

# 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.

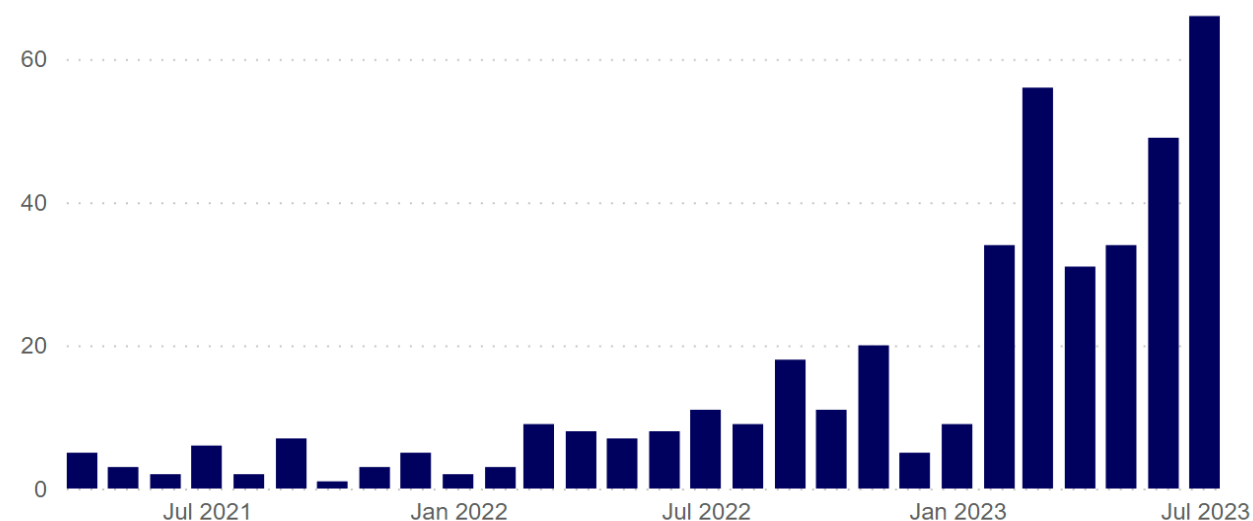
- 1.0 SEND Identified (Section 23)
- 2.0 EHCNA Advice Requests
- 5.0 Emotional Wellbeing
- 6.0 LD Annual Health Checks
- 7.0 NSFT Waiting Times
- 8.0 ADHD Assessment Waiting Times
- 8.1 ADHD Treatment Waiting Times
- 8.2 ASD Assessment Waiting Times
- 9.0 RTT Paediatric Services
- 9.1 Community Paediatric Contacts
- 9.2 Community Paediatric Waiting Times
- 9.3 Waveney Therapies
- 10.0 Dynamic Support Registers (DSR)
- 10.0 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	49	66									180

Total S23s Submitted



Organisation	2021/22	2022/23	2023/24
Suffolk County Council		90	88
ICPS	16	50	5
Health Visiting Team		12	39
Thurston Health Visiting		5	14
Butterflies Children's Centre	7	3	
Children and Young People			10
Forest Heath Health Visiting Team		6	4
Newberry Child Development Centre	9	1	
Bury Health Visiting Team		5	3
Stowmarket Health Visiting Team		1	6
High Suffolk Family Hub		5	1
South Suffolk Health Visiting Team			6
Community Child Health	5		
<b>Total</b>	<b>48</b>	<b>196</b>	<b>180</b>

Child primary area of need	2021/22	2022/23	2023/24
Speech Language Communication	10	144	127
Autistic Spectrum Disorder	20	29	41
Global Development Delay	11	10	2
Complex Health Needs	4	9	
Social, Emotional, Mental health Difficulties		2	9
Specific Learning Difficulties	1	1	1
Hearing Impairment	2		
Moderate Learning Difficulties		1	
<b>Total</b>	<b>48</b>	<b>196</b>	<b>180</b>

Note: this data is sourced from Suffolk County Council and therefore covers the full Suffolk area, including Waveney

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 Section 23 notifications from February 22 onwards, was the result of a change in process for the Community Nursing team, where staff were required to automatically complete a Section 23 notification following a Schedule of Growing Skills (SOGS) assessment. The introduction of this methodology vastly improved the Pathway for families in the following ways:

- Access to 3-6 monthly contact
- Access to the Little Stars Group
- Support to go to school placements
- Increased visibility for vulnerable children
- Early Years Advisors to help access specialist provision
- Children are seen at 2-year check stage
- Signposting - Literacy Trust, CBeebies resources, Infolink, Suffolk Local Offer
- Earlier recognition of additional needs

This has led to the total number of referrals in the first four months of the 2023/24 year almost equalling the total for the previous year – 196 for 12 months v 180 for 4 months. The data also shows the shift from Section 23 notifications primarily coming from specialist services in 21/22 to almost exclusively emanating from Suffolk County Council and Health Visiting Teams in 23/24, allowing earlier intervention. The key areas of need have shifted away from Complex Health Needs and Global Developmental Delay to Speech Language and Communication, and this is likely due to identifying difficulties in these areas at the 2-year stage – which gives time for interventions prior to attending school. Although referrals for Autistic Spectrum Disorder were high in 21/22, the figures show double the referrals made already in the first 4 months of 23/24, which may indicate that teams are becoming more attuned to recognising additional needs.

- New online process for making Section 23 notifications going live Autumn 2023

## 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

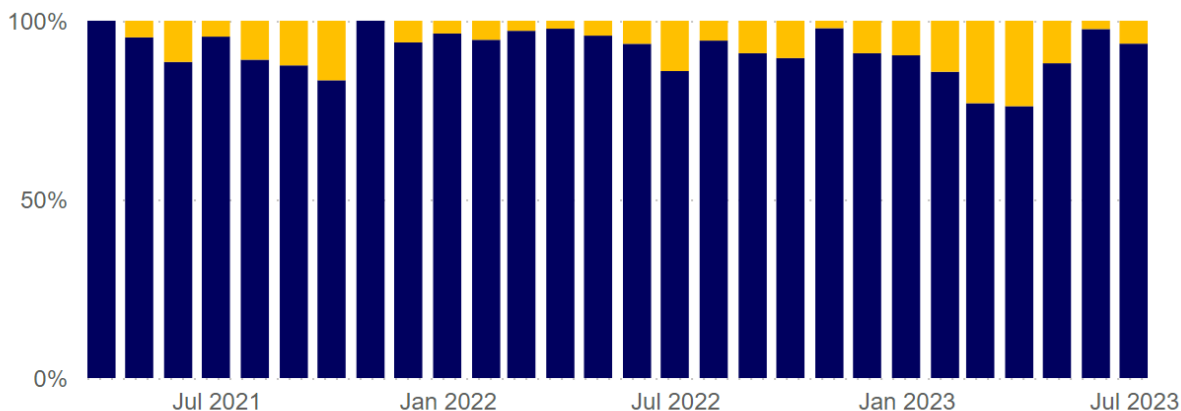
Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2021/22	84	95	90	105	79	62	43	11	80	113	57	100	919
2022/23	94	89	102	81	125	76	85	109	114	99	50	76	1,100
2023/24	29	144	145	102									420

