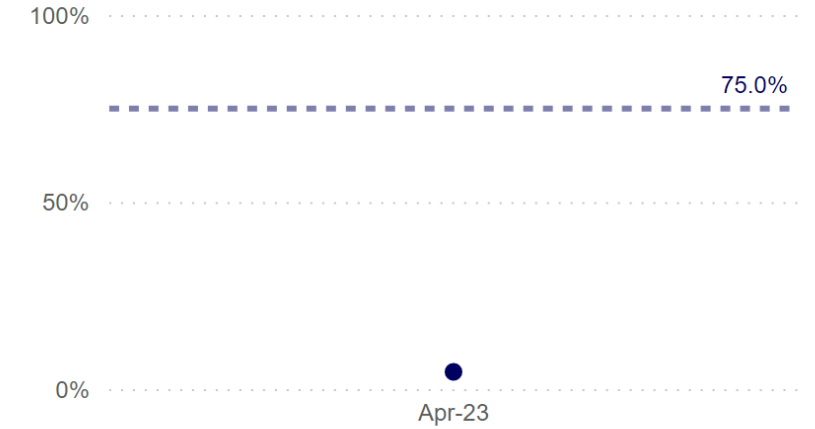
Checks (Cumulative)	16
Register	347
Uptake	4.6%
Declined (Cumulative)	0
Action Plan Achievement	100.0%

Summary - 18+ Year Olds

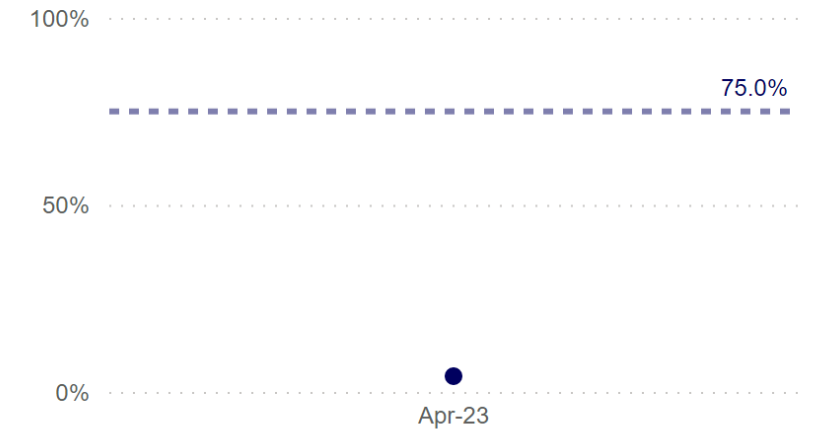
Apr-23

Checks (Cumulative)	177
Register	4,200
Uptake	4.2%
Declined (Cumulative)	2
Action Plan Achievement	82.5%

Health Checks Uptake % (cumulative)



Health Checks Uptake % (cumulative)



6.0 Number of young people aged 14-25 with learning disability receiving annual health check

Commentary

Learning Disability Annual Health Check (LD AHC)

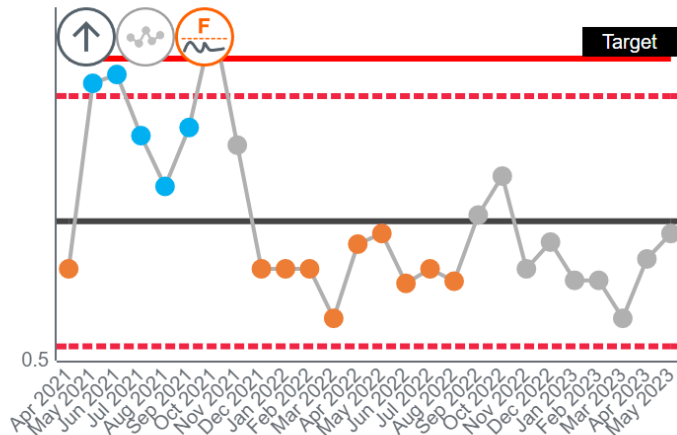
- Year-end data demonstrated an increase in completion of LD AHC's compared to last year, surpassing NHS England all age target of 75% (76.5% all age whole Suffolk)
- SNEE ICB LD AHC Steering Group has had initial meeting in April 2023 with area of focus including quality of Health Action Plans which result from the LD AHC
- Planned for both ACE Anglia, as well as NSFT Learning Disability Liaison Nurses, to attend SENCO Forums in Suffolk to share information with Education colleagues regarding LD Annual Health Checks for the SEND population
- Suffolk Local Offer page on LD AHC's has been updated with refreshed resources for whole of Suffolk
 - Links to these, and further info re LD AHCs, have been included within the updated and recently published Suffolk SEND Transitions Guide (July 23) available here: [Preparing for Adulthood - SEND Transitions Guide July 23 \(openobjects.com\)](https://openobjects.com/Preparing-for-Adulthood-SEND-Transitions-Guide-July-23)
- Suffolk Parent Carer Forum (SPCF) website analytics showing high levels of activity on LD AHC information for all of Suffolk
- DCO's and health colleagues refreshing the EHCP Annual Review paperwork together with SCC to better link to/inform of LD AHC's

7.0 Children and young people have access to emotional wellbeing and mental health services within expected time frames

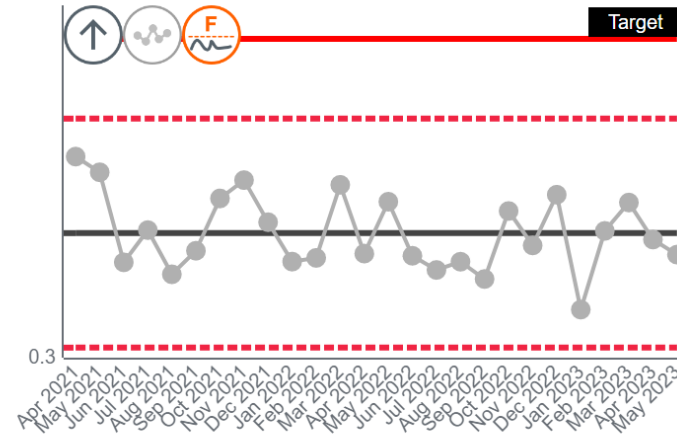
Data Source: NSFT

Indicator Name	Apr-23	May-23
Under 18 Emergency referrals assessed within 4 Hours	68.0%	71.4%
Under 18 Routine referrals assessed within 28 days	52.4%	49.2%
Under 18 Referrals treated within standard (18 weeks)	56.8%	49.4%
Referrals for service users aged 18 and over treated within standard: CFYP Service Line	90.0%	57.1%

