Report to:	Health and	Date of Meeting:	9 th March 2022
	Wellbeing Board		
Subject:	Subgroup Updates		
Report of:	Director of Public Health	Wards Affected:	All.
Cabinet Portfolio:	Cabinet Member He	alth and Wellbeing	
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

This report is to present to the Health and Wellbeing Board a summary of activity from the five identified subgroups. This is activity since the last report received by the board on the 8th of December 2021

Recommendation:

The updates are received and noted by the Board

Reasons for the Recommendation(s):

The Board is asked to routinely receive and note updates to ensure compliance with required governance standards

Alternative Options Considered and Rejected: (including any Risk Implications)

Not applicable.

What will it cost and how will it be financed?

(A) Revenue Costs

There are no additional revenue costs identified within this report

(B) Capital Costs

There are no additional capital costs identified within this report **Implications of the Proposals:**

Resource Implications (Financial, IT, Staffing and Assets):		
Legal Implications:		

Equality Implications:

There are no equality implications

Contribution to the Council's Core Purpose:

Protect the most vulnerable: Ensure the Health Wellbeing Board has oversight of Subgroup activity and its impact

Facilitate confident and resilient communities: Ensure the Health Wellbeing Board has oversight of Subgroup activity and its impact

Commission, broker and provide core services: Ensure the Health Wellbeing Board has oversight of Subgroup activity and its impact

Place – leadership and influencer: Ensure the Health Wellbeing Board has oversight of Subgroup activity and its impact

Drivers of change and reform: Ensure the Health Wellbeing Board has oversight of Subgroup activity and its impact

Facilitate sustainable economic prosperity: Not applicable

Greater income for social investment: Not applicable

Cleaner Greener: Not applicable

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director Corporate Resources & Customer Services (FD.6737/22.) and the Chief Legal & Democratic Officer (LD.4737/22) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Not applicable.

Implementation Date for the Decision

Immediately following the Board.

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Appendices:

Background Papers:

There are no background papers available for inspection.

1. Introduction

As agreed at the December 2019 meeting of the Health and Wellbeing board the Board has agreed to receive a standard agenda item of summarised activity of its formal sub groups.

The subgroups are identified as: the Children & Young People Partnership Board, the SEND Continuous Improvement Board, the Adults Forum, the Health and Wellbeing Board Executive and the Health Protection Forum

2. Children and Young People Partnership Board (CYPPB):

Meetings of the CYPPB are now bi-monthly and the last meeting was held on 14th December 2021. The next meeting is scheduled to take place on 9th February 2022, but the timing of this report means the detail will need to be included in the next update to the Health and Wellbeing Board.

At the meeting the following items were discussed: Education, Employment and Training deferred from the previous meeting, Early Help Partnership Board update and a report on Mental Health Resilience. At every meeting the Risk Register is reviewed.

The first report outlined how the Council was meeting the priorities of the Children and Young People's Plan themes of Achieving and the statutory duties placed on local authorities with regard to education, employment, and training. This is delivered through a commissioned service, Career Connect and has been since December 2018. The report outlined the objectives and how they track young people with both national and also local measures. There is some innovative work in this area, and they start working earlier with young people in Yr 9, 10 and 11. This is a partnership approach and local stakeholders are involved. The report went on to note current performance and the improvement in % of some indicators but there is more work to do e.g. they now look at Elective Home Educated (EHE). Work has continued to reduce the Not Known cohort and understand the vulnerable groups. In October 2020 Sefton were 4th best Local Authority in the national rankings from 150+ and this year they are 3rd best with only West Berkshire and Cheshire East ranked better. A monthly snapshot is provided, and the service is tracking 5600 people. They track all Yr 11 pupils including those in neighbouring Boroughs and it should be noted that employment without training is not Measured. In the Liverpool City Region (LCR) there were 47% not known but we only had 23 young people not known. Work is started early; letters are going out now to the current Yr 11 in order for those that need support are identified and in particular those that are further away from the market. Creative solutions are explored. The Board raised queries in connection with vulnerabilities and it was noted there are 54 KPIs locally as well as a number of case studies provided by the provider to show performance.

A presentation was provided on the Early Help Partnership Board on the work they undertake. A new Chair was in place in March 2021, Anne Tattersall from Merseycare NHS Trust, and the work that has taken place since then includes planning, mapping, a forward plan and also the ACES group work. The partnership has a standard agenda

and a number of sub-groups, but these will be reviewed. The agenda also includes case studies and examples were provided for this Board to note. The presentation concluded with Headlines and noted it is an active engaged partnership. Work is ongoing to update the dashboard to include shared understanding of early help. The Board discussed the terminology used such as children in need of help and protection which is different in social care to early help and the understanding of whether these children are in need of universal services or prevention, some children may be on the edge of safeguarding and there iswork taking place around threshold levels and definitions will be clear about where the child is held. There is a shadow board, made up of young people who meet at Litherland Family Wellbeing Centre, and there are sessions planned for parents to help inform the work. These shadow boards are engagement sessions.

Margaret Jones, Director of Public Health, provided a report on Mental Health Resilience which was to update the Board regarding activities of partners in the development and promotion of mental health resilience amongst children and young people in Sefton. It was acknowledged by her that the report was not exhaustive in listing services and there are others working in this area. The report was to raise awareness of why resilience is important, not a service but how we build this into what we do. Margaret Jones went on to state that we are not born with resilience but develop the skills over time, although we do need to work on the causes. The report outlined ways we can work to build resilience and also some of the services such as Mental Health Support Teams (schools) which help us to target support in Sefton schools. New services are planned such as apilot Integrated Children's Wellness Service which is a similar offer to Living Well Sefton but for young people. These will be evaluated to ensure they are delivering the impact we want. The Board noted that this work ties into early help work and that the Mental Health Support Teams only started this year and we will start to see the impact on behaviour, and we should be normalising some behaviours. It is about being able to face up to challenges and what level of support is required. A Headteacher Rep indicated they are seeing more challenges in school and they are getting used to the landscape, all staff in his school have undertaken ACES training and they have agreed which pupils will need this approach.