### 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	86	78									252

### ICPS Advice Responses

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



### NSFT SEND Advice Requests

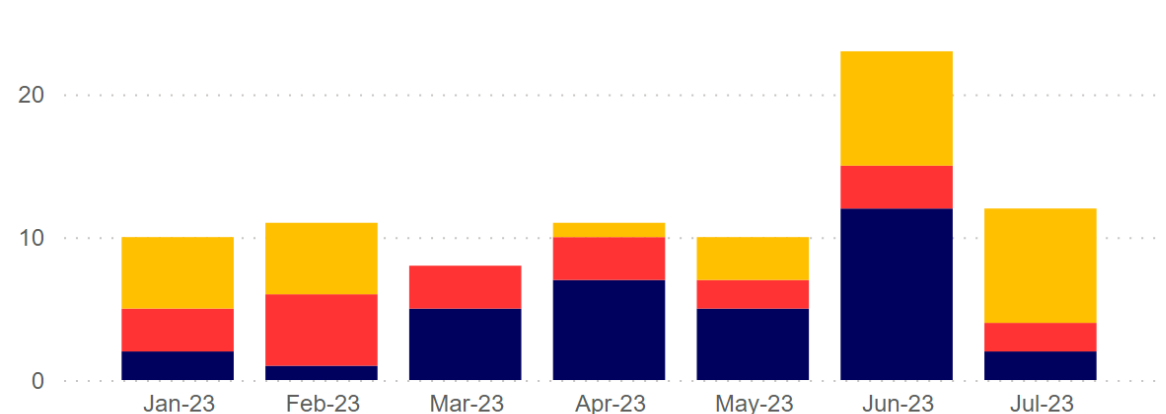
Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2022/23										10	11	8	29
2023/24	11	10	23	17	12								73

### NSFT SEND Advice Responses

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
2022/23										8	10	3	21
2023/24	4	5	11	10									30

### NSFT Advice Responses

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



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.
- ADHD team have developed a new care plan which will support the timely response to requests in their service which represents a significant proportion.
- Most of the outstanding requests relate to one specific team where additional support is being offered to increase compliance
- Approx 50 Suffolk CFYP staff attended workshop with DCO team in Sept 23 focussed upon health advice, including quality and timeliness

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

Data Source: NHS Digital - Quarterly IAPT data/local Waveney data

Alliance	Dec-20	Mar-21	Jun-21	Sep-21	Dec-21	Mar-22	Jun-22	Sep-22	Dec-22	Mar-23
<b>Ipswich &amp; East Suffolk</b>										
<b>16 to 17</b>										
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
<b>18 to 25</b>										
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
<b>Waveney</b>										
<b>16 to 17</b>										
Percentage Improvement	33	56	63	43	57	50	38	25	30	67
Percentage Recovery	67	33	50	20	43	22	50	50	29	50
<b>18 to 25</b>										
Percentage Improvement	36	30	26	25	21	22	16	12	18	17
Percentage Recovery	57	33	44	40	36	40	36	46	30	45
<b>West Suffolk</b>										
<b>16 to 17</b>										
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
<b>18 to 25</b>										
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 ADOS 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 ADOS measure, or both, that is greater than the reliable change threshold for that measure.
- neither the PHQ-9 measure nor the ADOS 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 May-23 Jun-23

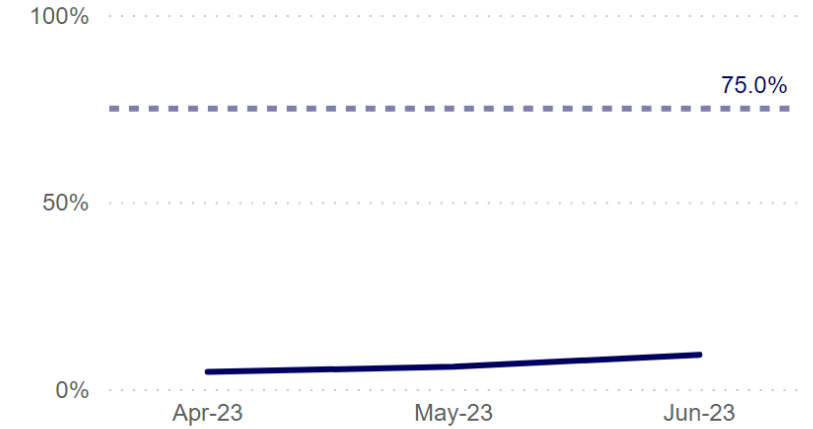
Checks (Cumulative)	16	21	33
Register	347	352	359
Uptake	4.6%	6.0%	9.2%
Declined (Cumulative)	0	0	1
Action Plan Achievement	100.0%	100.0%	90.9%

### Summary - 18+ Year Olds

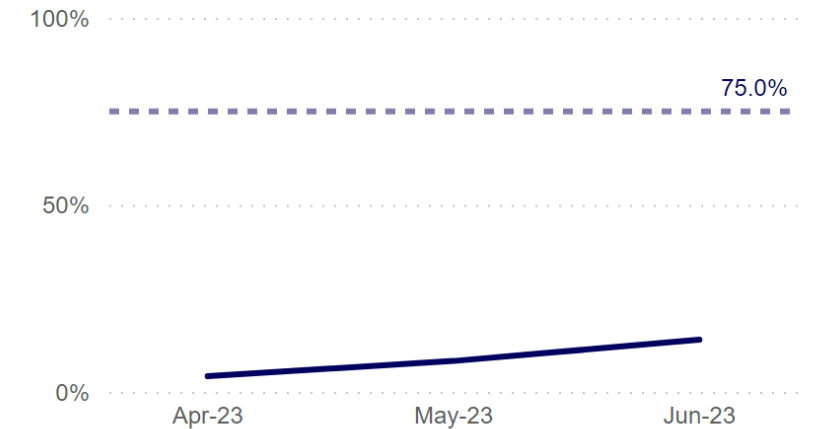
Apr-23 May-23 Jun-23

Checks (Cumulative)	177	348	589
Register	4,200	4,207	4,219
Uptake	4.2%	8.3%	14.0%
Declined (Cumulative)	2	4	11
Action Plan Achievement	82.5%	87.4%	90.0%

### 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 Page 1 of 2

### Learning Disability Annual Health Checks

#### SNEE ICB:

- Increase seen across Ipswich & East Suffolk practices for Health Action Plan completion as part of LD AHC (25.6% increase compared to this time last year). No significant change for West Suffolk (87.5% this year vs 88.8% last year).
- There are a few practices who have not completed any annual health checks yet and these are being closely monitored. Many practices combine the health checks with the flu vaccine, so figures are expected to climb from late September
- A dedicated learning disability health check support area for primary care health professionals is now live on the SNEE ICB website. A collection of nationally produced and locally adapted easy read documents, videos, toolkits, guidance documents and links and contact details to the Suffolk LD Liaison team
- SNEE LD annual health check steering group has been established and has developed a 'Don't miss out' poster which highlights annual health checks and health action plans. A communications plan is being developed to ensure that digital copies and posters are distributed across the SNEE ICS footprint. Local supermarkets, libraries and other local organisations will be approached to help to display the information.
- An annual health check patient experience survey is in development to help capture peoples' experiences of having their annual health check and health action plan.
- A number of quality improvement projects are underway to improve the quality of LD annual health checks. These include the LD friendly practice pilot with 3 GP surgeries in Ipswich & East Suffolk and West Suffolk, and the LD deep dive into GP registers.
- Peer educator programme continues whereby peer educators (people with a learning disability) talk to their peers through annual health check workshop about the importance of an annual health check. The peer educators will start visiting special schools/colleges in 2023/24 with the school nursing team.



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

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Learning Disability Annual Health Checks

Lowestoft and South Waveney PCN - Q1 23/24:

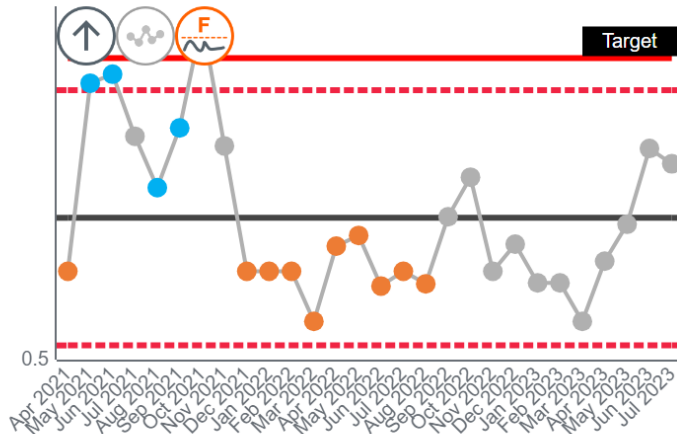
- There has been a 5% increase in the LD register sizes in Waveney practices (14+yrs)
- There has also been an increase in the number of Health Action Plans being done along with an annual Health Check (9% increase)
- Work is being undertaken to support practices, promote LD Health Checks to patients and professionals, gather feedback from Primary Care about the barriers to delivery, and agree a quality assurance plan.
- We have also been meeting with locality leads to review individual practice performance in Q1 23/24 and agree actions for them to follow up on with their practices.