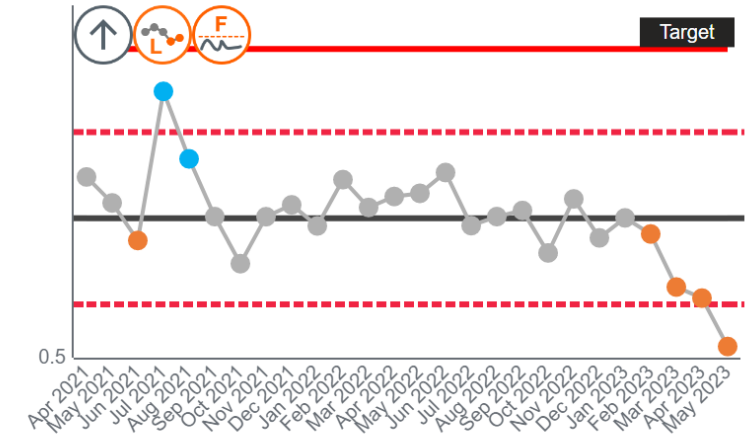
Emergency Referrals <4hrs (U18s)



Routine Referrals <28 days (U18s)



Referrals within standard (U18s)



7.0 Children and young people have access to emotional wellbeing and mental health services within expected time frames

Commentary – Page 1 of 2

Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust:

- Early Intervention CAMHS mapping of move from single to multiple points of access front door model commenced which includes the YAMHS and CAMHS referrals.
- Deputy Lead Nurse and CAMHS Lead Psychologist leading work on reviewing the Child and Family caseload and confirming the needs on the referral to ensure they are in the correct waiting list and their needs cannot be met elsewhere in the system i.e. with the Early Intervention teams.
- Joint referral meetings are being held between CAMHS and Early Intervention proving successful. This builds on the interface/step up-step down meetings that are being piloted between EI and MHST services and CAMHS and is identifying the best service to meet the needs of the service user. This is also broadening the understanding of the teams and what is provided in other services and opportunities for joint working.
- Increase staff awareness of correct data inputting and impact on reporting and outcome for service users, information sheets, training in team meetings 1:1 training offered to increase reporting accuracy.
- ERS GP messaging service being developed for use in SCFYP teams – GP's identified who are willing to participate in a pilot scheme
- Feedback tokens and tubes are to be installed in Walker Close reception to gain feedback from service users, informing how we can continue to develop the service.

7.0 Children and young people have access to emotional wellbeing and mental health services within expected time frames

Commentary – Page 2 of 2

Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust:

Accessible and Responsive Service

- In May the waiting times for assessment was 155 days against a trajectory of 105 and the number of assessments undertaken were 141 against a trajectory of 144

Recruitment and Retention:

- Plans to roll out of the new CYFP induction within core teams and system partners.
- Continued roll out of CFYP induction, continue working with dedicated recruitment officer to improve recruitment, creative thinking around recruitment, growing our own.
- Continued support from dedicated recruitment officer and weekly recruitment meeting to review all outstanding vacancies and promote broader ie in journals, social media

Working in Partnership:

- Mapping of changes to the front door provision and review of PCN role with GP engagement
- Participation in Priority Plans – Education and Training initiative looking at workforce planning, recruitment & flexible working, new roles, training and education
- ERS GP messaging service being developed for use in SCFYP teams – GP's identified who are willing to participate in a pilot scheme

New Ways of Working:

- Deep dives on case load reviews, job planning and ensuring that the EPR is updated is ongoing – improving the data quality and accuracy of reporting to partners and funders. Care group referral process review and proposals
- Transformation away day planned for 19th July
- The teams are looking at more creative ways to gain patient feedback, with the installation of Tokens and Tubes which for younger children who can't read or write or don't want to write something it gives them an opportunity to express an opinion on the service by using different colour coded tokens which they put in a series of tubes.

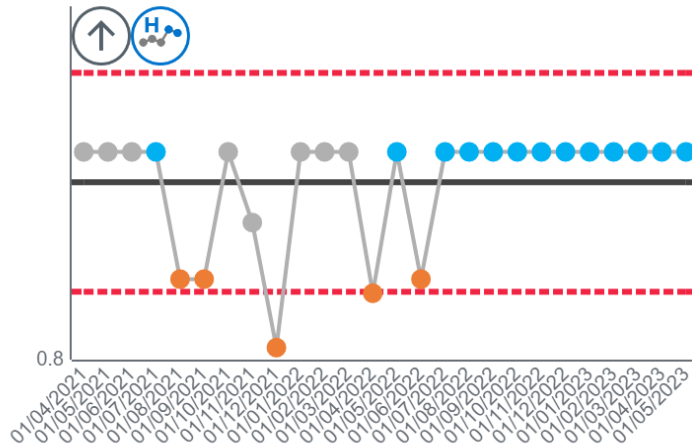
7.1 Children and young people have access to emotional wellbeing and mental health services within expected time frames

Data Source: NSFT

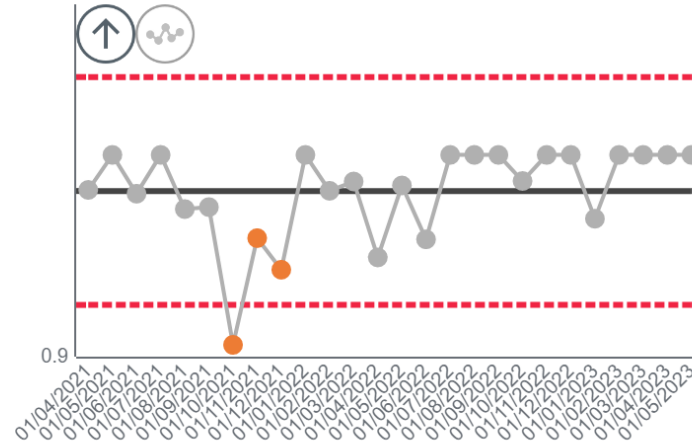
Waveney Wellbeing Service

Indicator	Age Group	Apr-23	May-23
Wellbeing Service Waiting Times < 6 weeks	16-18	100.0%	100.0%
	16-25	100.0%	100.0%
	19-25	100.0%	100.0%

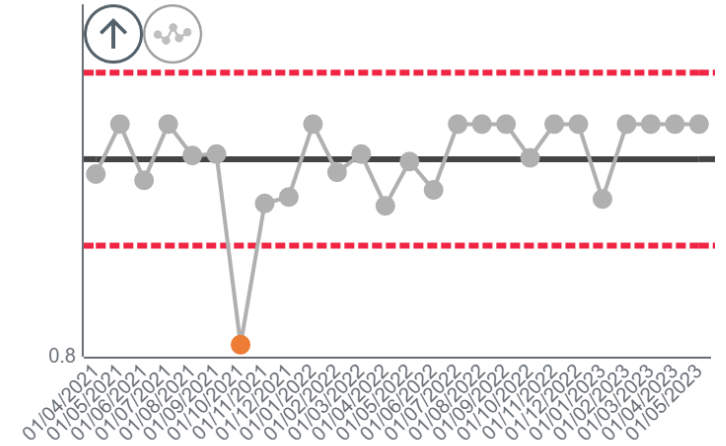
6 Week Waiting Times (16-18 years)