The Board also receives notes from the following groups for information if they had met: SEND CIB
Early Help
Emotional Health and Wellbeing Group
Community Safety Partnership
Provider Alliance

3. SEND Continuous Improvement Board (SENDCIB)

Meetings of the SENDCIB are also now bi-monthly (with a review scheduled for July 2022) and there have been two meetings since the last update, one on 23rd November 2021 and one on 11th January 2022.

At the November meeting the following items were discussed: New Improvement Plan, Career Connect SEND Services, ASD/ADHD, Preparation for the SEND Parent Carer Survey, Review of Terms of Reference for the Board and its subgroups and Sequencing of Subgroup Reports.

At a previous meeting of the Board it was agreed that a new improvement plan would be developed, and the approach and timetable would be brought back to the Board for agreement. A report was received which outlined the themes for the refreshed plan and new governance arrangements for delivery of the plan. The proposal was to set the plan along the lines of Education, Health, Social Care and Co-Production. This would include those items the Board had identified at an earlier meeting such as EHCP timeliness and quality, waiting lists and Designated Clinical Officer oversight and confidence of parents in the system as well as further recommendations e.g. education was more than EHCPs. There was also a proposal that we stand down the SEND Performance Sub-Groups as leads should attend the Board and be accountable directly to them. It was agreed that we should continue to receive reassurance with regular reports, so the main board has oversight. The Terms of Reference were also brought to the meeting for review based on these recommendations and it was agreed to consider further the move to bi-monthly meetings of the Board in January 2022.

The item on Career Connect outlined the Sefton SEND Services for 16-17-year olds which their destination such as in learning, NEET, the report was noted.

An overview of ASD and ADHD Commissioned Pathways and Support currently available to children, young people and their families was received. This report provided an overview and update of the ASD and ADHD health commissioned services and support currently available to children, young people, and their families. There are two pathways one for 1-18 years and the other for 18-25 years.

This report provided information on referral pathways and how they are monitored, demand including current performance and trajectories, Interdependence with other services SALT, OH, CAMHS etc, Support whilst waiting for a diagnosis, pathways following a diagnosis, links between children and adult pathway, key issues and challenges and next steps for the Board to consider.

A SEND Parent Carer Survey is due to be carried out in 2022 and a report was presented on the options including timescales which were agreed. The proposed timing is for the survey to go live in March 2022.

At the January 2022 meeting the following items were discussed: the Improvement Plan, Mental Health in Schools, and the deferred review of the SENDCIB Terms of Reference.

The Improvement Plan was presented, and it was noted that at the last Board it had been agreed that the plan would be in four parts Education, Health, Social Care and Coproduction and Communication. Following the SEND Performance Meeting and agreed at the SEND System Leadership, it was recommended that the plan should show a more partnership approach by listing partners actions with regard to EHCPs, Waiting Times, Service Specific improvements and keeping the overarching theme of Co-Production and Communication. It was noted there were still KPIs to be added depending on approval of the plan. The Board noted the change in style and approach and overall felt that this was a better structure as all areas are in a jointly owned plan and Cath Hitchen, DfE Advisor, offered to assist in how we represent the impact. This approach was agreed, and the final draft will be presented the next Board together with performance data.

A report on Mental Health in Schools provided information regarding activities of partners in the development and promotion of mental health resilience amongst children and young people in Sefton. The report outlined the current positive mental wellbeing promotion activity in Sefton including work in schools and colleges, Mental Health

Support Teams (MHSTs), DfE Training offer within all schools, School Mental Wellbeing Survey, KOOTH, Sefton Young Persons Emotional Wellbeing Toolkit and the Children and Young People's Emotional Wellbeing Strategy. It was noted that some schools had taken training in Trauma Informed Practice. There is also work taking place in the strategic safeguarding area around online safeguarding including with Designated Safeguarding Leads (DSL) in schools, as this is beyond child protection issues and looks at emotional networks and online safety. The report concluded with the planned work which includes extension of Sefton's 121 project and an Integrated Children's Wellness Service.

The Terms of Refence were presented again for the Board and it was agreed the meetings would move to bi-monthly with a review of the frequency to take place in six months.

The risk register is reviewed at each meeting and it was agreed that this would need to be updated once the improvement plan is signed off.

4. Adults Forum

The Forum has not met since the last report however the next meeting will be held on the 22^{nd of} March 2022.

5. Health and Wellbeing Board Executive

The Executive has met once since the last report on the 9^{th of} December 2021. The Executive received and noted performance and financial reporting. The group also discussed the recent Cheshire and Merseyside Health Care Partnership maturity assessment process, the emerging governance proposals for the Sefton place Based Partnership arrangements and shared estate models.

6. Health Protection Forum

The Stakeholder Outbreak Management Board on Friday 12th November 2021 agreed that the wider partnership Outbreak Board can be incorporated into the Health Protection Forum. An initial session with core members of this board is scheduled for April 2022. This will focus on terms of reference and agreeing a workplan for the group.

7. Conclusion:

The Board is asked to receive and note the contents of the report and to await further updates as part of the standard agenda going forward