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

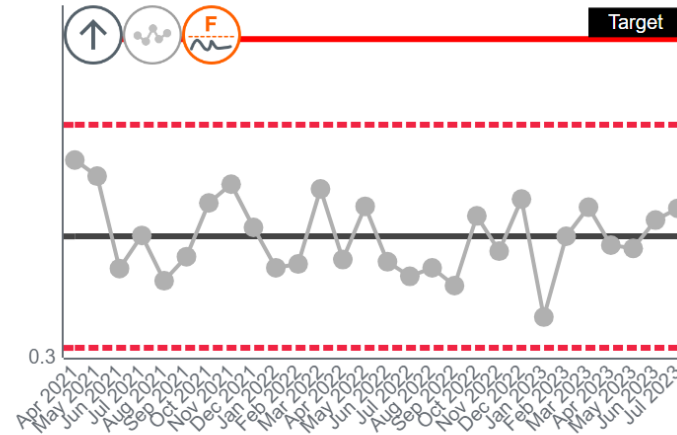
Data Source: NSFT

Indicator Name	Apr-23	May-23	Jun-23	Jul-23
Under 18 Emergency referrals assessed within 4 Hours	68.0%	72.9%	83.0%	81.0%
Under 18 Routine referrals assessed within 28 days	52.4%	51.7%	57.6%	60.0%
Under 18 Referrals treated within standard (18 weeks)	56.8%	47.7%	66.3%	75.4%
Referrals for service users aged 18 and over treated within standard: CFYP Service Line	90.0%	50.0%	76.3%	95.2%

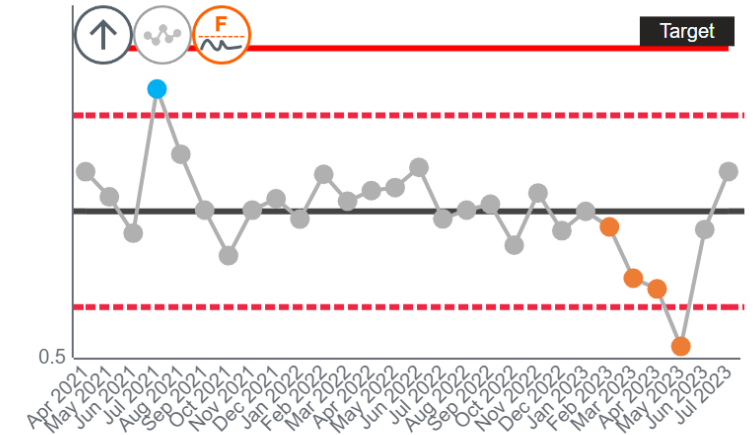
Emergency Referrals <4hrs (U18s)



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:

- East Youth Team has seen a reduction in numbers waiting assessment and wait times for assessment
- Child and Family Team East Deep dive – Awaiting assessment waitlist reviewed and is now more accurate. A significant number waiting to be discussed at PAD before they can move on – extra PAD to accommodate
- Pathways implementation underway
- Staff vacancy rate of 36% impacting on Child and Family Team activity.
- Waiting lists remain a challenge, coupled with vacancies
- East Youth Team review of caseload and allocation of work to ensure there are dedicated workers which improves consistency of recording also.
- Commenced interface meetings with the Emotional Wellbeing Hub and Child and Family Team which are proving successful in moving to where their needs are best met, it is also building better communication and understanding between the teams.
- Lorenzo guide provided to staff to increase consistency in the recording of appointments and outcomes. This has increased the accurate recording of contacts, having a positive effect on the data.

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

### Commentary – Page 2 of 2

#### Norfolk and Waveney ICB:

##### **Under 18 Emergency referrals assessed within 4 Hours**

Emergency referrals are assessed by CAIST (Children's Assessment and Intensive Support Team) in Waveney. Performance has steadily improved across N&W over the last 6 months from 65% to 81%. Over the last 18 months the CAIST team has had significant pressures with increased acuity and complexity of referrals and a significant increase in number of referrals during and post covid. As a result the ICB invested an additional £400K to increase senior leadership within the team to ensure clinicians felt supported and safe. To protect team members from burn out, the decision was made to reduce service delivery from 8am – 8pm 7 days a week to 9-5 Monday to Friday. CAIST has made great progress over the last 6 months, the team has filled many vacancies and will return to standard hours in January 2024.

##### **Under 18 Routine referrals assessed with 28 days**

Performance against this standard in Norfolk and Waveney is 43% (July 23). A significant number of referrals for people into NSFT across Norfolk and Waveney could have their needs met by other providers within the system. As a result, the N&W system is developing an integrated front door (IFD) to ensure all requests for support are allocated to the right pathway and service provider to meet need the first time. This will ensure that NSFT has more capacity to assess all routine referrals within 28 days. The IFD is due to go fully live in April 2024 and the N&W system is currently exploring how the interim arrangements for the IFD can support the triaging function within NSFT prior to April 24.

##### **Under 18 referrals treated within standard (18 weeks)**

Great Yarmouth and Waveney performance August 2023 - 90%. The ICB has funded YMCA to support CYP and families on waiting lists to access appropriate support sooner. The ICB has also commissioned a professional therapeutic pathway, which provides a range of alternative therapeutic treatments to support system waits.

##### **Referrals for service users aged 18 and over treated within standard: CFYP service line**

Great Yarmouth and Waveney performance August 2023 - 66%. NSFT and the ICB has funded a range of waiting list initiatives to provide access to therapeutic interventions, including Think CBT, UKCN and The Matthew Project. There has also been a focus on improving access to Talking Therapies for CYP aged 16-25 and 16-25 year olds accessing support within primary care through the roll out of enhanced recovery workers and Primary Care Workers, funded by Adult Community Transformation.

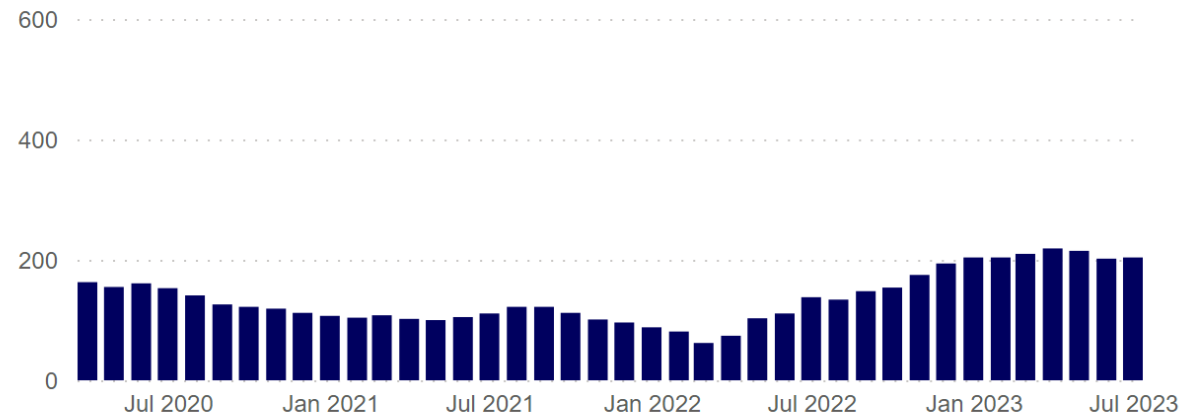
## 8.0 Children and young people have access to ADHD assessment within expected timeframes