6 Week Waiting Times (16-25 years)



6 Week Waiting Times (19-25 years)



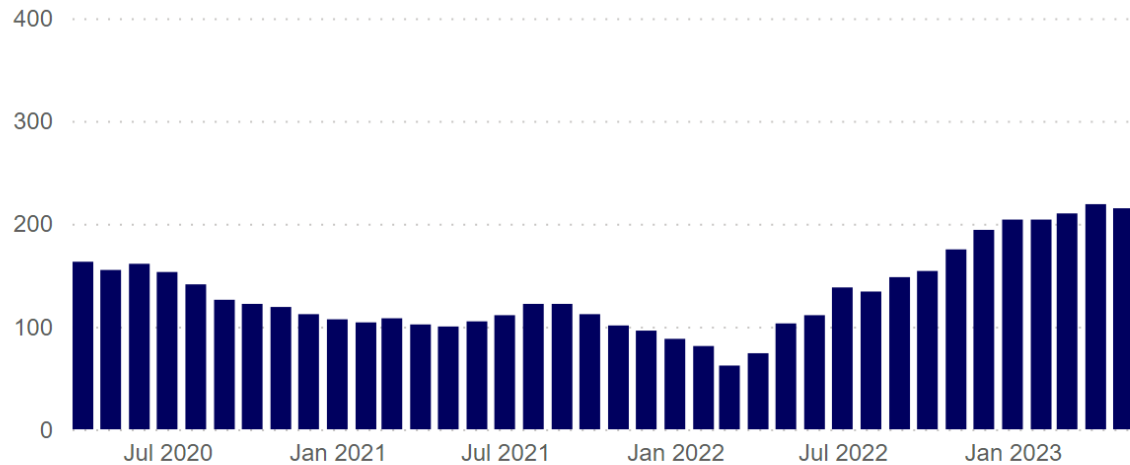
8.0 Children and young people have access to ADHD assessment within expected timeframes

Data Source: NSFT

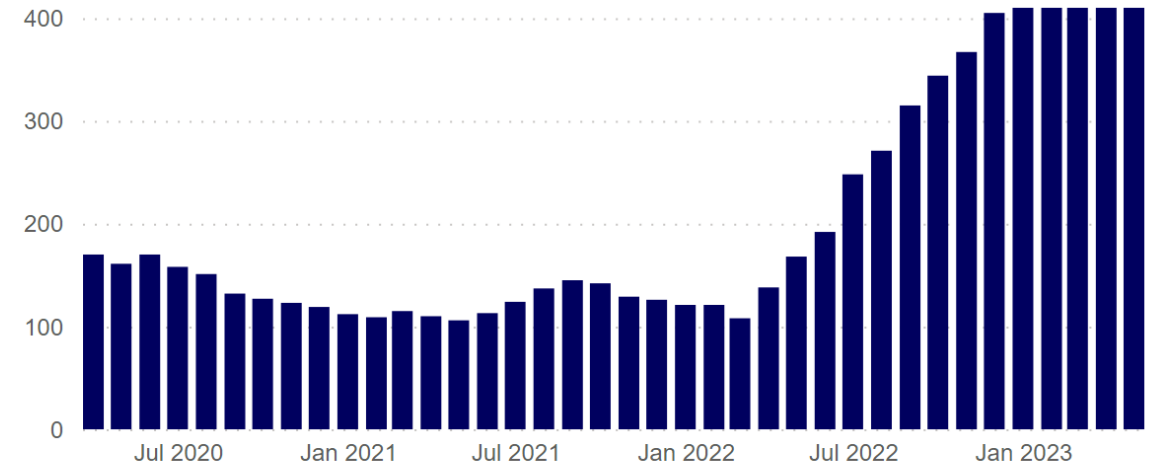
ADHD (RTA) - Under 25s

Age Band		Apr-23	May-23
5-9	RTA - Incomplete	124	125
	Average Weeks Waited	20.9	21.5
10-15	RTA - Incomplete	86	81
	Average Weeks Waited	18.8	20.6
16-17	RTA - Incomplete	9	9
	Average Weeks Waited	24.4	28.8
18-24	RTA - Incomplete	326	389
	Average Weeks Waited	27.1	26.2
Total	RTA - Incomplete	545	604
	Average Weeks Waited	24.4	24.5

ADHD (RTA - Incomplete) - Under 18s



ADHD (RTA - Incomplete) - Under 25s



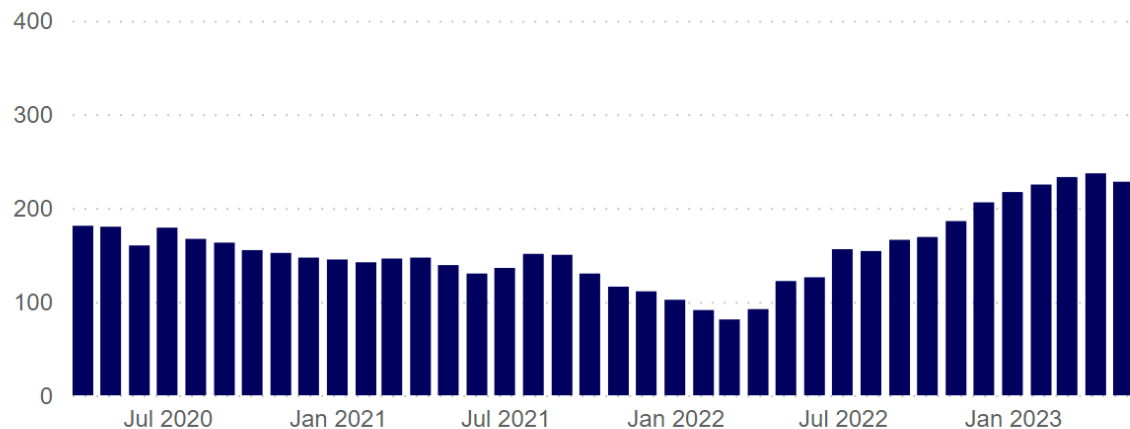
8.1 Children and young people have access to ADHD treatment within expected timeframes

Data Source: NSFT

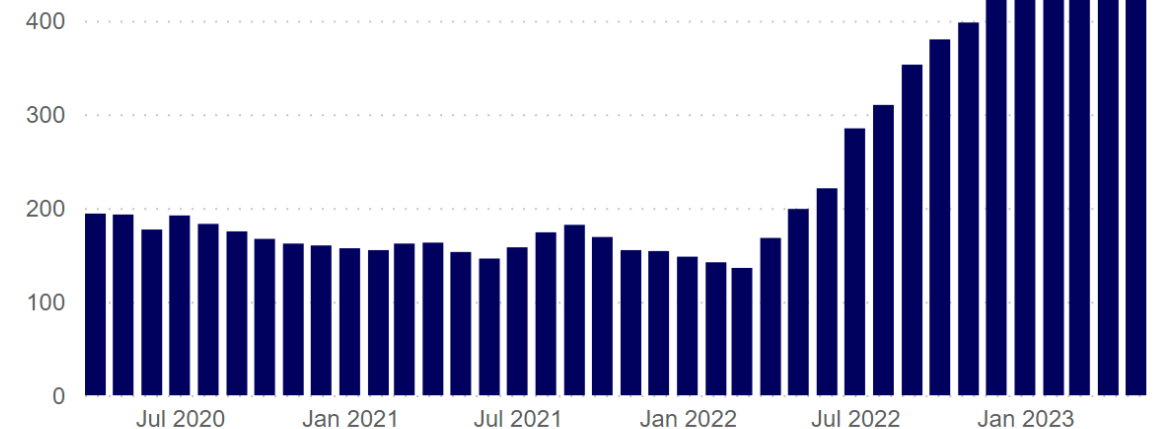
ADHD (RTT) - Under 25s

Age Band		Apr-23	May-23
5-9	RTT - Incomplete	133	131
	Average Weeks Waited	21.6	22.0
10-15	RTT - Incomplete	93	87
	Average Weeks Waited	19.4	21.3
16-17	RTT - Incomplete	11	10
	Average Weeks Waited	22.6	27.5
18-24	RTT - Incomplete	343	406
	Average Weeks Waited	28.7	27.8
Total	RTT - Incomplete	580	634
	Average Weeks Waited	25.5	25.7

