



PEOPLE SCRUTINY COMMITTEE

THURSDAY, 17 NOVEMBER 2022

10.30 am COUNCIL CHAMBER, COUNTY HALL, LEWES

MEMBERSHIP - Councillor Johanna Howell (Chair)
Councillors Sam Adeniji, Charles Clark, Penny di Cara, Chris Dowling,
Kathryn Field, Nuala Geary, Wendy Maples, Stephen Shing, John Ungar
(Vice Chair) and Trevor Webb

Nicola Boulter, Parent Governor Representative
Maria Cowler, Roman Catholic Diocese Representative
Trevor Cristin, Diocese of Chichester Representative
John Hayling, Parent Governor Representative

A G E N D A

1. Minutes of the previous meeting held on 27th September 2022 (*Pages 3 - 14*)
2. Apologies for absence
3. Disclosures of interests
Disclosures by all members present of personal interests in matters on the agenda, the nature of any interest and whether the member regards the interest as prejudicial under the terms of the Code of Conduct.
4. Urgent items
Notification of items which the Chair considers to be urgent and proposes to take at the appropriate part of the agenda. Any members who wish to raise urgent items are asked, wherever possible, to notify the Chair before the start of the meeting. In so doing, they must state the special circumstances which they consider justify the matter being considered urgent.
5. Adult Social Care Workforce Update (*Pages 15 - 44*)
6. Reconciling Policy, Performance and Resources (RPPR) (*Pages 45 - 126*)
7. Work Programme (*Pages 127 - 152*)
8. Elective Home Education (EHE) in East Sussex (*Pages 153 - 156*)
9. Any other items previously notified under agenda item 4

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9 November 2022

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PEOPLE SCRUTINY COMMITTEE

MINUTES of a meeting of the People Scrutiny Committee held at Council Chamber, County Hall, Lewes on 27 September 2022.

PRESENT: Councillors Sam Adeniji, Charles Clark, Penny di Cara, Chris Dowling, Ian Hollidge (substituting for Councillor Nuala Geary), Johanna Howell (Chair), Carolyn Lambert (substituting for Councillor Kathryn Field), Wendy Maples, Stephen Shing, John Ungar (Vice Chair), Trevor Webb and Ms Maria Cowler (Roman Catholic Diocese Representative).

LEAD MEMBERS: Councillor Carl Maynard, Lead Member for Adult Social Care and Health
Councillor Bob Bowdler, Lead Member for Children and Families
Councillor Bob Standley, Lead Member for Education and Inclusion, Special Educational Needs and Disability (ISEND)

ALSO PRESENT: Mark Stainton, Director of Adult Social Care and Health
Alison Jeffery, Director of Children's Services
Ian Gutsell, Chief Finance Officer
Michaela Richards, Head of Safer Communities
Lucy Spencer, Safeguarding Adults Board (SAB) Development Manager (Interim)
Chris Robson, Independent Chair of the East Sussex Safeguarding Children Partnership
Beth McGhee, Senior Policy and Scrutiny Adviser

9. MINUTES OF THE PREVIOUS MEETING HELD ON 22ND JULY 2022

9.1 The Committee RESOLVED to agree the minutes of the meeting held on 22 July 2022 as a correct record and agree the recommendations made at the meeting.

10. APOLOGIES FOR ABSENCE

10.1 Apologies for absence were received from Councillors Nuala Geary (substituted by Councillor Ian Hollidge) and Kathryn Field (substituted by Councillor Carolyn Lambert), Mr Trevor Cristin (Diocese of Chichester Representative), Miss Nicola Boulter (Parent Governor Representative) and Mr John Hayling (Parent Governor Representative).

11. DISCLOSURES OF INTERESTS

11.1 Councillor Ungar declared a personal, non-prejudicial, interest that a family member was responsible for managing and administering the Household Support Fund for a local authority.

12. URGENT ITEMS

12.1 There were no urgent items.

13. ANNUAL REVIEW OF SAFER COMMUNITIES PERFORMANCE, PRIORITIES AND ISSUES

13.1 The Head of Safer Communities introduced the report which outlined the performance of the Safer Communities Partnership for the 2021/22 year against the Partnership's business plan priorities. The Head of Safer Communities' introduction covered trends in some criminal activity from local police data, service performance priorities and issues, residents' community safety priorities highlighted in responses to the latest East Sussex Reputation Tracker Survey, and the Partnership's successes with securing additional income, all of which were set out in more detail in the report and appendices.

13.2 The Chair thanked the Head of Safer Communities for the comprehensive report and particularly for Appendix 2, which had been provided in response to a previous request from the Committee. The Committee asked questions and made comments on the following areas:

- **Anti-Social Behaviour Crime Reports** – the Head of Safer Communities was asked to comment on Anti-Social Behaviour (ASB) figures included in Appendix 1 of the report and reports of ASB for wards in Hastings. The Head of Safer Communities clarified that while reports of ASB had steadily increased in the data period captured in Appendix 1 (2018/19-2020/21), in the rolling data for August 2021-July 2022, compared to the rolling data for August 2020 to July 2021, reports of ASB nuisance crimes had decreased in Hastings by 47% which was positive and showed progress in the right direction. It was recognised that there remained some significant issues with ASB in Hastings Town Centre and a member of the Safer East Sussex Team attended a multi-agency partnership group focussed on addressing this specifically. A question was also asked on whether there had been any interrogation of whether the decrease in reports of ASB in 2021/22 referenced in the cover report related to a decrease in reports, rather than a decrease in incidents. The Head of Safer Communities responded that unfortunately the Safer East Sussex Team were not able to determine this from the data available, but did ask borough and district council colleagues to notify the Team of any community tensions so that they could understand if there were concerns about increases in ASB that were not being reported.

- **Insights from domestic abuse figures** – the Head of Safer Communities was asked to comment on domestic abuse figures and clarified that while incidents of domestic abuse had slightly decreased (by 4.7%) between 2020/21 and 2021/22, overall reports of domestic abuse had marginally increased and the number of high-risk domestic violence and abuse cases discussed at the East Sussex Multi-Agency Risk Assessment Conferences (MARACs) had increased. The proportion of high-risk cases considered at the MARACs was also higher than seen nationally. The Head of Safer Communities was asked to comment on what could be inferred from these figures and they responded that the increase in reports suggested victims were more likely to come forward to ask for help, but the reduced number of recorded incidents suggested not all reports would be progressed through the criminal justice system or result in a prosecution and conviction. A lot of cases did not reach this stage as nearly 60% of people withdrew a report of domestic abuse once made. Regardless of whether the case was progressed to prosecution, the MARAC process would continue once initiated by a referring agency. The Head of Safer Communities added that the MARAC heard a high number of repeat cases because if the MARAC heard a case once and there was any further incident within the following twelve months, the case would be heard again.

- **Domestic abuse reports increases** – Committee members raised concerns about the increases in reports of domestic abuse and high-risk cases referred to the MARAC. The Head of Safer Communities responded that the Safer East Sussex Team were putting in place a range of measures to try to address increases in reports of domestic abuse but noted that increases in

reports did not necessarily mean incidents were increasing, and it could be encouraging that more people felt able to come forward to report an incident.

- **Fly-tipping** – it was noted that there had been an increase in respondents of the reputation tracker selecting fly-tipping as an area of ASB they felt it most important for the Safer Communities Partnership to tackle, and a question was asked on whether this could be related to changes in provision of Household Waste Recycling Centres in East Sussex. The Head of Safer Communities responded that fly-tipping was not an area of responsibility for the Safer East Sussex Team but they would speak to the Communities Team about the responses received on fly-tipping.