Data Source: NSFT

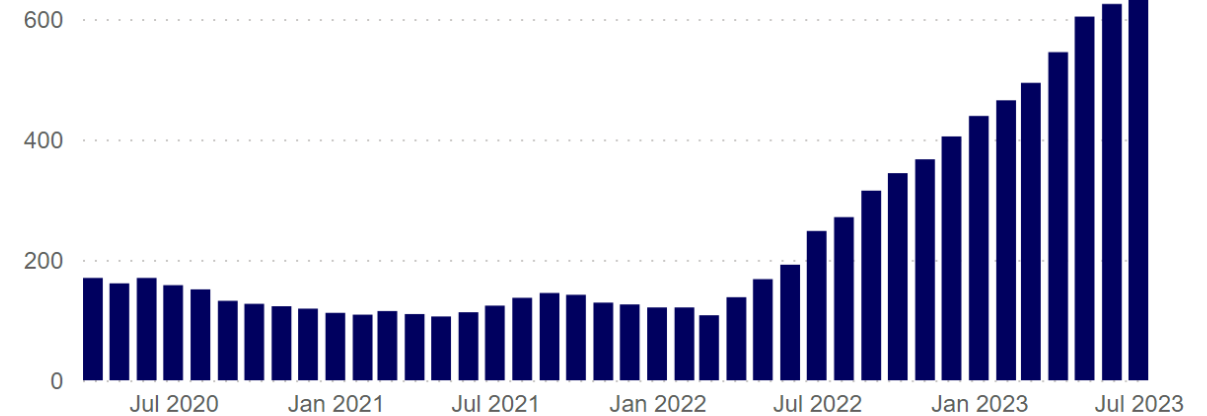
### ADHD (RTA) - Under 25s

Age Band		Apr-23	May-23	Jun-23	Jul-23
5-9	RTA - Incomplete	124	125	118	117
	Average Weeks Waited	20.9	21.5	22.3	22.1
10-15	RTA - Incomplete	86	81	78	80
	Average Weeks Waited	18.8	20.6	21.5	23.0
16-17	RTA - Incomplete	9	9	6	7
	Average Weeks Waited	24.4	28.8	36.4	35.5
18-24	RTA - Incomplete	326	389	423	450
	Average Weeks Waited	27.1	26.2	27.7	30.0
<b>Total</b>	<b>RTA - Incomplete</b>	<b>545</b>	<b>604</b>	<b>625</b>	<b>654</b>
	<b>Average Weeks Waited</b>	<b>24.4</b>	<b>24.5</b>	<b>26.0</b>	<b>27.8</b>

### ADHD (RTA - Incomplete) - Under 18s



### ADHD (RTA - Incomplete) - Under 25s



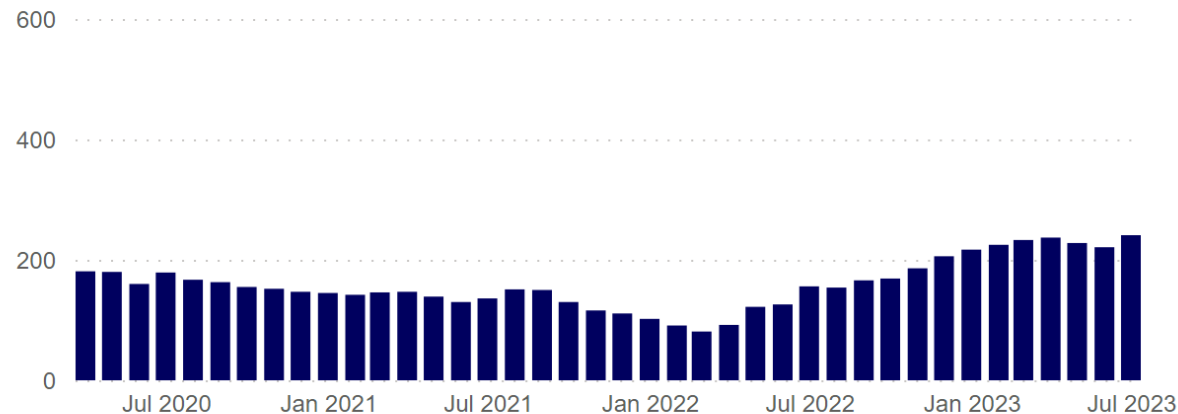
## 8.1 Children and young people have access to ADHD treatment within expected timeframes

Data Source: NSFT

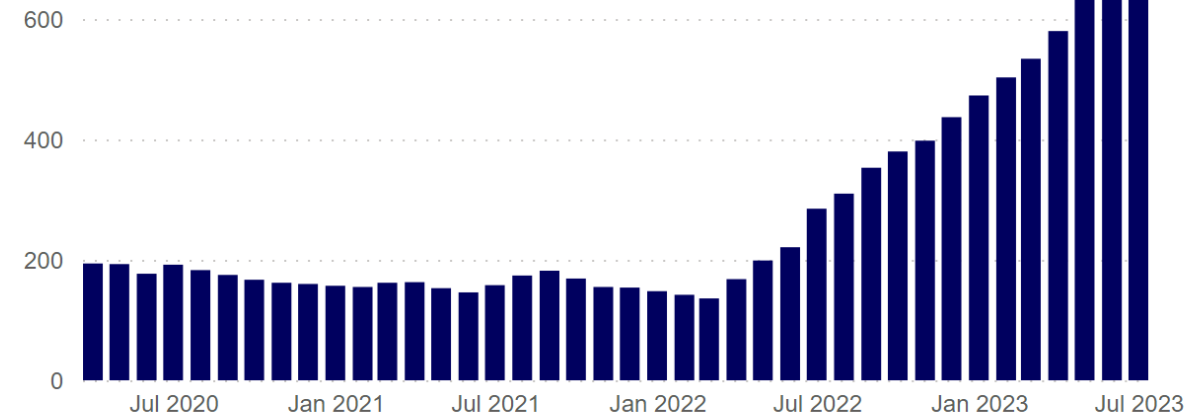
### ADHD (RTT) - Under 25s

Age Band		Apr-23	May-23	Jun-23	Jul-23
5-9	RTT - Incomplete	133	131	128	138
	Average Weeks Waited	21.6	22.0	23.8	25.6
10-15	RTT - Incomplete	93	87	85	94
	Average Weeks Waited	19.4	21.3	22.3	24.1
16-17	RTT - Incomplete	11	10	8	9
	Average Weeks Waited	22.6	27.5	31.0	31.9
18-24	RTT - Incomplete	343	406	440	470
	Average Weeks Waited	28.7	27.8	29.2	31.5
<b>Total</b>	<b>RTT - Incomplete</b>	<b>580</b>	<b>634</b>	<b>661</b>	<b>711</b>
	<b>Average Weeks Waited</b>	<b>25.5</b>	<b>25.7</b>	<b>27.3</b>	<b>29.4</b>

### 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:

- Online Conners screening now being mobilized in ADHD which will increase efficiency of collecting pre assessment data.
- ADHD team impacted by the system wide historical increase in referrals which are now in the pre-screening phase undertaken by the team.

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.
- 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.
- Service, together with stakeholders, exploring the possibility of outsourcing some assessments and treatments.