ADHD (RTT - Incomplete) - Under 18s



ADHD (RTT - Incomplete) - Under 25s



8.0 Children and young people have access to ADHD assessment within expected timeframes

8.1 Children and young people have access to ADHD treatment within expected timeframes

Commentary

Under 18's ADHD, Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust:

- We predicted there would be 135 patient waiting assessment in May, there are currently 240, this is due to the increase in referrals and caseload impacting on the number of available slots for assessment and review.
- There were 29 new referrals in May, this is in line with the predicted referrals for the service.
- There were 38 patients who did not attend, these are predominantly review appointments.
- 259 appointments were undertaken in the last month.
- There were 16 patients discharged in May this is below the average of 24.
- All clinical posts are now in place. Assistant Psychologist in the team are being considered to support the preassessment process and reduce the number of patients being assessed who do not have ADHD. This will help address the conversion rates reducing the numbers of non-ADHD cases in the specialist service. Band 3 Administrator commencing in July.

Adult ADHD Service, Suffolk Care Group, Norfolk and Suffolk NHS Foundation Trust:

- Ongoing demand and capacity issues across Suffolk. We are receiving a high level of referrals (606 referrals received between Apr to Jun 23), with no additional resource.
- Current capacity is for East Suffolk – Medic at 0.4 WTE, Band 7 at 1 WTE and Band 6 at 0.6 WTE, West Suffolk – Band 7 at 1 WTE, Band 6 at 0.8 WTE, a medic provides clinical support but does not assess.
- Review of the Capacity and Demand across the ADHD service, with an intent of identifying the capacity gap, will be completed by the 24th July. Ongoing ASD/ADHD adult oversight group working alongside the ICB, VCSE and those with lived experience to discuss and review current pathways to improve waiting times and discharge rates.

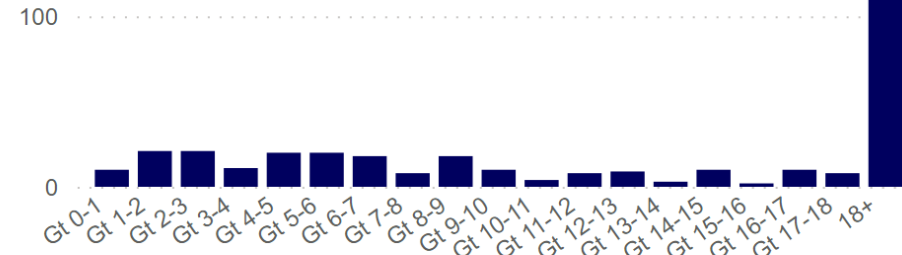
8.2 Children and young people have access to ASD assessment within expected timeframes

Data Source: Integrated Community Paediatric Services (ICPS)

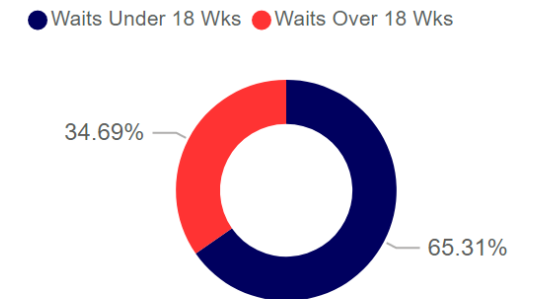
Patients identified as having Socio-Communication difficulties (Under 11s)

Month	Total Waiting	Max Waiting Time (wks)	Average Waiting Time (wks)	No. Waiting over 18 Weeks	% Wait over 18 Weeks
Dec-22	348	54.71	10.77	61	17.53%
Jan-23	322	59.14	11.46	59	18.32%
Feb-23	317	63.14	12.66	62	19.56%
Mar-23	342	67.57	13.56	104	30.41%
Apr-23	360	47.57	14.59	129	35.83%
May-23	343	49.29	14.39	119	34.69%

U11s Waits by Weeks (latest month)



% Waiting Over 18 Weeks (latest month)

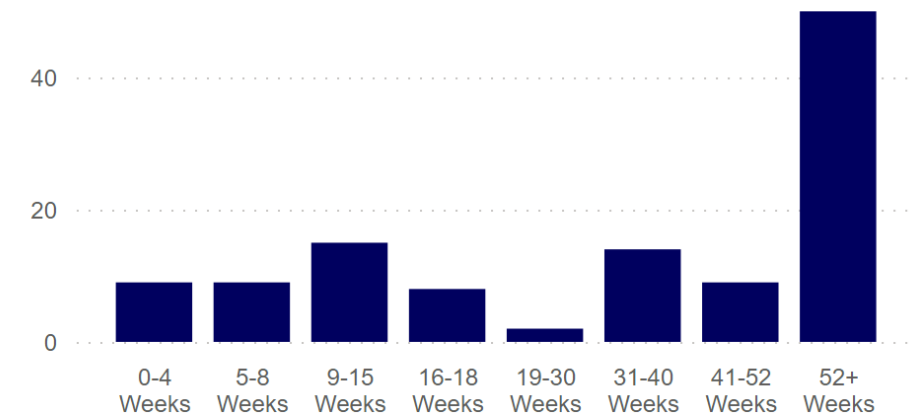


Data Source: NSFT

Youth Autism (11-18s) - Weeks Waiting for Assessment

Month	0-4 Weeks	5-8 Weeks	9-15 Weeks	16-18 Weeks	19-30 Weeks	31-40 Weeks	41-52 Weeks	52+ Weeks	Total
Feb-23	9	9	15	8	2	14	9	50	116

Youth Autism Waits by Weeks



8.2 Children and young people have access to ASD assessment within expected timeframes

Commentary

Under 11's ASD Assessment

Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust:

- The graph reflects the number of children referred with socio-communication difficulties requiring formal assessment for possible ASD with Paediatrician or the multidisciplinary team
- The community paediatricians and multidisciplinary team continue to focus on assessment backlog alongside other pathways and caseload management.