- **Changing social attitudes to criminal activity** – a question was asked on whether the Partnership was undertaking any work looking to change attitudes and make it less socially acceptable to commit criminal activity, such as ASB and fly-tipping. The Head of Safer Communities responded that a lot of work was taking place on awareness raising, and this focussed on raising awareness of crimes such as modern slavery, signs of child exploitation and domestic abuse, and harassment in public places. The Team commissioned providers to undertake comprehensive training programmes to raise awareness on these matters and also frequently bid for funding to deliver additional training programmes. A lot of the White Ribbon accreditation that the Team was working to secure for the Council was also focussed on raising awareness of Violence Against Women and Girls (VAWG). The Team had also contributed to partnership work that focussed on attitudes to crime. For example, the Sussex Police and Crime Commissioner's Office had commissioned a public campaign on VAWG targeted at men and encouraging them to call out inappropriate behaviour of their friends; and Children's Services had undertaken a survey in schools on attitudes to VAWG that the Safer East Sussex Team had contributed questions to.

- **Training and education on respectful behaviour** – further detail was requested on who the audience of the training (mentioned in the response above) was; the focus of the training, including whether it focussed on the need for respect for other people; and whether work was taking place to ensure children were educated on the importance of having respect for others. The Head of Safer Communities responded that the training referred to in the response above was often delivered through commissioned providers but the Safer East Sussex Team also delivered direct training. This included training around 400 people on the PREVENT duty and awareness of the Channel Programme; applying for PREVENT funding to deliver training for practitioners who worked with children, particularly young boys who might have mental health conditions that make them more likely to be drawn towards radical philosophies; and offering domestic abuse training for professionals, including health colleagues. The Director of Children's Services added that a lot of work had taken place in schools to ensure children understood the importance of respectful relationships. Schools focussed on issues such as peer-on-peer sexual abuse, particularly following a national OFSTED report on the matter, and work had been done using theatre to educate children on the importance of consent. Work had also been done to raise young people's awareness of the risks of exploitation through County Lines, conducted through a county-wide roadshow. The Lead Member for EISEND also commented on the important role parents play in teaching children the importance of respect for other people.

- **Headline Activity – Police Data 2021/22** – updated figures for March 2022 to the year to date were requested to assist the Committee with better-understanding the latest trends in activity. Concerns were also raised regarding some of the figures in the report, particularly the increase in notifiable crimes of 8.6% in the year to the end of March 2022 and the 15% increase in serious violent public space crimes. The Head of Safer Communities gave an update on activity figures for the rolling year to the end of July 2022. This covered that there had been significant decreases in reports of weapons possessions and knife crime, but reports of violence

against the person in public spaces has increased on the previous year. There were also higher numbers of sexual offences and incidents of stalking and harassment, but burglary has reduced everywhere in the county except Wealden. Drug offences had reduced quite significantly, and ASB in the nuisance category had reduced by around 50% in all of the district and borough areas. It was noted that the percentage changes sometimes related to some very small numbers (e.g. hate crime had gone up by a large percentage increase but it related to relatively small numbers initially). The Head of Safer Communities committed to check with police colleagues if rolling-year police data on activity could be shared with the Committee to provide the latest figures.

- **County Lines activity** – a question was asked on whether there was data available on crime and ASB incidents linked specifically to increased County Lines activity. The Head of Safer Communities agreed to see if it was possible to get an update on data related to County Lines for the Committee and added that the Safer Communities Partnership Board had asked to receive more regular reports on the work taking place to address child exploitation and county lines.
- **Activity in Devonshire Ward** – it was confirmed that the reference in Appendix 1 to Devonshire Ward in Eastbourne consistently having the highest number of both victims and perpetrators of serious violence related to the highest numbers of both for the whole of East Sussex.
- **Refuge service contract handover** – further information was requested on the lessons learned from issues referenced in the report with the handover of the refuge contract to a new provider in 2021. The Head of Safer Communities responded that the main learning from a commissioning perspective was that there needed to be less reliance on provider reports and more direct engagement with people using services. A community development worker had now been employed to work across Sussex to create a lived experience network and board that would feed into, and be represented on, the Sussex Partnership Board for Domestic Abuse to ensure the lived experiences of victims was captured at a strategic level.
- **Sourcing accommodation for refuges and other support** - further information was requested on what might be involved in the compulsory purchase of empty buildings, such as hotels, that could be used to deliver services such as refuges, or accommodation for other groups such as refugees. The Director of Adults Social Care responded that sourcing such accommodation required a really clear understanding of need and where it was geographically. ASC would prefer not to use compulsory purchase to source accommodation for refuges because doing so could be time-consuming and expensive. The Director also clarified that refuges were not typically large blocks of accommodation and the service was instead focussing on provision of small, local accommodation to meet the broad range of needs of people requiring refuges. In terms of support for refugees, the Director highlighted to the Committee that the Lead Member for Adult Social Care and Health had agreed at their last meeting to allocate move-on funding for Ukrainian guests to bring their private housing options in line with other refugee groups, such as Syrian and Afghan refugees. Even with this funding, the priority was to ask hosts to continue to support guests wherever possible as housing supply was hugely challenged in East Sussex, and this area required close work with borough and district partners as the county's housing authorities.
- **Work of the Partnership** – comments on the positive work of the Safer East Sussex Partnership, including the work with borough and district partners, were noted.

13.3 The Committee RESOLVED to request that an update on data on County Lines activity; and the latest police data on headline activity covered in the report be shared with the Committee, if agreed to by Sussex Police.

14. EAST SUSSEX SAFEGUARDING ADULTS BOARD (SAB) ANNUAL REPORT 2021-2022

14.1 The Director of Adult Social Care and Health introduced the report on behalf of the Independent Chair of the East Sussex SAB, Deborah Stuart-Angus, who would usually present the report but had had to send apologies to this meeting. The Director highlighted that the report covered the work of the partnership board in the 2021/22 year, and the work and focus of the Partnership during this time had continued to be heavily impacted by the ongoing coronavirus pandemic. The Director's introduction covered key highlights from the report under the SAB's five strategic themes; and noted that a number of areas covered in the report, such as the safeguarding issues presented by domestic abuse and modern slavery, linked to the work of the Safer Communities Partnership covered in the previous agenda item, and vice versa. The Director also highlighted the increasing complexity of safeguarding cases that the agencies in the SAB were seeing, with incidents of self-neglect and coercion and control particularly challenging to respond to. The Director concluded by highlighting common areas for learning and assurance arising from Safeguarding Adults Reviews (SAR) that had taken place in 2021/22. The Interim SAB Development Manager was invited to comment and added that the SAB continued to be very active, including in SAR activity, with three SARs underway currently and that area of the SAB's work increasing.

14.2 The Chair thanked the Director and SAB Development Manager for the report. The Committee asked questions and made comments on the following areas:

- **General Practitioner (GP) safeguarding referrals** – a question was asked on whether numbers of safeguarding referrals from GPs had improved, noting that this had been an area of concern for the Committee in previous years. In response, the Director committed to follow up with the figures but understood that safeguarding referrals from Primary Care more broadly, including from roles other than GPs, such as practice nurses, had significantly improved. A lot of work had been done through the SAB and NHS Commissioners to raise awareness of adult safeguarding in health, to bring this in line with the awareness of children's safeguarding.
- **Partnership Protocol** – a question was asked on how the partnership protocol mentioned in the report was applied in practice. The SAB Development Manager responded that the protocol had been in place since 2016 as the focus of the safeguarding partnerships frequently overlapped. Recently, a piece of work had been undertaken looking at common learning themes from reviews (Domestic Homicide Reviews, Safeguarding Adults Reviews, Drug and Alcohol Related Death Reviews and Local Children Safeguarding Practice Reviews). This had identified a number of areas to focus on and there would now be bi-monthly meetings of review managers, which would include sharing recommendations from reviews underway and ones that had concluded, to ensure action planning was smarter and avoided duplication. The partnerships were also looking at other ways to amalgamate learning to make better use of capacity and resources. Other areas of joint working had included ensuring SARs and Domestic Homicide Reviews had similar action plans to give the clearest overview of common themes in learning possible; and increasing awareness of modern slavery through the safeguarding community network. Work had also taken place with community workers and district and borough councils to develop awareness of modern slavery in the rollout of the Homes for Ukraine, Syrian and Afghan refugee schemes.
- **Learning from complaints** – a question was asked on the reasons for no outcome being recorded for three complaints in the SAB Annual Report. The Director explained that one of the complaints was ongoing so would receive an outcome when it concluded, while the other two had reached a conclusion without necessarily being formally upheld or rejected.