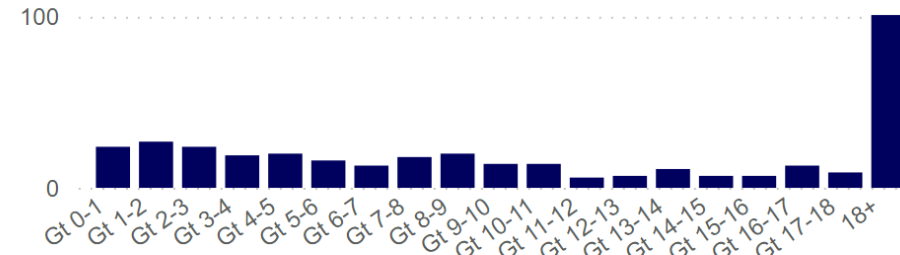
## 8.2 Children and young people have access to ASD assessment within expected timeframes

Data Source: Integrated Community Paediatric Services (ICPS)

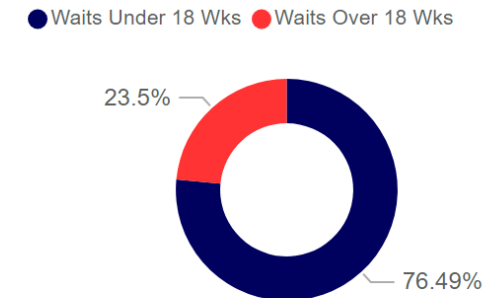
Patients identified as having Socio-Communication difficulties (Under 11s)

Month	Total Waiting	Max Waiting Time (wks)	Average Waiting Time (wks)	No. Waiting over 18 Weeks	% Wait over 18 Weeks
Dec-22	348	54.7	10.8	61	17.5%
Jan-23	322	59.1	11.5	59	18.3%
Feb-23	317	63.1	12.7	62	19.6%
Mar-23	342	67.6	13.6	104	30.4%
Apr-23	360	47.6	14.6	129	35.8%
May-23	343	49.3	14.4	119	34.7%
Jun-23	356	50.0	14.5	115	32.3%
Jul-23	370	50.0	13.3	87	23.5%

U11s Waits by Weeks (latest month)



% Waiting Over 18 Weeks (latest month)



Data Source: NSFT

Youth Autism (11-17s) - Weeks Waiting for Assessment

Month	Current ASD Waitlist	Average Wait of those on the Waitlist not yet Assessed (weeks)	Maximum Wait in Weeks not yet Assessed	Average Wait Time from Referral to Assessment (weeks)	Maximum Wait in Weeks from Referral to Assessment
Sep-23	223	42	98	55	85

## 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.

ADYSS (11-17), Suffolk CFYP, Norfolk and Suffolk NHS Foundation Trust:

- Team training regarding data and completion of all necessary fields on Lorenzo to accurately reflect the activities of the team
- Aligning administrative and caseload management with ADHD Service to increase effectiveness

**Great Yarmouth & Waveney NDD/Community Paediatric Service**

Service			Q2			Q3			Q4			Q1		
Ref	Performance Indicator		Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23
1	Total number of CYP waiting on the pathway		892	927	986	1043	1179	1121	1182	1249	1305	1344	1406	1408
		Waveney approximate 48%	428	445	473	501	566	538	567	600	626	645	675	676
2	Number of patients having their 1st action (where that action was during the month specified) **wait is measured from referral date to date of first action on waiting list	**wait <18 weeks	27	6	14	24	31	13	17	10	19	23	14	27
		**wait >=18 weeks	52	30	44	79	82	69	102	91	103	87	105	182
		Total	79	36	58	103	113	82	119	101	122	110	119	209
3	Number of patients being dagnosed (where diagnosis was during the month specified) **wait is measured from referral date to diagnosis date	**wait <18 weeks	0	1	1	0	1	1	5	3	1	1	1	3
		**wait >=18 weeks	28	43	23	24	38	33	35	23	17	34	37	56
		Total	28	44	24	24	39	34	40	26	18	35	38	59
5	EHCP advice requests completed within 2 weeks		Information already given by Emma Caswell											
6	New information and advice for EHCP advicecompleted within 6 weeks		Information already given by Emma Caswell											

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

### Commentary

#### Great Yarmouth & Waveney NDD/Community Paediatric Service

- Newberry clinic has observed a significant change to pathway performance since 2020/21.
- At that time, waits to discharge for ASD/ADHD diagnosis was 26 weeks. Following the retirement of the Community Paediatrician, a reduction in weekly clinics and a marked increase in monthly referrals, average waits to first appointment are 16 months with waits to discharge of up to 2.5 years.
- Newberry has recently commenced transfers to independent providers as part of a waiting list initiative and continues to work with the ICB on its transformation programme.

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

Data Source: Suffolk Community Services Monthly Report Pack

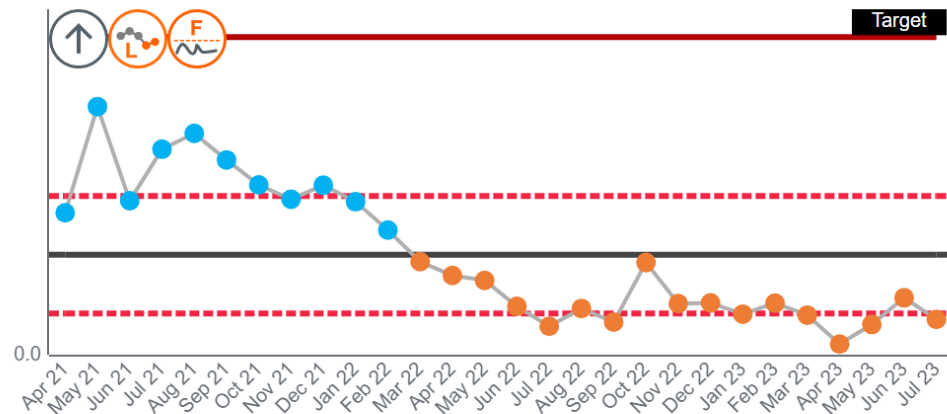
### Consultant-Led Paediatric Services (Target 95%)

	Apr-23	May-23	Jun-23	Jul-23	Total
Seen within 18 weeks	3	9	15	12	39
Total Seen	45	73	75	87	280
% Seen within 18 weeks	6.67%	12.33%	20.00%	13.79%	13.93%

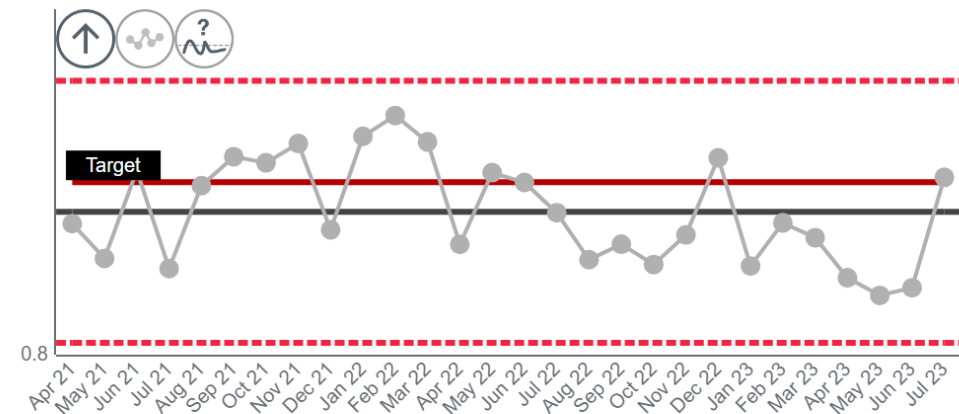
### Non-Consultant-Led Paediatric Services (Target 95%)

	Apr-23	May-23	Jun-23	Jul-23	Total
Seen within 18 weeks	191	273	222	245	931
Total Seen	216	313	253	257	1,039
% Seen within 18 weeks	88.43%	87.22%	87.75%	95.33%	89.61%

### 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.

Commentary for non-consultant led services follows from 9.2

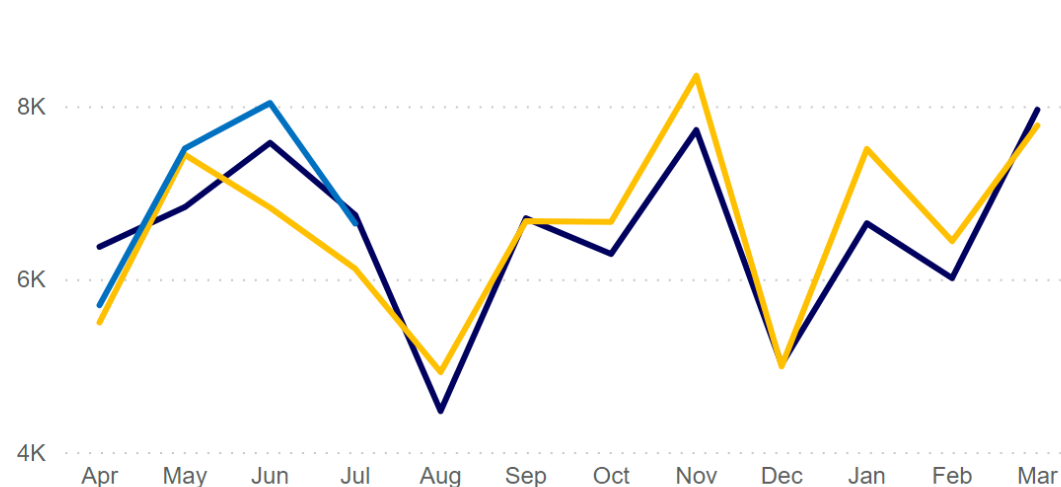
## 9.1 Contacts (number and method) of community paediatric services with children and young people