9.0 Children and young people have access to Therapies and Community Paediatric Services

Data Source: Suffolk Community Services Monthly Report Pack

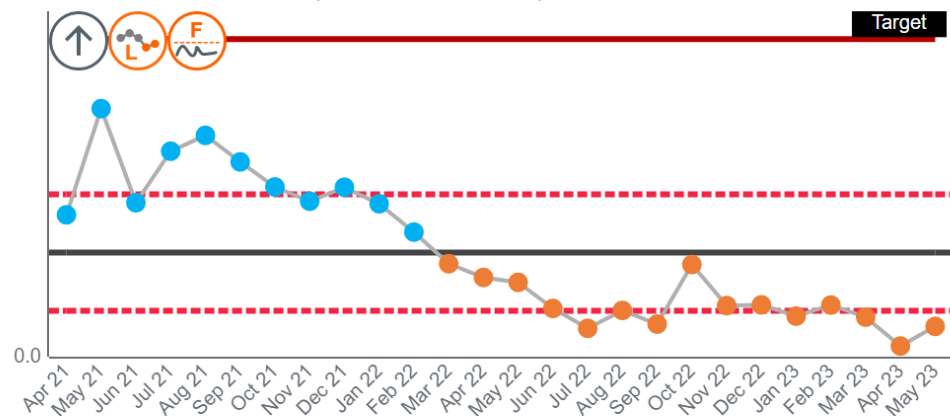
Consultant-Led Paediatric Services (Target 95%)

	Apr-23	May-23	Total
Seen within 18 weeks	3	9	12
Total Seen	45	73	118
% Seen within 18 weeks	6.67%	12.33%	10.17%

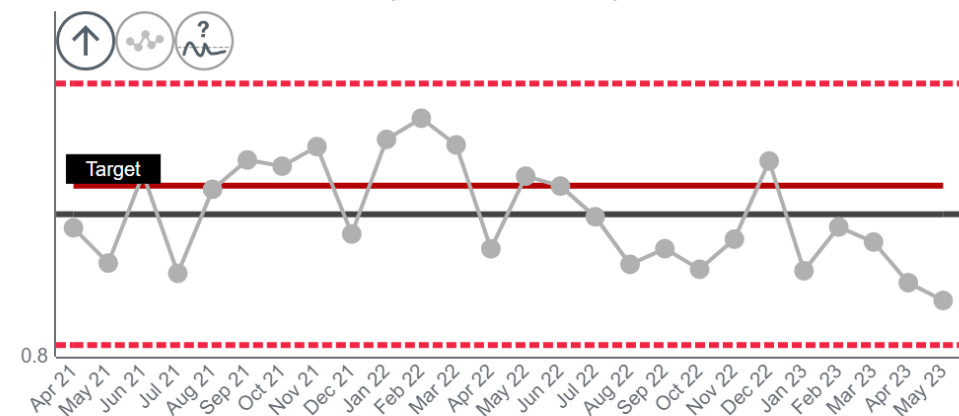
Non-Consultant-Led Paediatric Services (Target 95%)

	Apr-23	May-23	Total
Seen within 18 weeks	191	273	464
Total Seen	216	313	529
% Seen within 18 weeks	88.43%	87.22%	87.71%

Consultant-Led Referrals (% within weeks)



Non-Consultant-Led Referrals (% within weeks)



Note: Please note the figures presented relate to all paediatric contacts regardless of whether the patient has SEND identified

9.0 Children and young people have access to Therapies and Community Paediatric Services

Commentary

Paediatric Medical Team (Consultant-led Paediatric Services), Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust:

- Paediatric capacity continues to be impacted by sustained demand and high caseload numbers requiring medical management of complex needs. There is a locum in place covering a vacancy. Additional capacity has been secured with a full-time specialist nurse to support the team in the West locality. A formal review of capacity and demand started in June to consider options to respond to current levels of service pressure. The average wait for initial assessment is currently 19 weeks with the longest waits being in the East locality.

Commentary for non-consultant led services follows from 9.2

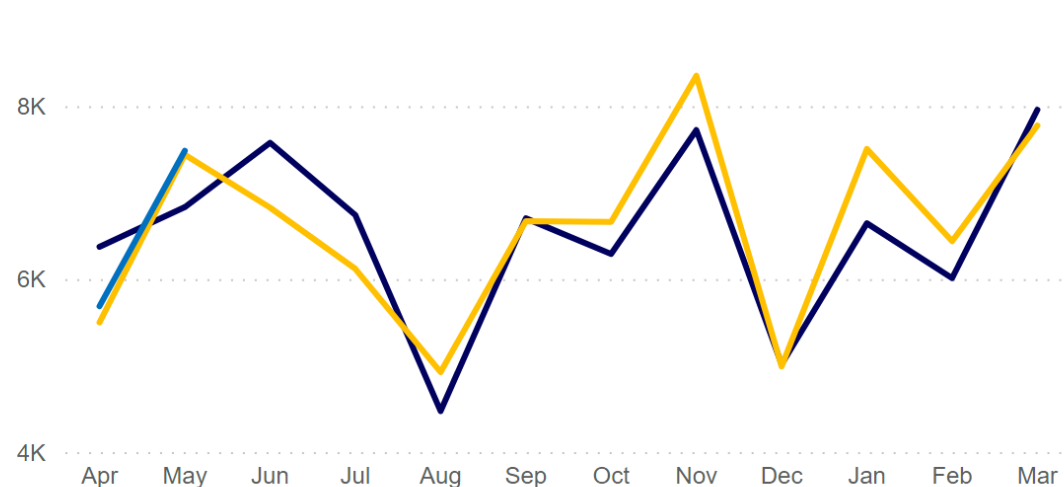
9.1 Contacts (number and method) of community paediatric services with children and young people

Data Source: Suffolk Community Services Monthly Report Pack

Service	Apr-23	May-23	Total
Paediatric Speech & Language Therapy	2,058	3,101	5,159
Community Children's Nursing Team	1,747	1,941	3,688
Paediatric Physiotherapy	726	1,013	1,739
Paediatric Occupational Therapy	530	609	1,139
Audiology	349	407	756
Paediatric Psychology	233	348	581
Suffolk Communication Aids Resource Centre	45	66	111
Total	5,688	7,485	13,173

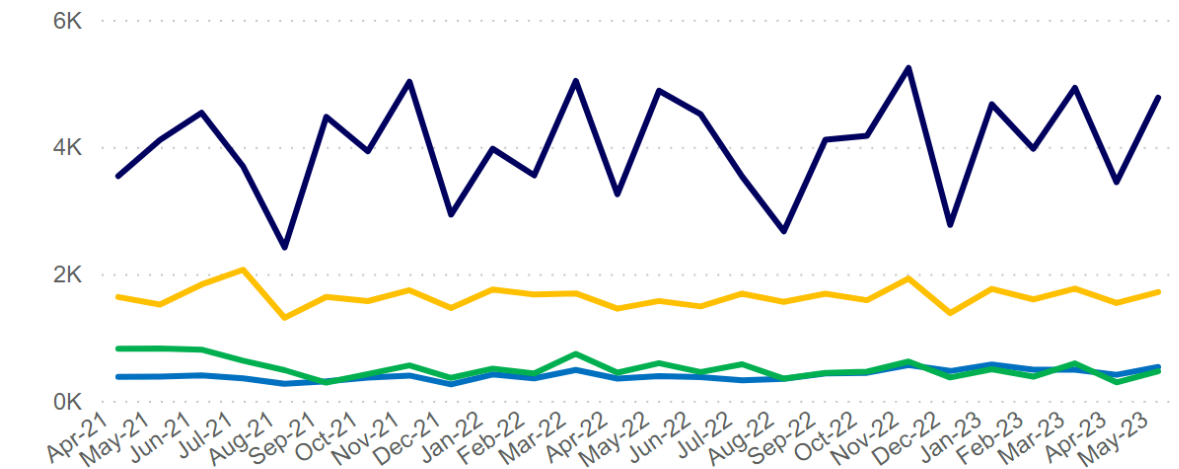
Contacts by Year

● 2021/22 ● 2022/23 ● 2023/24



Contacts by Method

● Email ● Face to Face ● Telephone ● Video



Note: Please note the figures presented relate to all paediatric contacts regardless of whether the patient has SEND identified