The Director assured the Committee that all complaints were viewed openly and as an opportunity to learn.

- **East Sussex Healthcare NHS Trust (ESHT) safeguarding training** – a question was asked on whether the Webinar and flowchart that had been produced to improve ESHT staff knowledge of the process of raising a safeguarding concern had now been delivered. The Director responded that the delivery of this training sat with ESHT and so they would follow up to confirm if the issue had been resolved and update the Committee.
- **Fire Authority Home Safety Visits** – Councillor Carolyn Lambert, as Vice Chair of the East Sussex Fire Authority (ESFA), welcomed the report highlighting work by East Sussex Fire and Rescue Service (ESFRS) on Home Safety Visits (HSVs). The ESFA Vice Chair also welcomed any support the County Council could lend to ESFRS in rolling out a new telephone befriending service. In response, the Director agreed that ESFRS made a significant contribution to the SAB and that huge progress had been made with delivering HSVs. The Director would speak to officers at ESFRS to find out more about befriending service and whether ESCC could support its rollout.
- **Preventing vulnerability by encouraging Pension Credit take-up** – a question was asked on whether work was taking place to encourage pensioners to take up unclaimed Pension Credit they were entitled to, to reduce risk of vulnerability. The Director responded that that activity would sit outside the responsibilities of the SAB but ASC had recently re-established the East Sussex Financial Inclusion Steering Group (FISG), comprised of ESCC, voluntary and community sector partners, boroughs and districts and the Department for Work and Pensions, to look at ways the group could collectively support residents to face challenges from the rising cost of living. One of the key roles of this Group was to maximise uptake of benefits in the county through making people aware of their eligibility, and if necessary, support them with making their claims. The Director noted that the FISG had been working on pulling together information on cost of living support to go on the ESCC website. The Chair of the Committee asked that when this went live it was also shared with town and parish councils and the Director confirmed it would be shared with town and parish council clerks.

14.3 The Committee RESOLVED to request that the latest figures on GP safeguarding referrals and an update on the rollout of online training on safeguarding referrals for ESHT staff be provided to the Committee.

15. RECONCILING POLICY, PERFORMANCE AND RESOURCES (RPPR)

15.1 The Director of Adult Social Care and Health introduced the report which provided the latest update to the Committee in the current RPPR cycle. The report covered the latest assessment of the policy and financial position for the Council for 2023/24 and beyond, due to be considered at the next meeting of the Cabinet, including an initial assessment of the potential financial impact of the planned ASC charging reforms. The report also covered proposed use of the one-off £5.175m Services Grant for 2022/23, taking account of feedback from the Committee's consideration of proposed use for the funding at its awayday earlier in September. The Director outlined that a prudent approach to use of the funding was being recommended to Cabinet; holding most of the funding in reserve given the particularly uncertain financial outlook for the Council. The exception was the recommendation to allocate £270k to activities to support recruitment and retention given the workforce challenges faced by all Departments. The Director noted that the proposal of introducing a Family Safeguarding model, which the Committee had been supportive of, was now also proposed to be taken forward on a longer term basis within the Medium Term Financial Plan (MTFP).

15.2 Following the Director's introduction, the Committee asked questions and made comments on the following areas:

- **Plan for Patients** – a question was asked on whether the £500m fund Government had announced alongside the Plan for Patients would replace the funds lost from the cancelled National Insurance increase. The Director of Adult Social Care and Health responded that the fund was separate to funding for the charging reforms and the Department understood that it had been allocated to support the health system through the winter, particularly with facilitation of hospital discharges. The exact allocations for ESCC, the means of allocation (e.g. whether it will be allocated to the NHS or local authorities) and conditions for use were unknown.
- **Market Sustainability Plan** – the Committee asked if it would be possible to receive a copy of the Market Sustainability Plan once finalised and reviewed by the Department for Health. In response, the Director explained that the estimated impact of the Fair Cost of Care exercise was included within the report to Cabinet and would be talked through at a Whole Council Forum for councillors the following day. The Director confirmed the Committee could receive a copy of the Market Sustainability Plan, although the Director would need to take advice on whether this was done confidentially given the potential commercial implications for the market of the information included within it.
- **Funding for future financial uncertainty** – a question was asked on whether there was scope to reduce the proposed funding to be set aside for managing uncertainty following announcements in the Chancellor's recent mini-budget statement, such as the cancellation of the planned National Insurance increase which ESCC would no longer need to budget for. The Chief Finance Officer responded that from a budget perspective, the reduction in employer National Insurance requirements was welcomed as the increase had added £1.3m to the 2023/24 budget. However, as an element of the one-off services grant was allocated to fund the employer National Insurance increase, there was an increased risk that the grant would be reduced, therefore having a net nil impact on the MTFP, or redistributed. The Chief Finance Officer therefore recommended that it was prudent for the funding to be held in reserve until the draft Local Government Finance Settlement was published, as ESCC was facing uncertainty around a number of funding streams.
- **Projected deficit** – clarity on the increase in the projected deficit figures included in the report was requested, and the Chief Finance Officer explained that £14.999m was the deficit to 2025/26 that had been projected at State of the County in July. Over the summer officers had updated modelling to take account of local changes and pressures, and this had increased the projected total budget deficit to £31.471m by 2025/26. Appendix 1 of the RPPR report to Cabinet provided the detail on the movements since July. A follow-up question to clarify the budget position in 2023/24 was asked and the Chief Finance Officer explained that the deficit for 2023/24 was projected to be £17.544m and that the table included in paragraph 3.3 of the RPPR report to Cabinet showed both the annual and cumulative projected deficit.
- **Proposals to maximise recruitment and retention** – a question was asked on what proportion of the proposed investment in activity to support recruitment and retention would be spent on retention. The Chief Finance Officer committed to follow up with a response. The Director of Adult Social Care and Health added for clarity that the investment proposed in the report was to be spent on addressing challenges with recruitment and retention of directly employed staff, and while there were recognised, significant challenges with recruitment and retention of care workers in the independent sector, addressing that was not the focus of this proposed investment. Separate work was underway to address this which included a range of activity including overseas recruitment.

15.3 The Committee RESOLVED to request to see a copy of the Market Sustainability Plan when it was finalised and to request further information on the proportion of proposed investment on recruitment and retention that would be spent on retention.

16. WORK PROGRAMME

16.1 The Chair introduced the report on the Committee's latest work programme, outlining that the draft work programme appended to the report reflected changes agreed at the Committee's recent work planning awayday. The Chair asked the Committee for any further comments or changes regarding the work programme and the following was discussed:

Report on Armed Forces Covenant

16.2 The Chair asked if the Committee could receive an update report on ESCC's work on the Armed Forces Covenant and the work needed for ESCC to achieve a gold accreditation. The Director of Children's Services explained that the Lead Member for Children and Families had recently become the Armed Forces Champion. The Covenant had been placed on a statutory footing and a number of steps had been taken to look at enhancing ESCC's work in this area. This included arranging training for councillors and members of staff on the new Armed Forces Covenant duty, looking at what would be required to move ESCC from silver to gold in the employer accreditation programme and undertaking a staff survey to determine how many members of staff had a connection to the armed forces community. While the survey had only just started and only 50 returns had been received to-date, 20% of respondents had said they had a link. The Director explained that in terms of the staff accreditation, ESCC was very close to meeting the requirements to be gold standard and the ambition was to achieve this by the time of ESCC renewing the signing of the Covenant in 2023. An event was planned to be held after the local elections in 2023, inviting district and borough partners to sign the covenant and put a spotlight on actions taken by each council to discharge their obligations under the covenant.

16.3 The Director and Lead Member for Children and Families added that it had been challenging to secure full engagement from borough and district partners on this work but engagement continued. ESCC hoped that in playing a leadership role it would be able to demonstrate to other public sector organisations what was possible, and the contextual pressures facing all councils, which made it challenging to engage in work such as this, were also noted. The Chair of the Committee asked if the work on the Covenant needed to be better highlighted to borough and district councils and the Director responded that as the legal basis for the Covenant was a new development, there was a need for general awareness raising and this was the reason for provision of the staff and councillor training.