Data Source: Suffolk Community Services Monthly Report Pack

Service	Apr-23	May-23	Jun-23	Jul-23	Total
Paediatric Speech & Language Therapy	2,065	3,108	3,692	2,695	11,560
Community Children's Nursing Team	1,747	1,951	1,913	1,773	7,384
Paediatric Physiotherapy	726	1,020	1,039	817	3,602
Paediatric Occupational Therapy	534	610	577	591	2,312
Audiology	349	409	479	377	1,614
Paediatric Psychology	233	348	282	333	1,196
Suffolk Communication Aids Resource Centre	45	66	56	58	225
<b>Total</b>	<b>5,699</b>	<b>7,512</b>	<b>8,038</b>	<b>6,644</b>	<b>27,893</b>

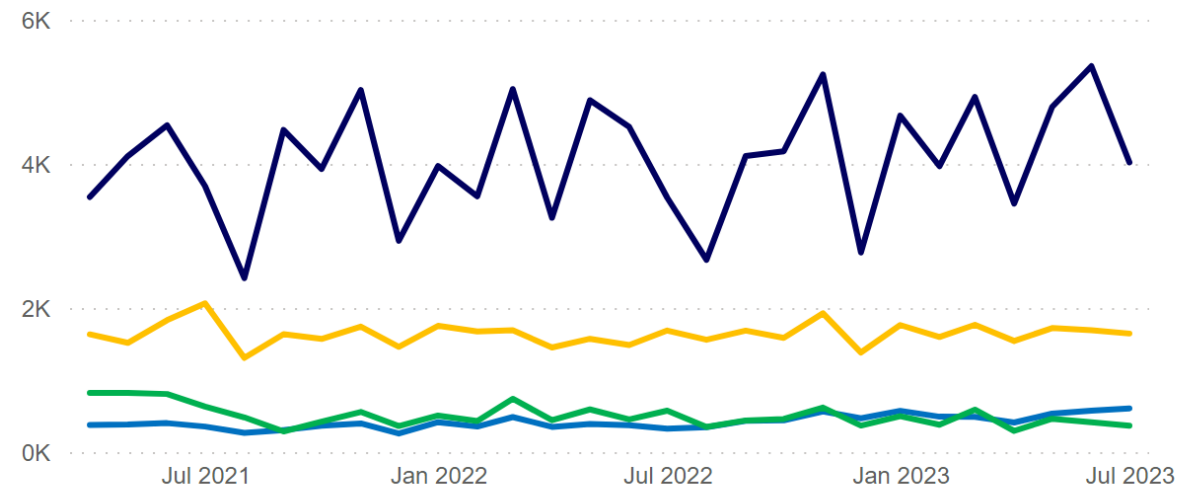
### Contacts by Year

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:

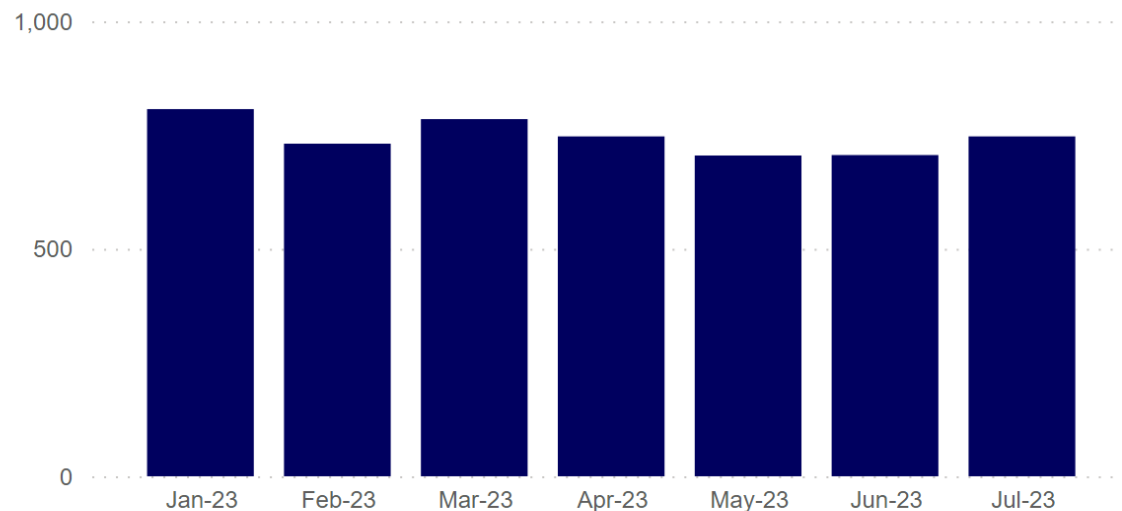
- This chart highlights all clinically relevant activity undertaken in the ICPS services, not only SEND
- Activity generally increasing across services

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

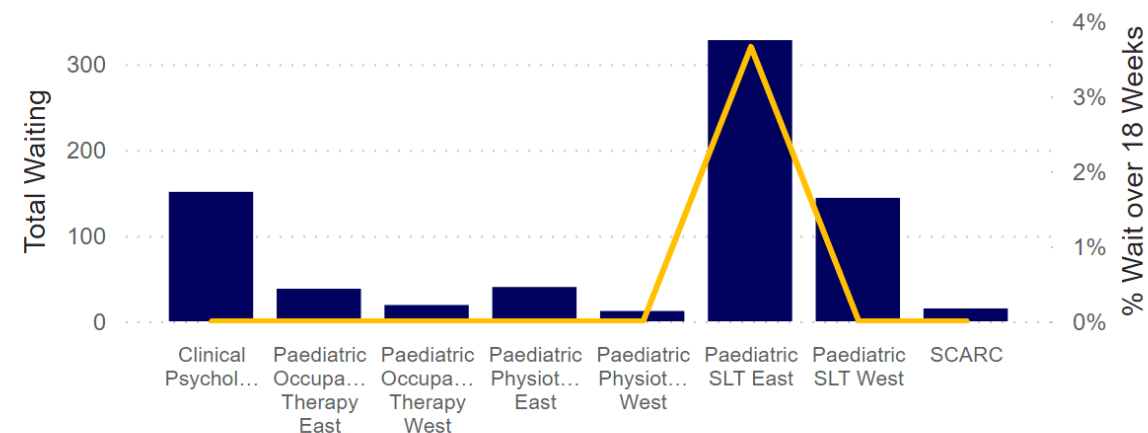
Data Source: Integrated Community Paediatric Services (ICPS)

Therapy	Total Waiting	Max Waiting Time (wks)	Average Waiting Time (wks)	No. Waiting over 18 Weeks	% Wait over 18 Weeks
Clinical Psychology	151	21.71	5.82	0	0.00%
Paediatric Occupational Therapy East	38	13.57	5.88	0	0.00%
Paediatric Occupational Therapy West	19	10.57	3.90	0	0.00%
Paediatric Physiotherapy East	40	12.57	4.80	0	0.00%
Paediatric Physiotherapy West	12	11.86	8.08	0	0.00%
Paediatric SLT East	328	35.71	10.07	12	3.66%
Paediatric SLT West	144	25.86	6.60	0	0.00%
SCARC	15	17.00	5.47	0	0.00%