9.1 Contacts (number and method) of community paediatric services with children and young people

Commentary

Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust:

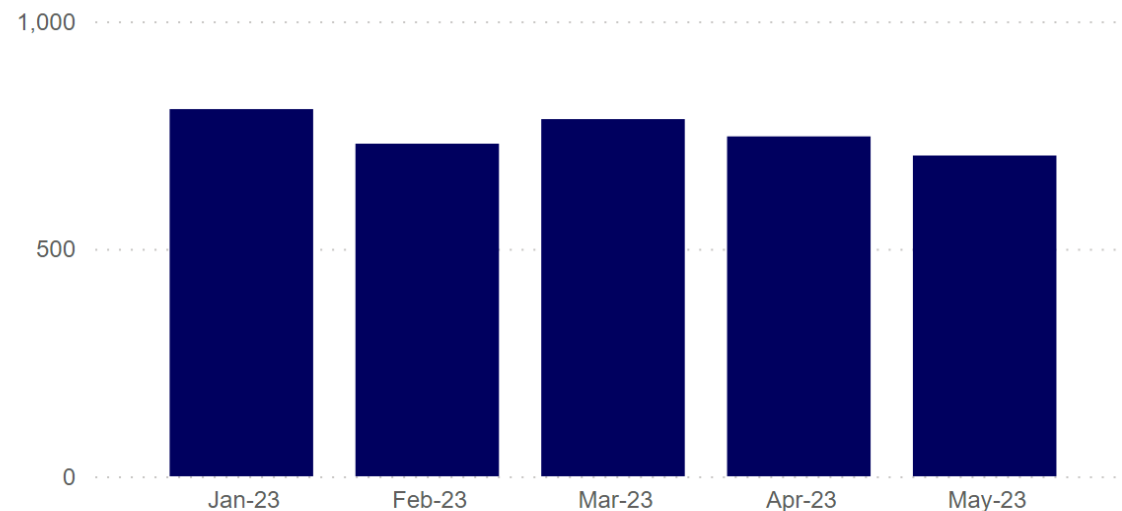
- This chart highlights all clinically relevant activity undertaken in the ICPS services, not only SEND
- Activity generally increasing across services

9.2 Children and young people have access to Therapies within expected timeframes

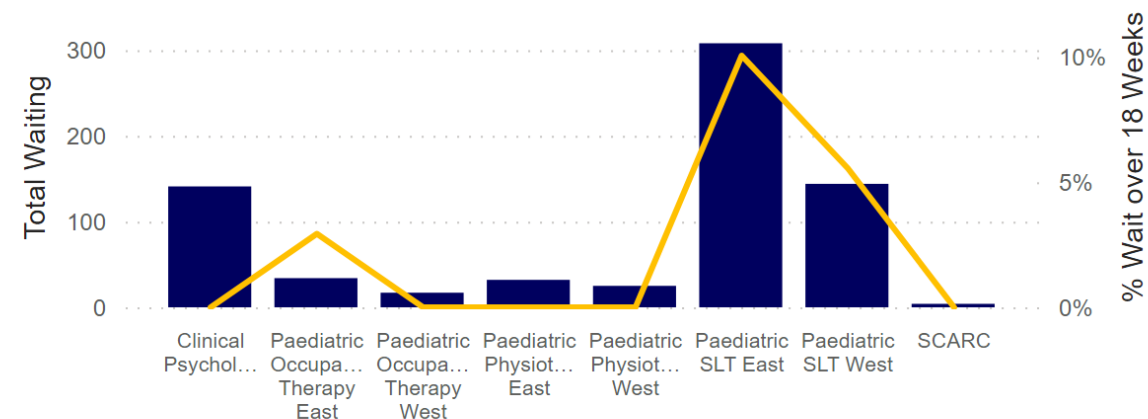
Data Source: Integrated Community Paediatric Services (ICPS)

Therapy	Total Waiting	Max Waiting Time (wks)	Average Waiting Time (wks)	No. Waiting over 18 Weeks	% Wait over 18 Weeks
Clinical Psychology	141	18.00	6.02	0	0.00%
Paediatric Occupational Therapy East	34	17.29	5.67	1	2.94%
Paediatric Occupational Therapy West	17	9.29	5.77	0	0.00%
Paediatric Physiotherapy East	32	14.86	5.90	0	0.00%
Paediatric Physiotherapy West	25	17.14	7.32	0	0.00%
Paediatric SLT East	308	44.00	10.31	31	10.06%
Paediatric SLT West	144	30.14	6.49	8	5.56%
SCARC	4	10.29	9.11	0	0.00%

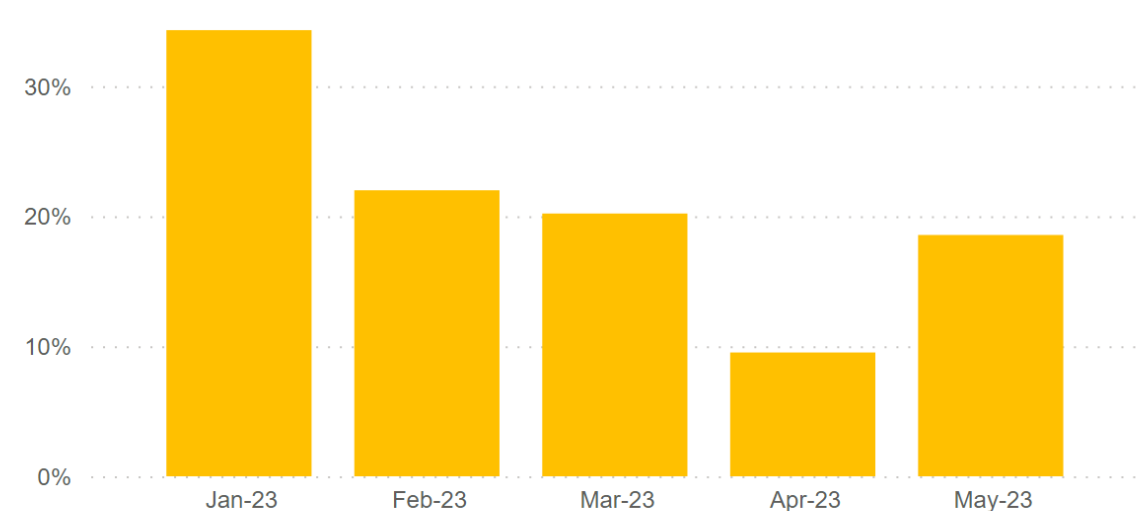
Total Waiting



● Total Waiting ● % Wait over 18 Weeks



% Waiting Over 18 Weeks



9.2 Children and young people have access to Therapies within expected timeframes

Commentary

Integrated Community Paediatric Services, West Suffolk NHS Foundation Trust:

- Therapy services are seeing sustained levels of activity and complexity but most are meeting 18 weeks compliance levels. Compliance levels within Speech and Language Therapy are lower due to sustained referral rates, high caseloads which is exacerbated by vacancies (turnover and maternity leave) in some pathways. The Trust is working with Suffolk County Council to prioritise identified investment to increase capacity within special schools/specialist units (not reflected in this data).