Loneliness and Resilience Reference Group

16.4 Councillor Clark commented that it was important the reference group held its final meeting to consider the final recommendations of the work that had taken place and how that would be progressed. Councillor Clark remarked on the ongoing importance of tackling loneliness, including thinking about how to connect with, and share information on services, with elderly people who do not have access to computers.

16.5 Councillor Hollidge noted that the Place Scrutiny Committee had requested a report on the work of the libraries service and suggested there was a need to promote that service, both physical libraries and work with volunteers to take books out into the community, as a way to connect with people who were not able to get online. The Chair of the Committee agreed that the service provided an important opportunity to connect with people and asked that it was explored whether the Committee could also have an update on the work of the libraries service.

16.6 The Committee RESOLVED to agree the updated work programme, with the addition of an update report on work to deliver the Armed Forces Covenant.

17. EAST SUSSEX SAFEGUARDING CHILDREN PARTNERSHIP ANNUAL REPORT 2021/22

17.1 The Independent Chair of the East Sussex Safeguarding Children Partnership introduced himself and the report, which the Independent Chair reminded the Committee was a report covering the work of the multi-agency Partnership, rather than solely the safeguarding work of ESSC. The Independent Chair noted that the Committee had requested that this report cover learning for East Sussex from the national reviews into the deaths of Arthur Labinjo-Hughes and Star Hobson and the Independent Chair assured the Committee that the Partnership had carefully considered the messages from the National Panel's report. The Independent Chair had written to all the strategic leads for safeguarding in the Partnership to ask what steps they were taking to respond to the recommendations in the national reviews and he had been re-assured by the responses received, with a number of actions taking place, including a mock-Joint Targeted Area Inspection.

17.2 The Independent Chair highlighted that the Partnership had conducted eight multi-agency rapid reviews of cases of child serious injuries or deaths and four of those had resulted in a Local Child Safeguarding Practice Review in 2021/22. The Independent Chair added that the East Sussex system and all strategic leads were very open to learning from those reviews. The Independent Chair also highlighted a range of key developments and achievements within the report and concluded by commenting that the ESSCP was one of the best safeguarding partnerships he had seen in his time working in safeguarding, with really strong leaders in all agencies who all agreed that safeguarding was key.

17.3 The Committee asked questions and made comments on the following areas:

- **Sufficiency of resourcing for safeguarding** – a question was asked on whether there was sufficient resource to carry out the work that safeguarding partners felt was needed to address issues identified by the ESSCP. The Independent Chair responded that while they felt there was not enough resource to do all that the ESSCP would want to, and they would always be supportive of more investment in safeguarding, the resources the partnership and its members did have were extremely well managed and effective. The Director of Children's Services added that while they would also always support opportunities to invest in children's services and safeguarding work, even if more funding was to become available it would be challenging to recruit more children's social workers at this time. The Director felt that the service had just about enough resource for what it needed to deliver but noted that caseloads of social workers were the highest they had been, with some social workers responsible for 23-25 cases as opposed to the 16-18 cases that were aimed for. All cases were managed very carefully. The Director added that the proposals to implement a Family Safeguarding Model through RPPR involved recruiting 36 additional workers to deliver adult support which was a significant investment but was expected to deliver savings in the longer-term by keeping children out of care wherever safe and possible.
- **Child exploitation in work** – a question was asked on whether there had been any cases of child exploitation where a child was working in a business, such as a newsagents or takeaway, without a license for that work. The Independent Chair responded that the partnership did investigate exploitation of children in work through reports of modern slavery but they were not aware of any examples of children being exploited at work in the way described in the question. The Director added that Children's Services was responsible for approving licenses for children to work in the way described and committed to find out the latest position

on this and provide an update. The Independent Chair and Director also noted that criminal and sexual exploitation was more a focus of the ESSCP and the report.

- **Supervision caseloads** – a Member of the Committee commented that they understood there had been an improvement in numbers of cases supervisors were responsible for, and welcomed this improvement, as the Department had previously been found by the regulator to need to address this. The Director said she believed that the approach to supervision of cases in East Sussex was strong.

- **Safeguarding in Elective Home Education (EHE)** – the strengthened legal basis local authorities had for requesting evidence from parents of suitable home education was welcomed and a question asked on whether there was an overlap between hidden children and those in EHE, and if so, how those children would be identified and assessed. In response the Director agreed that it was positive that the recent outcome of the Judicial Review of Portsmouth City Council's approach to securing assurance on home education standards would support other local authorities to take a similarly rigorous approach.

In terms of safeguarding, it was the Director's view that it was a limitation of the service's safeguarding powers that it did not have a right of entry into people's homes to confirm EHE children were safe, unless evidence was already available of safeguarding concerns. The Government had proposed to establish a register of children not in school within the new Schools Bill, however the Director understood that the new Ministerial Team were now looking to remove this from the planned legislation. The Director recognised that some parents felt strongly about their right to home educate and that many were doing a great job, but felt that given the number of serious case reviews there had been in East Sussex that had involved children who were EHE, it was right to be concerned about limitations in safeguarding in this area. There had been a significant increase in EHE during the pandemic, with 1800 children now home educated in East Sussex, and the Director was really concerned about the potential risks this presented. Committee Members also had concerns about this rising number, and noted that school provided important social and cultural experiences for children. The Chair of the Committee asked if there was anything the Committee could do to make clear to Government their support for strengthening the safeguarding powers councils had, and the Director responded that the Council could write to Government about this. The Association of the Directors of Children's Services (ADCS) had already written to Government to emphasise how strongly they felt about the safeguarding risks from EHE.

- **Engagement with home educating parents** – a question was asked on what engagement the County Council had had with the Home Schooling Network which supported parents with home education. The Director responded that the Council had good relationships with many parents who home educated, including the networks and organisations that support them. The Director felt it was important that parents recognised that the Council's education service could not provide professional support to parents who were home educating and that they also recognised home educating would be challenging and require significant commitment. Children's Services had explored implementing an approach where for every case where a parent wanted to move their child into home education, there was a three-way meeting with the school, the parents and the EHE Team to look at why the parents felt their child should be off rolled. Taking this approach at Portsmouth Council had halved the number of new starting EHE children. While it was not possible to resource this approach for all children moving to EHE at ESSCP, the service would be piloting the approach for cases where a family were looking at home educating due to concerns about the Special Educational Needs and Disability (SEND) provision at school to see if alternative steps could be taken to keep the child in school.

- **Motivations and reasons for EHE** - a follow-up question was asked on whether the increases in the numbers of children home educated was due to concerns about SEND

provision or whether there were other causes. The Director responded that there were varied reasons that a parent may decide to EHE their child. Some parents had different visions for education to mainstream schooling. There were also parents who may feel their child's needs were not being met and it was those cases the Department was looking to understand with the above pilot to see if there was a way they could be supported to stay in school. There were also instances where EHE was considered by parents because otherwise they would be pursued for their child's non-attendance. These cases were of particular concern.

- **Cost of EHE** - a question was asked on whether there was a cost to the Council from increasing numbers of EHE. The Director responded that there had been an increase in costs from the need to expand the EHE team to administer processes but there were no costs to ESCC associated with supervising the education of home educated children, as the Council could not supervise this. In terms of funding for education more broadly, funding was provided for schools on the basis of the numbers of children on the school roll in January each year, so there would be less money for schools overall due to the reduction in children accessing education.
- **Child and Adolescent Mental Health Service (CAMHS) pressures** – the increase in CAHMS referrals and in children attending A&E due to self-harm mentioned in the report was noted and a question asked on the work the ESSCP had done to secure assurance around the safeguarding of children with mental health issues given the pressures on CAHMS. The Independent Chair responded that there was a need to recognise that mental health issues facing children needed to be responded to by everyone, not just CAMHS services. The ESSCP was looking at the work needed to support children before they reached the stage of requiring support from CAMHS, which involved upskilling teachers, upskilling parents to deal with challenges facing children before they progressed (while also recognising what was usual adolescent behaviour) and improving mental health provision in schools. The Independent Chair noted that this was challenging to do as the demand on CAMHS was great and working to try to reduce this would be one of the major challenges facing agencies in the partnership in the next two to three years.
- **Identification of risk presented by County Lines** – a question was asked on how children were identified as being at high risk, as it was noted that only five children had been identified as high risk, which appeared low given the breadth of safeguarding concerns covered in the report and the threats presented from increasing County Lines activity. The Director responded that there were high, medium and low risk levels and children at 'high' risk were in what could be described as very high risk (e.g. at real, immediate risk of exploitation). Those five children would have been a snapshot at the time the report was written, with all agencies working very hard to try to keep them safe. There were likely to be other children facing a high risk of exploitation, including from activity such as County Lines, but these would have been the children the service knew about at that time. The Independent Chair added that East Sussex was not an outlier in its number of children at high risk and was also not alone in the threat of exploitation arising from County Lines.