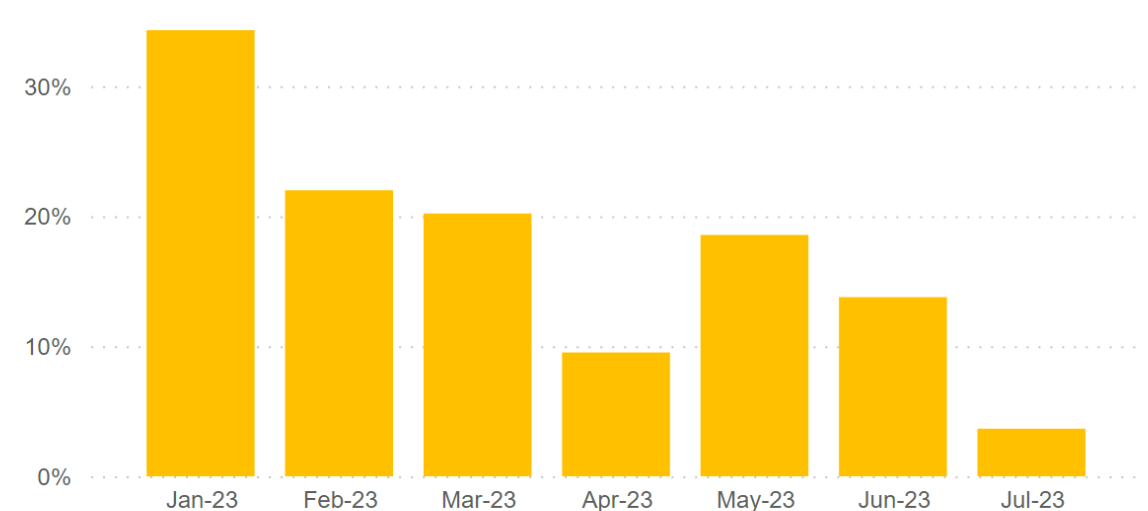
### Total Waiting



● 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

### Norfolk and Waveney Speech and Language Therapy Service 22/23 Year 2

Norfolk and Waveney Speech and Language Therapy Service 22/23 Year 2				Q1			Q2			Q3			Q4		
Ref	Key Performance Indicator		Target	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
KPI-001	% of CYP waiting <18 Weeks for a SaLT assessment	Num	30%	9	68	52	57	47	50	59	50	43	74	87	75
		Denom		124	157	149	146	151	144	163	150	126	169	181	180
		%		7%	43%	35%	39%	31%	35%	36%	33%	34%	44%	48%	42%
KPI-002	% of CYP seen within 12 weeks of assessment for intervention	Num	50%	3	9	4	2	1	1	6	7	5	8	5	5
		Denom		3	9	4	2	2	2	7	9	5	10	5	8
		%		100%	100%	100%	100%	50%	50%	86%	78%	100%	80%	100%	63%
KPI-005	Existing information for EHC needs assessment requests: within 2 weeks of request	Num	100%	86	51	61	81	115	58	68	90	79	91	95	115
		Denom		89	56	63	81	119	65	68	107	83	97	99	122
		%		97%	91%	97%	100%	97%	89%	100%	84%	95%	94%	96%	94%
KPI-006	New advice and information for the EHC needs assessment: within 6 weeks of request	Num	75%	17	29	7	5	14	24	8	12	6	13	14	30
		Denom		48	61	45	40	46	48	38	55	38	53	49	62
		%		35%	48%	16%	13%	30%	50%	21%	22%	16%	25%	29%	48%
KPI-009	% of parents who report high level of satisfaction with elements of Specialist intervention delivered by the Service	Num	75%	2	2	3	1	2	1	38	3	5	6	4	3
		Denom		2	2	3	2	8	1	46	3	6	6	4	3
		%		100%	100%	100%	50%	25%	100%	83%	100%	83%	100%	100%	100%
ACT-002	Number of open referrals in service			384	391	363	380	372	349	387	406	369	418	413	384
ACT-006	Number of calls into the service			5	9	9	10	5	6	10	16	7	15	22	15

			Q2			Q3			Q4			Q1		
Ref	Performance Indicator		Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23
1	Total number of CYP waiting on the pathway		7	6	10	14	19	16	16	21	2	6	6	10
2	Number of patients having their 1st action (where that action was during the month specified) **wait is measured from referral date to date of first action on waiting list	**wait <18 weeks	25	13	11	6	12	17	6	12	27	8	29	28
		**wait >=18 weeks	9	2	5	6	11	11	10	6	24	21	14	10
		Total	34	15	16	12	23	28	16	18	51	29	43	38
3	Number of patients being discharged (where discharge was during the month specified) **wait is measured from referral date to close date of waiting list	**wait <18 weeks	0	2	2	3	0	4	0	2	11	0	3	3
		**wait >=18 weeks	40	24	17	17	20	25	15	25	34	35	18	20
		Total	40	26	19	20	20	29	15	27	45	35	21	23
4	Outcomes for CYP		For DCB, we use the movemnet ABC tool at the start of an assessment to measure what support they need and will use it again at the end of treatment to measure if the child has improved. No other measurement tool is used currently.											
5	EHCP advice requests completed within 2 weeks		Information already given by Emma Caswell											
6	New information and advice for EHCP advice completed within 6 weeks		information already given by Emma Caswell											

## Great Yarmouth & Waveney Physiotherapy Service

Service			Q2			Q3			Q4			Q1		
Ref	Performance Indicator		Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23
1	Total number of CYP waiting on the pathway		15	26	29	39	27	26	23	21	25	28	12	22
2	Number of patients having their 1st action (where that action was during the month specified) **wait is measured from referral date to date of first action on waiting list	**wait <18 weeks	29	25	24	28	35	24	31	12	17	13	18	14
		**wait >=18 weeks	21	16	20	17	22	13	33	29	22	28	10	20
		Total	50	41	44	45	57	37	64	41	39	41	28	34
3	Number of patients being discharged (where discharge was during the month specified) **wait is measured from referral date to close date of waiting list	**wait <18 weeks	5	6	6	4	8	5	10	6	2	2	0	5
		**wait >=18 weeks	13	20	23	10	42	13	80	45	22	37	33	33
		Total	18	26	29	14	50	18	90	51	24	39	33	38
4	Outcomes for CYP		This depends on what the child has been referred for. A range of outcome measures are used as well as GAS goal setting											
5	EHCP advice requests completed within 2 weeks		Information already given by Emma Caswell											
6	New information and advice for EHCP advice completed within 6 weeks		Information already given by Emma Caswell											

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

### Commentary

#### Norfolk and Waveney ICB:

- Speech & Language Therapy Service waits to initial assessment and treatment are steadily increasing.
- In 2021, the average wait for a new referral was in excess of two years, reflective on multiple waiting lists and a legacy of conflicting contracts across the footprint. The shift to a single provider model has had a good impact on children and young people.
- Average waits in 2023 are now 15 months and although too long, show a positive change. From Q1 (August 23 onwards) CCS is doubling its target trajectory of waits under 18 weeks from 30% to 60% and will increase the treatment target from 50 to 70%. These temporary targets, which represent a natural conflict in managing new demand and meeting existing EHCP provision, will continue to increase over time.
- The recovery plan is working, although not as quickly as we would want.
- Occupational Therapy Service - Newberry clinic has observed a significant change to pathway performance since 2020/21.
- Focus of work for 18 months has been creation of a digital universal library on JON. Professional platform went live in the Spring with Parent access to follow in the Autumn 23/24.
- Additional therapists are being recruited and staff trained in Sensory Integration Therapy. Families receive advice while waiting.
- Great Yarmouth & Waveney Physiotherapy Service has not been a key area of development although further co-production with families is planned to develop and create resources for families referred.