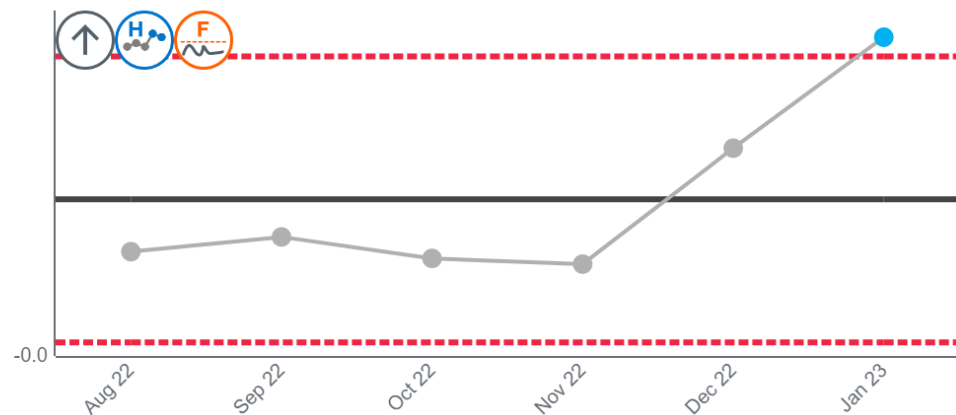
9.3 Children and young people have access to Therapies within expected timeframes

Data Source: Just One Norfolk

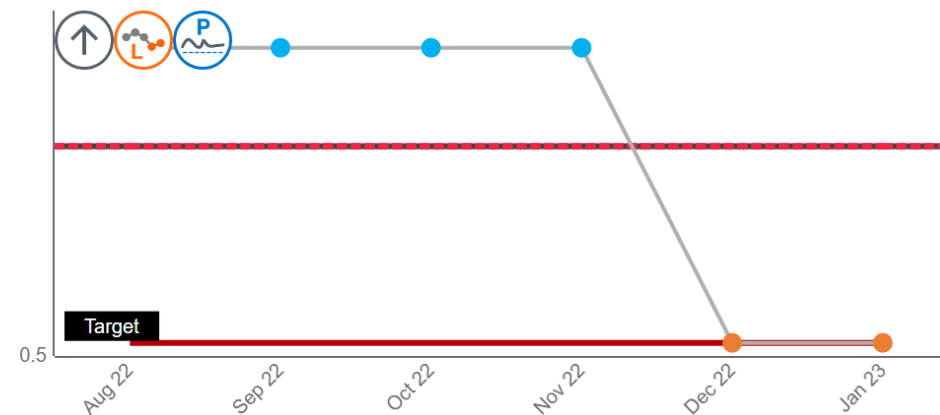
Waveney Speech and Language Therapy Service

Key Performance Indicator		Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23
% of CYP waiting <18 Weeks for a SaLT assessment	Numerator	9	12	9	8	20	33
	Denominator	124	144	133	126	135	144
	%	7.3%	8.3%	6.8%	6.3%	14.8%	22.9%
% of CYP seen within 12 weeks of assessment for intervention	Numerator	3	6	4	2	1	1
	Denominator	3	6	4	2	2	2
	%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%

% Waiting <18 Weeks for SaLT Assessment



% Seen within 12 Weeks for Intervention



9.3 Children and young people have access to Therapies within expected timeframes

Commentary

Norfolk and Waveney ICB:

The average time children have spent on the Norfolk and Waveney waiting list to access SaLT is 23 weeks for children aged 0-4, 33 weeks for children aged 4-10 (typically primary school age) and 41 weeks for children aged 11-16 (typically secondary school age). We accept these waits are too long, and have been working in conjunction with commissioning teams and CCS to improve outcomes for young people.

This work has identified two priorities, which are to reduce the backlog of children waiting too long to access treatment, while also creating a system approach which means in practice creating more community based provision children and families can access quickly to avoid escalation and the need for formal treatment. This in turn should improve outcomes for all young people experiencing issues of this nature. There has been significant investment into services to focus on reducing the waiting times to access SaLT, which has included CCS taking on a new contracted provider to increase capacity in the system. Reducing the backlog has proved challenging, because of the increased need for SaLT, along with a national shortage of speech and language therapists, however as a local system we have continued to invest in practitioners and upskilling staff.

A recent OFSTED inspection has recognised the work the ICB and NCC are doing to actively reducing wait times for children to access SaLT. We can confirm anyone on the waiting list is pro-actively contacted by CCS, where guidance and advice is provided for how to manage in the period while they wait, along with signposting to other support agencies.

There are other avenues families can take to access support while they wait:

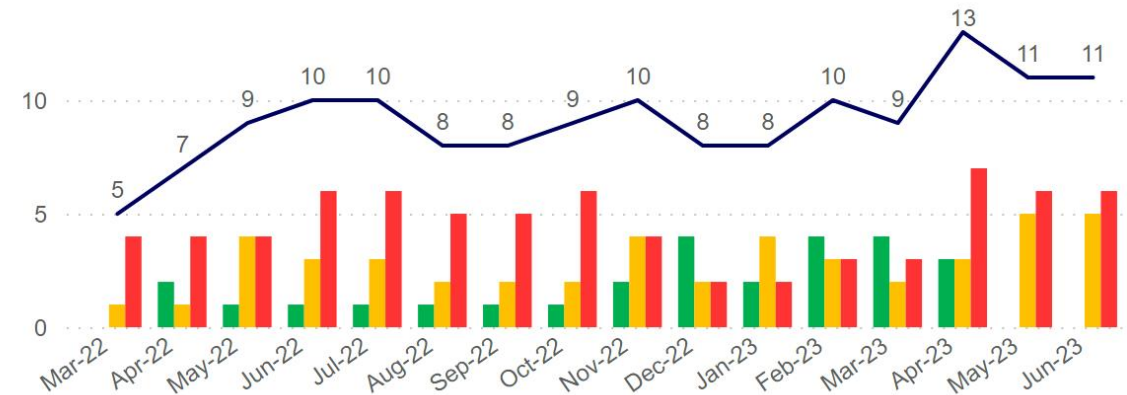
- Support and advice via Just One Norfolk
- Parents/Carers are able to access advice and support via Just One Norfolk (0300 300 0123) – where they are able to speak to a speech and language therapist or assistant practitioner. This will enable them to access advice about how they can support their child prior to any SaLT assessment.
- There is recorded training available on the Just One Norfolk website for professionals, parents and carers (<https://www.justonenorfolk.nhs.uk/>)

10.0 Children and Young people (0-18) with SEND have a holistic and independently led review of their needs where accessing tier 4 care