17.4 The Chair thanked the Independent Chair for the report and the assurance it had provided the Committee that the Partnership worked effectively and positive steps were being taken to improve safeguarding of children and young people in the county. The Committee RESOLVED to ask the Director of Children's Service to:

- write to Government to reflect the Committee's concerns around the expected withdrawal of plans to legislate for Councils to have new powers to improve safeguarding in EHE; and
- provide information on employment licences for children issued by ESCC.

The meeting ended at 4.50 pm.

Councillor Johanna Howell (Chair)

Report to:	People Scrutiny Committee
Date of meeting:	17 November 2022
By:	Director of Adult Social Care and Health
Title:	Adult Social Care Workforce Update
Purpose:	To update the People Scrutiny Committee on progress with measures to address workforce recruitment and retention challenges including the role (and limitations) that Personal Assistants (PAs) have in addressing the workforce challenges.

The People Scrutiny Committee is recommended to consider and comment on the content of the update report and appendices.

1. Background

1.1. The Adult Social Care and Health (ASC&H) Workforce Programme 2022 – 2024 is a three-year programme of work, established in March 2022. The programme will bring together stakeholders to explore ways in which we can improve our recruitment processes and attract and recruit prospective staff into ASC&H vacancies more successfully and efficiently, with a particular focus on hard to fill posts.

1.2. The programme will share best practice across ASC&H and the wider County Council, as well as external local and national initiatives. The programme will pilot and evaluate a range of creative approaches to recruitment in order to identify the most successful and effective methods for wider deployment across the Department and Council.

1.3. This report has been brought to the Committee following a request from the People Scrutiny Committee Review Scoping Board, which met in March 2022, to consider ASC Workforce Challenges as a potential topic for a scrutiny review. The Board was updated on the range of activities the ASC&H Department is undertaking in response to challenges with recruitment and retention and concluded that as the Department had just started, or was about to progress, a wide range of work in response to the challenges outlined, it was not an appropriate time to commence a scrutiny review of this area and instead the Committee should receive a progress report in nine months. The Board also requested that the Department re-visit the recommendation of the previous People Scrutiny Review of the ASC Workforce in 2019 that the Department support councillors to promote the role of Personal Assistants, and the briefing and presentation attached at Appendices 2 and 3 are provided in response.

2. Summary of progress

2.1. The ASC&H Workforce Programme structure and governance comprises a Programme Board, chaired by the ASC&H, Assistant Director (Operations), with membership drawn from across the Department and supported by corporate services such as HR and IT. There are six separate workstreams (or Project Groups) with an identified Lead Officer that report to the Programme Board on a regular basis.

2.2. To date, the Board has met to review and approve each of the six individual Project Groups' objectives, priorities, and plans, and the following paragraphs summarise the key achievements to date.

- A project initiation document has been produced for each project and presented to the Board. This has allowed the Board to discuss any overlaps across projects and agree how to manage shared objectives and areas of interest, as well as identifying any areas of resource that may be required to support each project.

- Reporting arrangements have been agreed to help the Board monitor progress. Project Groups are listed in the presentation in Appendix 1.
- All Project Groups are meeting regularly to scope out workstreams, share progress and ideas, agree key milestones and next steps, and implement plans. All groups have achieved some milestones.
- A Programme Risk Log is being set up for regular review by the Board.
- A set of Intranet pages has been created to ensure ongoing communication with staff about the Programme and about each of the component projects. The Intranet pages will be updated regularly regarding project progress, with a notification in the regular staff bulletin (To the Point) each time new content is added. The pages also invite staff to contribute their ideas and views to the Programme, through the link below.
[Adult Social Care and Health Workforce Programme – ESCC Intranet](#)
- The summer edition of the internal staff bulletin (Brief Encounter) featured a one-page article about the Programme and gave an overview of the six projects and named the project leads. It also invited staff to submit any views to a group mailbox.
- Consideration of the role and limitations that Personal Assistants (PAs) have in respect of the wider care workforce and a report and separate presentation on this part of the workforce is contained in Appendix 2a and b.

2.3. As part of the next phase of the Programme, the following activities are planned for the period between October 2022 and January 2023:

- Produce and finalise East Sussex ASC Workforce Development Strategy.
- Ongoing development of individual project plans, setting out key actions and milestones, for each area.
- Quantify and finalise any potential resource implications for consideration as part of the Reconciling Policy, Performance and Resources (RPPR) process.
- Maintain the Intranet page updates on a monthly basis.
- Add, maintain, and review risks identified by Project Groups to a programme Risk Log.
- Co-ordinate focus groups across the programme, utilising the Departmental Management Team (DMT) November staff engagement events to undertake live polls of staff to identify key priority themes from across all six project leads.
- Hold equalities, diversity and inclusion themed workshops with project leads to understand what actions/mitigations may be required in the Programme's equalities Action Plan.
- Develop an internal and external Communications Strategy for the Programme.

3. Conclusion and recommendations

3.1. Our workforce and that of the independent sector, are fundamental in supporting East Sussex residents to live fulfilling and independent lives. It is necessary and timely to consider our long-term workforce requirements supported by detailed workforce planning to

enable us to increase capacity necessary to ensure that we have sufficient staff with the right skills and knowledge to meet the anticipated increase in demand.

3.2. The ASC Workforce Strategy will build upon that ambition and implement the initiatives set out in the 'People at the heart of care' white paper which will contribute to laying the foundations necessary to stabilise our essential workforce.

3.3. The People Scrutiny Committee is recommended to consider and comment on the update contained both within this report and the presentation.

MARK STANTON

Director of Adult Social Care and Health

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People Scrutiny Committee

Adult Social Care & Health workforce review

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Content of Presentation

- East Sussex workforce position
- Skills for Care data
- East Sussex ASC workforce programme
- Looking ahead
- An overview of the role of Personal Assistants
- Support with Confidence
- Looking ahead
- Any questions

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Skills for Care workforce data

- As of 2021/22 there were 17 000 filled posts in East Sussex across the independent sector, local authority and jobs working with direct payment recipients.
 - 9% local authorities (down 1%)
 - 88% independent sector providers in 405 (down from 413) CQC Registered establishments
 - 3% working with direct payment recipients (down 5%)

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Source: Skills for Care 2021-22 (information from the report was provided by local authorities as at September 2021 and by independent sector employers as at March 2022. It should be noted that the data used in this report for 2019/20 was collected prior to the height of the COVID-19 pandemic in England)

Workforce data comparison

	2020-1	2021-2
gender	81% female	80% female
age	Average age 44 – Under 25 years 9% – 25 to 54 years 63% – 55 + 28%	Average age 45 - Under 25 years 10% - 25 to 54 years 61% - 55 + 29%
Nationality	<ul style="list-style-type: none"> • 84% British • 10% EU • 6% Non-EU 	<ul style="list-style-type: none"> • 83% British • 10% EU • 7% Non-EU
Turnover rate	27.8% (4600)	34% (5400)
Vacancy rate	4.6%	8.8%

You are looking at **East Sussex**.