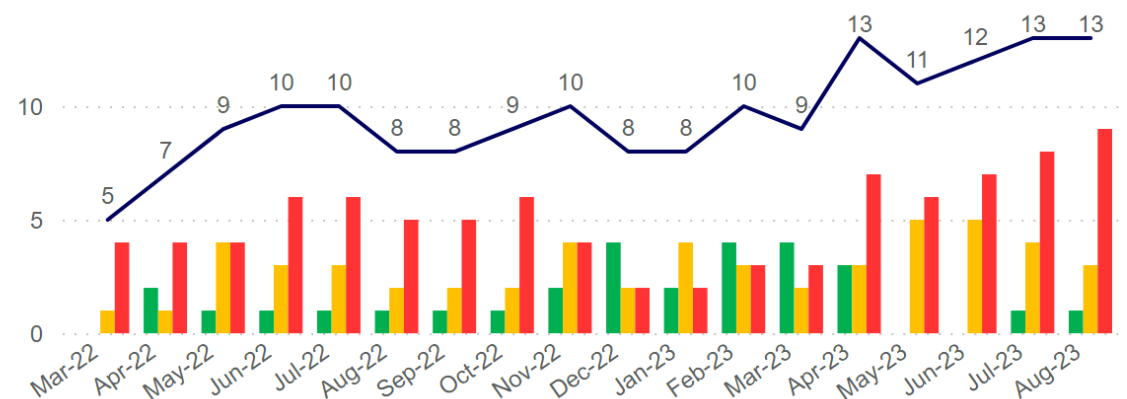


10.0 Children and Young people (0-18) with SEND have a holistic and independently led review of their needs where accessing tier 4 care

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



**Green RAG** - The CYP has previously been in a learning disability or mental health inpatient setting but is currently in the community or a residential placement and there are no concerns.

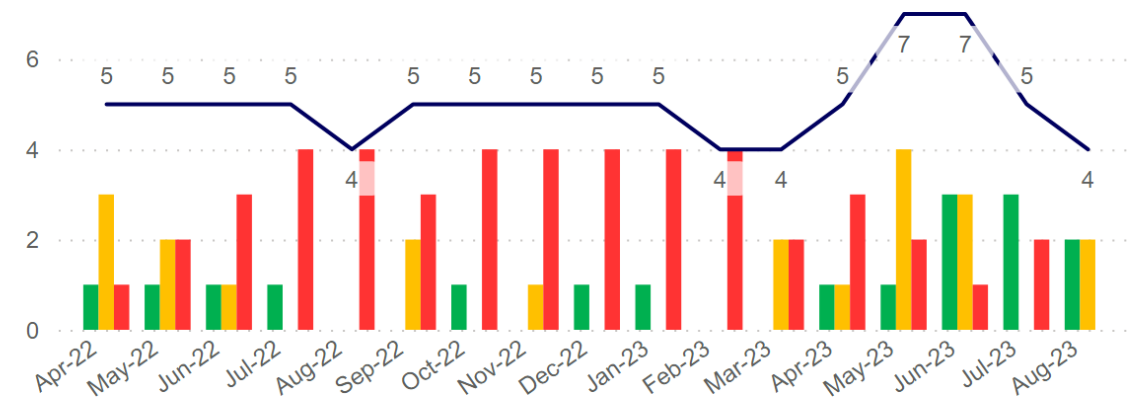
**Amber RAG** - CYP is starting to display challenging behaviour which existing services are struggling to manage.

**Red RAG** - Imminent risk of being admitted to hospital; displaying signs of challenging behaviour that are significantly challenging family and existing support services.

\*Please note in April 2023 the Cheshire and Wirral's risk stratification tool; the Children and Young People Dynamic Support Database Clinical Support Tool (CYP DSD-CST), was introduced as part of the DSR review. This is in line with the recommendations outlined in the new Dynamic Support Register and Care (Education) and Treatment Review Policy (2023) and compliancy date of 1<sup>st</sup> May 2023. This led to some CYP's RAG ratings changing and subsequently the number of those rated red increased.

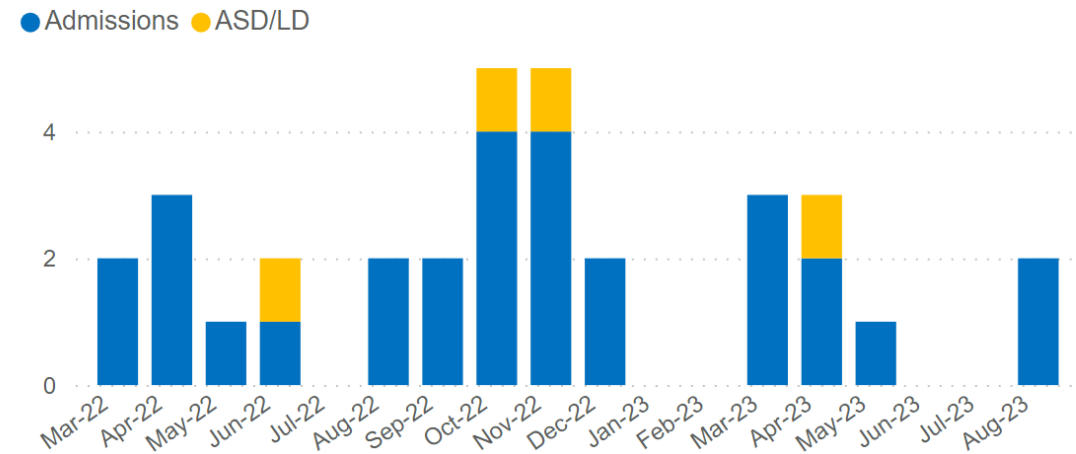
## Dynamic Support Register (DSR) RAG Ratings (Waveney)

● Green ● Amber ● Red ● No. of CYP on DSR



## 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



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.

Tier 4 & TCP Admissions: Mar 22 to Aug 23

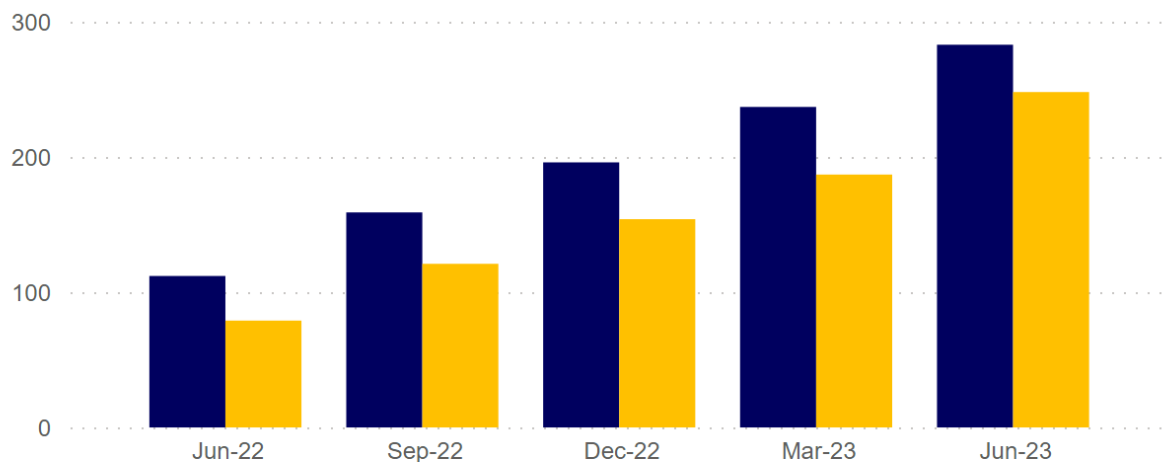
## 11.0 Number of young people (U18s) accessing a health funded personal health budget

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	283	53	37	193
How many children receiving continuing care had a personal health budget YTD	53	53	0	3
How many children and young people with education, health and care plans had a personal health budget YTD	36	32	0	4
How many children with a learning disability and/or autism had a personal health budget in the YTD	37	32	0	5
.....of those, how many children were eligible for section 117 aftercare under the Mental Health Act?	2	0	0	2
How many children who have a primary mental healthcare need had a personal health budget YTD	19	0	0	19
.....of those how many children were eligible for section 117	5	0	0	5
How many children have a personal wheelchair budget YTD	176	0	2	174
How many other children had a personal health budget YTD	35	0	35	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)

● Waveney