Data Source: SNEE ICB/Norfolk & Waveney ICB/NHS England

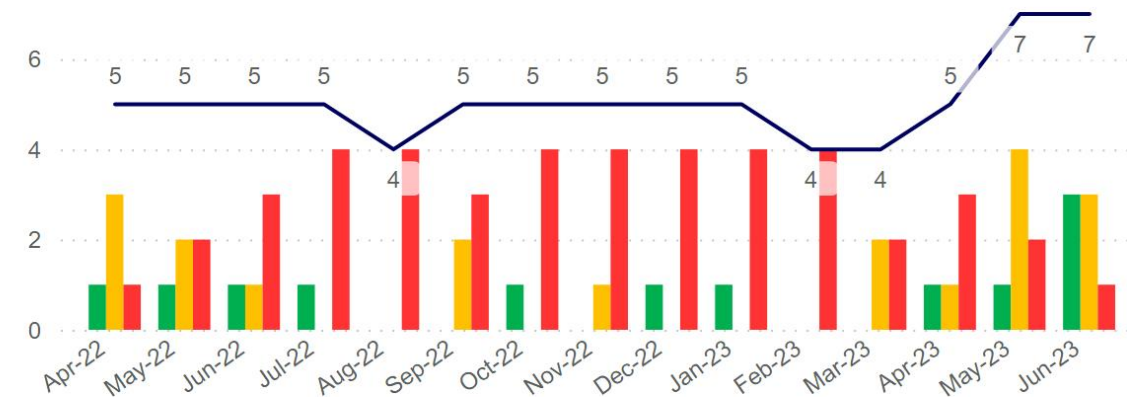
Dynamic Support Register (DSR) RAG Ratings (Suffolk - SNEE)

Green Amber Red No. of CYP on DSR



Dynamic Support Register (DSR) RAG Ratings (Waveney)

Green Amber Red No. of CYP on DSR



Immediate risk of person being admitted to a mental health hospital.

- A C(E)TR must take place
- Referral to the keyworker service for children and young people.

Immediate risk that the person will be admitted to a mental health hospital without urgent intervention.

- Multi-agency meeting and/or C(E)TR must take place
- Referral to the keyworker service for children and young people.

Some risks that could lead to the person being admitted or re-admitted to a mental health hospital; but currently these risks are being effectively managed.

- Clear identification of partners who would need to be involved in a C(E)TR if required.

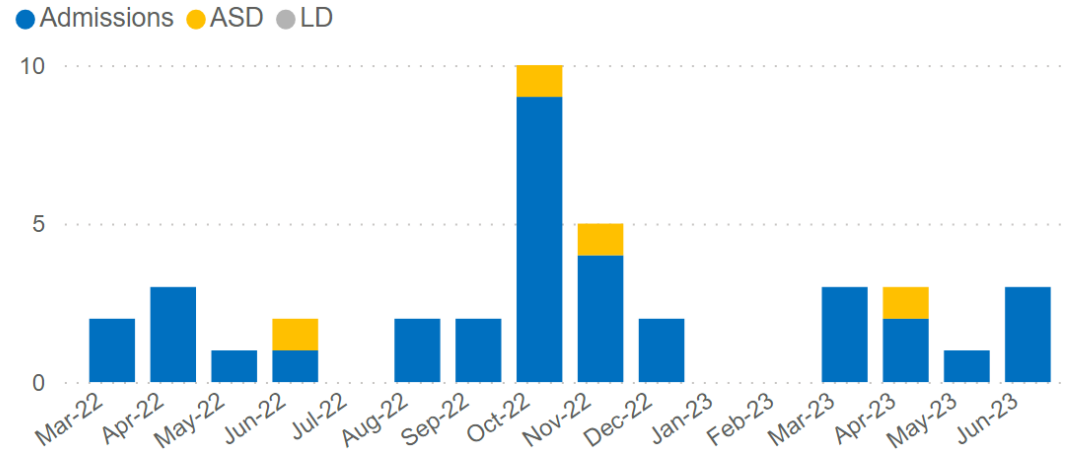
A separate rating must identify children, young people and adults currently in mental health hospitals.

- Use to identify people needing commissioner oversight visits and inpatient C(E)TRs.

10.0 Children and Young people with SEND have a holistic and independently led review of their needs where accessing tier 4 care

Data Source: SNEE ICB/NHS England

Tier 4 & TCP Admissions (Mar-22 to Jun-23)



Of the 4 TCP CYP admitted to a Tier 4 provision:

- 3 had a pre-admission community CETR.
- 1 followed the Blue Light protocol due to level of risk and the need for urgent action due the YP being in an inappropriate setting.

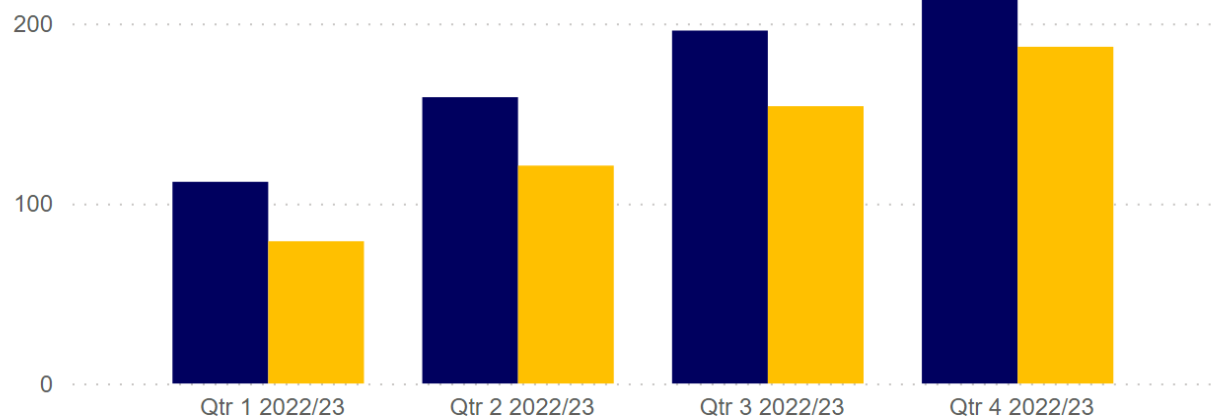
11.0 Number of young people accessing a health funded personal health budget

Data Source: NHS Digital/Local Data

PHB Metric	Total number	Direct payment	Third party budget	Notional budget
Total number of children and young people with a personal health budget YTD	237	54	1	182
How many children receiving continuing care had a personal health budget YTD	54	54	0	0
How many children and young people with education, health and care plans had a personal health budget YTD	47	45	0	2
How many children with a learning disability and/or autism had a personal health budget in the YTD	47	45	0	2
How many children who have a primary mental healthcare need had a personal health budget YTD	4	0	0	4
.....of those how many children were eligible for section 117	4	0	0	4
How many children have a personal wheelchair budget YTD	180	0	1	179
How many other children had a personal health budget YTD	0	0	0	0

No. of children/young people with a personal health budget (YTD)

● Suffolk (incl. Waveney) ● Suffolk (SNEE)



No. of children/young people with a personal health budget (YTD)

● Ipswich & East Suffolk ● West Suffolk ● Waveney