Back to map
←

Summary and key
findings

Employment
overview

Recruitment and
retention

Demographics

Pay

Qualifications
and training

Recruitment and retention

Download PowerPoint

Use the drop-down menus to change the sector and/or job role.

Select a sector:
All sectors

Select a service group:
All services

Select a job role:
All job roles

Number of filled posts:
17,000



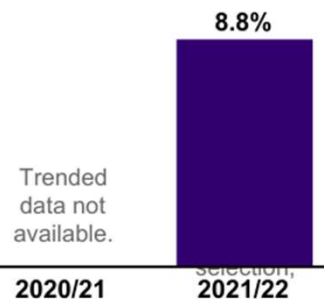
The **turnover rate** in 2021/22 was
34.0%
(or 5,400 leavers).

Sickness



The **average number of sickness days** taken in 2021/22

Vacancy trend



Select a view:

☐ Turnover
☒ Vacancy

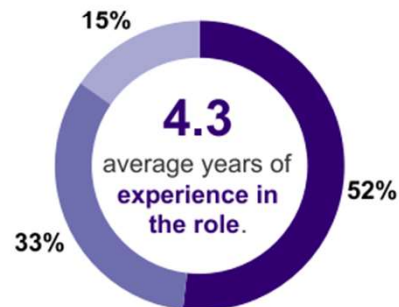
Vacancy and turnover trends have **increased** at a **national** and regional level since **March 2021**

COVID-19
dashboards



8.8%
vacancy rate
(1,500 filled posts)
in 2021/22.

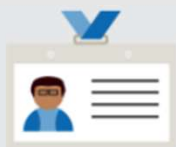
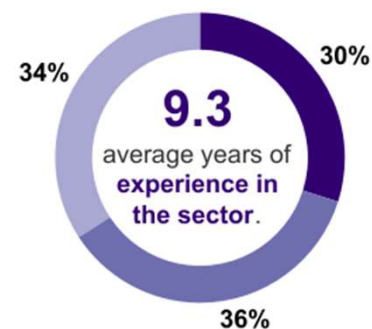
Experience in role



Key:

■ Less than 3 years
■ 3 to 9 years
■ 10 years or more

Experience in sector



61%
of staff
recruited from within the sector.

ASC Workforce programme 2022-25

This Programme sets out how we are responding to the issues raised. Consists of 6 workstreams:

- Strategic workforce planning
- Leadership and management
- Recruitment
- Retention
- Building and enhancing social justice in the workforce
- Enhancing the wellbeing of the workforce

Progress to date

- Increased targeted social media and use of QR codes
- Piloted a values based application process which has seen an increase in job applications for Joint Community Rehabilitation
- Improving induction process
- Top tips for managers is now live on the intranet for recruiting managers
- Marketing officer within Directly Provided Services

Progress (cont.)

- Roll out of the Working Inclusively Guidance and Template across ASCH
- Review of the effectiveness of staff initiatives
- Exit Interviews
- Musculoskeletal project up and running with support from Brighton University and other partners

Progress (cont.)

- New recruitment officers
- Attendance at 50 events and recruitment fairs
- Working closely with local 6th form colleges
- Working in partnership with Armed Forces Network, Department for Work and Pensions, Rest Less, Refugee groups
- Increased targeted social media and utilise QR codes
- New recruitment branding across Council:
#chooseeastsussex

Looking ahead

- Review and disseminate 'Top Tips for Leadership'
- Social Media Platforms
- Attend range of other events and forums
- Develop proposal for retention of older staff
- Develop proposals for retention based strategies on exit interview data
- Analysis of sickness absence to ensure targeted support is offered
- Enhance the induction-themed intranet pages and best practice guidance from across the Department to maximise staff retention

Looking ahead (cont.)

- Embed compassionate and strengths-based leadership
- Continue to promote the use of Sussex Staff in Mind for team-based psychological support
- Complete Equality Impact Assessment for whole Programme
- ASC representation on Addressing Discrimination and Disputes in the workplace
- Protected Characteristics

Any questions?

Report to:	People Scrutiny Committee
Date of meeting:	17 November 2022
By:	Director of Adult Social Care and Health
Title:	Scrutiny Briefing – Personal Assistants and Support With Confidence
Purpose:	To provide an overview of Personal Assistants (PAs) locally and nationally. To provide an update on services provided by the Council and ongoing development opportunities.

RECOMMENDATIONS

The Committee is recommended to consider and comment on the briefing.

1. Background

1.1 Personal Assistants (PAs) are an option to support people to live a full and independent life, alongside other services including Home Care and Day Opportunities.

1.2 PAs support people with a range of needs, including people who are older, disabled, or living with a mental health condition or learning disability. The type of support delivered is flexible but can include household tasks, shopping, meal preparation, support to attend appointments and organise paperwork, daytime activities and social engagement, personal care, medication support and assisting with healthcare.

1.3 Many people choose to become PAs for the flexibility the role offers and through a motivation to improve someone's quality of life. PAs can be employed directly by clients or self-employed and may support one person or several clients.

2. National Picture

2.1. Nationally and locally, there is an increased emphasis on personalised care and self-directed support. Around 70,000 people in England employ a PA. Unlike other adult social care services, PA support is not regulated by the Care Quality Commission (CQC).

2.2. Some key findings from a recent state of the workforce report produced by Skills for Care are:

- People employ an average of 1.85 PAs (around 130,000 jobs)
- PAs hold an average of 1.29 jobs each
- 58% of PAs are aged between 25 and 54
- 28% have less than 3 years experience working in adult social care
- 82% of PAs are female
- 93% of PAs are British, 5% are from the EU, and 2% are from non-EU countries
- 86% of PAs work part time
- The vacancy rate for PAs is 13.1%

3. What does the council do?

3.1 The Council Plan includes priorities to keep vulnerable people safe and help people to help themselves. This includes providing people with the option to organise their care through a PA. Some of the services the Council provides include:

- Statutory assessments of people's needs and developing a support plan with them
- Administering direct payments to clients, which people use to pay for their PA
- Support with Confidence Scheme (SWC) - vets, checks, trains, approves and supports an accredited cohort of PAs to deliver quality services
- Free PA training programme
- Commissioning a Direct Payments Support Services - advice and ongoing support for clients employing PAs

4. Personal Assistants (PAs) in East Sussex

4.1 The Council monitors the number of people receiving direct payments as a proportion of the people receiving long term care. There are currently 1,515 people receiving direct payments in East Sussex. This is around 32.7% of people receiving long term care, against a target of 31.5%. Most people receiving a direct payment will employ a PA.

4.2 There are 278 accredited Support with Confidence PAs who are mostly self-employed.

4.3 A recent survey of people receiving direct payments highlighted recruitment of PAs as the most significant challenge they were facing. This trend is reflected nationally, a report by Think Local, Act Personal found 77% of people found it more difficult to recruit a PA. The Council is continuing to work with partners to apply good practice to build resilience within the workforce and support employers.

5. Support with Confidence (SWC)

5.1 SWC is a national brand operating across seven local authority areas. By comparison, East Sussex is a well-established scheme and in the top three for scale of its operation. Each local authority tailors the SWC model to meet its local requirements.

5.2 In East Sussex, the service is delivered in partnership between Adult Social Care (ASC) and Trading Standards. We have 330 SWC scheme members (278 PAs and 52 business members) and around 70 applications going through the accreditation process.

5.3 The aims of SWC are:

- To upskill and improve the services offered by the unregulated care and support market
- To accredit care and support providers that have been checked and vetted on the grounds of quality, safety, and training
- To provide an online directory of accredited providers to the public and ASC operational teams
- To provide clients with choice beyond more 'traditional' care options
- To help develop and support local ASC providers

5.4. Before receiving accreditation, members are required to complete background checks, an enhanced DBS check, an interview, initial training plus any additional training for client specific needs.

5.5. SWC also supports the East Sussex PA Network (three independent PA forums) to encourage peer support and practice and build resilience amongst East Sussex PAs. The

team also act as a link between PAs and a range of other services provided by the Council including the ASC direct payments team, Adult Social Care practitioners and Public Health.

6. Looking Ahead

6.1. The Council is continuing a range of activities to build resilience within the local PA workforce, this includes:

- Support with Confidence – continuing to develop the local workforce market, including supporting networks of PAs
- Direct Payment Support Service – working with our current providers to improve advice services for employers and support recruitment
- Recommissioning Direct Payment Support Services – this will include reflecting on feedback from a recent survey of service users, to help shape priorities for the new service.

7. Conclusion and Reason for Recommendation

7.1 PAs play a key role within the wider social care system. A number of national trends are reflected in East Sussex, including challenges with recruitment and retention of PAs. The Council will continue to work with partners to build resilience within the local workforce. The SWC scheme will continue to facilitate the development of the unregulated PA market whilst providing greater market oversight and raising quality standards. The scheme will support the recruitment and retention of increased and complementary workforce capacity, to support people in their own homes and communities, through the provision of accredited PAs and community-based support services. This will be achieved through the provision of training and employment opportunities, to enable people to deliver local flexible and personalised services.

7.2 SWC will continue to support an upskilled PA workforce to deliver increased quality delivered through a robust and consistent accreditation framework.

MARK STAINTON

Director of Adult Social Care & Health

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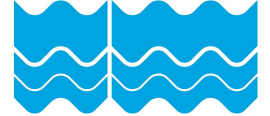
Scrutiny Briefing - Personal Assistants (PAs)

Welcome

Today's session will cover:

- An overview of the role of Personal Assistants (PAs)
- Support with Confidence (SWC)
- Looking ahead

*“PAs do a fantastic job,
a lifeline to families...”*



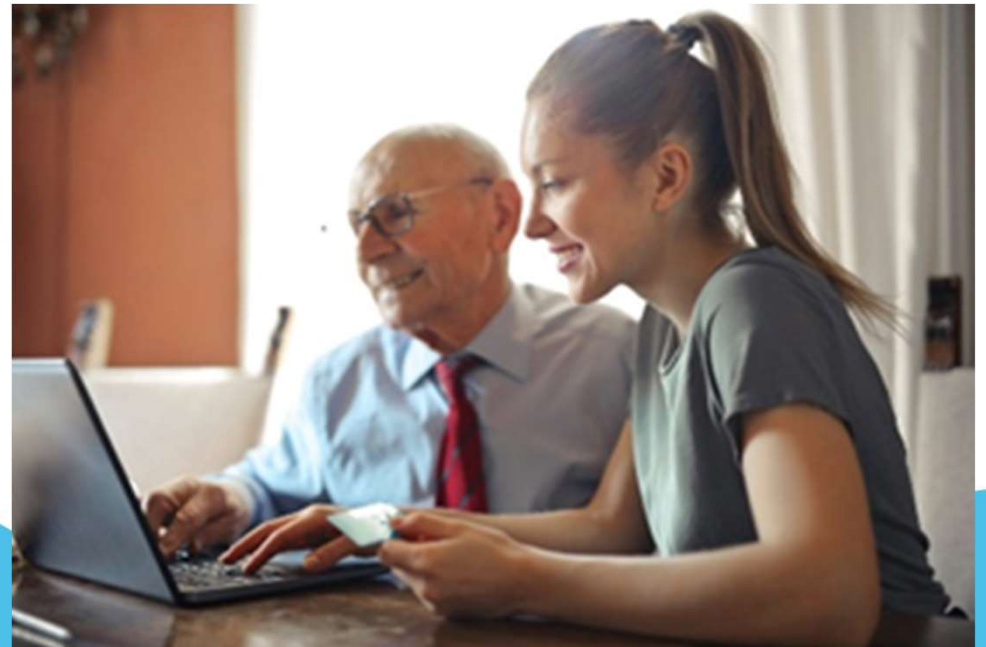
The role of Personal Assistants (PAs)

- PAs are an option to support people to live a full and independent life, alongside HomeCare and Day Opportunities
- Flexible support for a range of needs
- PAs can be employed directly by clients or self-employed and may support one person or several clients



What does the Council do?

- Statutory assessments of people's needs and develops a support plan with them
- Administers direct payments to clients, which are used to pay PAs
- SWC Scheme
- Free PA training programme
- Commissions Direct Payments Support Services



PAs in East Sussex

- 1,515 people receive a direct payment - most will employ a PA
- 278 accredited SWC PAs who are mostly self-employed
- Clients are supported by employed and self-employed PAs



Support with Confidence (SWC)

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Delivered in partnership between Adult Social Care and Trading Standards

National brand - operates in 7 local authorities and expanding

330 SWC scheme members (278 PAs and 52 business members) in East Sussex

70 applications going through the accreditation process

Aims:

- Upskill and improve services
- Accredit care and support providers
- Online directory
- Provide clients with choice
- To help develop and support local ASC providers

Support with Confidence (SWC)

- Maintaining independence
- Person centred
- Available to all East Sussex residents
- Providers are vetted to ensure a good quality service
- Minimising risk to the public
- Increase consumer choice and protection
- Provides trading, business advice and support

“5 out of my 6 clients families found me on the Support with Confidence site, and I feel it gives them comfort knowing they can trust the person caring for their parents/relatives.”

Direct Payment Support Service

- People pay PAs using their direct payments
- The Council commissions 2 direct payments support services, which support around 500 people who employ PAs
- Support for employers can include recruiting PAs and carrying out pre-employment checks, payroll and providing ongoing advice and guidance to employers
- Re-commissioned services will launch in April 2024



Looking Ahead

- Building resilience
- SWC
- Direct Payment Support Service - focusing on recruitment
- Recommissioning Direct Payment Support Services



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Report to: People Scrutiny Committee

Date of meeting: 17 November 2022

By: Chief Executive

Title: Reconciling Policy, Performance and Resources (RPPR)

Purpose: To provide an update on the Council's business and financial planning process, Reconciling Policy, Performance and Resources (RPPR), and the Committee's input to the process.

RECOMMENDATIONS:

The Scrutiny Committee is recommended to:

- (1) consider the contextual information attached in preparation for the Committee's RPPR Board in December; and**
 - (2) identify any further work or information needed to support the Scrutiny Committee's contribution to the RPPR process for consideration at the RPPR Board, or as part of the Committee's ongoing work programme.**
-

1. Background

1.1 In September the Committee considered the Reconciling Policy, Performance and Resources (RPPR) update report to 29 September Cabinet. Following on from the State of the County report in June, the report set out the latest assessment of the developing policy and financial outlook which will inform planning for 2023/24. The ongoing uncertainty in the planning context was outlined, including the very challenging economic conditions and the rapidly evolving policy agenda in light of national political developments. The report confirmed that national economic conditions were impacting on our projected future financial position, alongside pre-existing pressures and uncertainties.

1.2 Since September, the instability in our planning context has persisted, with significant further national economic and political developments. Following the resignation of Liz Truss, a new Prime Minister, Rishi Sunak, took office on 25 October, followed by new Cabinet and ministerial appointments. The Prime Minister has indicated that his government's priorities will be economic stability, uniting the country and delivering the 2019 Conservative Party manifesto. Michael Gove has been reappointed as Secretary of State at the Department for Levelling Up, Housing and Communities, following a departure from the post in July.

1.3 Having revised a number of the tax measures introduced in the Government's September mini budget in a statement in October, the Chancellor will make a further fiscal statement on 17 November, to be accompanied by updated economic forecasts from the Office for Budget Responsibility. Both the Prime Minister and the Chancellor have already indicated that difficult decisions on public spending will be required to reduce the national debt. In terms of local government funding, the November fiscal statement may provide some indication of the outlook but the detail is expected to come in the provisional Local Government Finance Settlement, anticipated in December or early January.

1.4 The new Government's policy agenda is yet to emerge in any detail, although the stated return to previous manifesto pledges suggests an ongoing commitment to key policies such as Levelling Up. There remains uncertainty over whether, or how, other national policy proposals brought forward by previous administrations will be progressed. As the policy direction becomes

clearer, particularly in relation to reforms which impact directly on our services, we will continue to factor details into our planning.

1.5 The RPPR process, which brings together our policy, business and financial planning and risk management, continues to provide the robust mechanism to help us navigate the uncertain environment, supporting planning for 2023/24 and beyond and maintaining focus on our priority outcomes.

2. Overview of Scrutiny engagement in RPPR

2.1 Scrutiny's input to the RPPR process is ongoing, both through specific RPPR reports to each meeting and through more detailed exploration of specific issues through the wider work programme. Following on from consideration in **July** of the 2022 State of the County report and 2021/22 year end monitoring report, the **September** meetings provided an opportunity to consider further developments in the policy and financial context and how these were impacting on planning for 2023/24 and beyond.

2.2 The **November** committee meetings provide a further opportunity to request any information required by scrutiny to inform its engagement with RPPR, for consideration at the RPPR Boards to be held in December or as part of the wider work programme.

2.3 To further support the committee in its understanding of the current context and future pressures for the areas within its remit, the following attachments are provided as additional context ahead of the RPPR Board meeting:

- **Appendix 1** contains the **current Portfolio Plans** for services within the Committee's remit; and
- **Appendix 2** contains extracts from the **Financial Budget Summary 2022/23** for the areas within the remit of this Committee to provide an overview of the revenue budget for these areas (the full document is at [Financial Budget Summary](#)).

Members are invited to consider this background information to ensure a full understanding of the current context, ahead of considering updated plans for the year ahead.

2.4 The committee's **RPPR Board** will meet on 16 December 2022 to agree detailed comments and any recommendations on the budget and emerging updated portfolio plans to be put to Cabinet on behalf of the committee in January 2023. The Chairs of the People and Place Scrutiny Committees are invited to attend the RPPR boards of both committees.

2.5 The **March 2023 Scrutiny Committees** will review the process and their input into the RPPR process and receive feedback on how scrutiny input has been reflected in final plans. Any issues arising can be reflected in the future committee work programme.

2.6 Running alongside this process, there will be a number of opportunities for all Members to engage in the RPPR process.

3. Conclusion and reason for recommendations

3.1 To support its ongoing input to the RPPR process, the Committee is recommended to consider the additional contextual information provided by this report and identify any further work or information it requires for consideration at the RPPR Board, or as part of the Committee's ongoing work programme.

BECKY SHAW
Chief Executive

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Adult Social Care and Health Portfolio Plan 2022/23 – 2024/25

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Cabinet Portfolio Lead Members

Councillor Carl Maynard
Lead Member for
Adult Social Care and Health



Responsible for strategy and policy for all adult social care and public health matters.

Principal service area responsibilities covered in this plan include services for vulnerable adults including older people, learning disability, physical disability, mental health, public health, Community safety, the Voluntary Sector and all ancillary activities.

Portfolios Overview

Adult Social Care

1.1 Improving the wellbeing of East Sussex residents drives this portfolio plan. The particular demands facing Adult Social Care and Health (ASCH) locally reflect local demographic changes, financial constraints over the last decade, and the need to integrate more closely with health and develop closer working with the voluntary and community sector.

1.2 East Sussex has a growing elderly population, already at levels that will not be reached nationally for decades. Compared to 2021, by 2025 there will be an increase in the population of working age people (age 18-64) of 4,690 (1.5%), however the population of older people (age 65+) will increase by 10,430 (8.2%) to 161,630. Of the population of East Sussex (all ages), 4.3% of people will be aged 85+, a significantly greater proportion than England, 2.7%. East Sussex will be ranked 1st in England for the highest proportion of population 85+.

1.3 While the population will be getting older, the level of need will also be increasing. By 2025, 41,060 older people (age 65+) are projected to have a limiting long-term illness whose day to day activities are limited a little (up 9.1%), 31,450 limited a lot (up 9.8%). 12,340 older people (65+) are projected to have dementia (up 9.7%).

1.4 East Sussex County Council (ESCC) is an organisation where diversity drives innovation. Progression is based on talent and there is a culture of fairness, respect and equality of opportunity for all staff. We aim for our workforce profile to reflect the demographic make-up of East Sussex in every service and at every level, ensuring that we are better able to connect with the needs of the people of East Sussex

1.5 We will promote equality and include residents, staff and partners in everything we do to improve the quality of life for everyone living in, working in and visiting East Sussex - to create a county of opportunity for all.

1.6 In December 2019 a new coronavirus (subsequently named COVID-19) emerged and quickly spread throughout the globe, being declared a pandemic by the World Health Organisation on 11 March 2020. Throughout 2020/21 the pandemic has continued to cause great disruption through measures to limit transmission, and a high number of excess deaths.

1.7 Adult Social Care and Health responded to this health emergency by adapting the way we provide support to vulnerable adults. Prior to the pandemic most assessments of need would be undertaken through visits to clients' homes or to assessment clinics. The need to observe social distancing and the stay at home order has resulted in the majority of assessments and other contacts being undertaken by telephone, video conferencing and/or email. Other areas impacted by the requirement to ensure social distancing have been our directly provided services, independent sector care homes and home care providers, occupational therapy services and financial assessments.

1.8 It was recognised that a longer-term review of the adult social care and health model was needed to ensure that support continues to be provided while the pandemic is ongoing. The Adult Social Care and Health Programme was initiated in 2020 with a number of projects looking at how we could continue to meet our statutory responsibilities under the Care Act and any new responsibilities specific to the pandemic in a manner that is safe for our clients and staff. The Programme ended in October 2021 having delivered a number of key objectives:

- A hybrid model for office and home working for the Health and Social Care Connect team which has ensured sufficient staffing levels throughout the pandemic despite the need for social distancing
- Interim guidance for practitioners on how to effectively conduct communication with clients using telephones, video calls and other remote technology
- Reopening of day services for older people and those with learning disabilities in a way that is safe for our clients and staff

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- Reopening of Occupational Therapy clinics with strict hygiene controls in place
- Community hubs set up with partners to support clinically vulnerable people in East Sussex through the lockdowns
- Provided support to providers of commissioned services to operate safely and sustainably
- Instigated a broader programme to improve our digital offer to clients

1.9 Changed our way of working to reduce physical interactions with clients and families where appropriate

1.10 Despite these significant and unprecedented challenges to how we operate the ASC offer has remained unchanged. We have continued to:

- Provide information and advice for all adults seeking care and support.
- Assess need and arrange help for individuals and their carers who are eligible for support from Adult Social Care.
- Provide support that reduces the need for social care in the longer term and/or prevents the need for a more expensive service.
- Safeguard vulnerable adults who are at risk of harm or abuse.
- Work efficiently and provide value for money.

1.11 The Programme has now ended; however, the ASCH Department has put in place measures to monitor the longer term impacts of the changes made on quality of outcomes for clients and their families.

1.12 The Council is a member of the Sussex Health and Care Partnership (SHCP), a partnership of health and care organisations working together across Sussex. The SHCP was awarded Integrated Care System (ICS) status in April 2020.

1.13 The Health and Care Bill currently progressing through Parliament will put all ICSs on a statutory footing in England from April 2022. We have been working with our NHS partners in Sussex on the ICS Memorandum of Understanding to make sure the

Council can participate effectively in the new arrangements, focussing on our East Sussex population.

1.14 To support this it has been agreed that 'Place' has a primary role in our ICS. There are three 'Places' within the Sussex ICS (East Sussex, Brighton and Hove and West Sussex), with the Council being a lead partner with our local NHS in the East Sussex Health and Care Partnership.

1.15 Within ICSs partnerships at Place level should work together, to join up services across primary care, community health and mental health services, social care and support, community diagnostics and urgent and emergency care to ensure the following offer to their populations:

- Access to clear advice on staying well.
- Access to a range of preventative services.
- Access to simple, joined up care and treatment when this is needed.
- Access to digital services (with non-digital alternatives) that put the citizen at the heart of their own care.
- Access to proactive support to keep people as well as possible, where they are vulnerable or at high risk.
- Joint approaches to employment, training, procurement and volunteering activities and use of estates, allowing the NHS to play a full part in social and economic development and environmental sustainability.
- Linking with other public and voluntary services that have an impact on people's day to day health for example through improving local skills and employment or ensuring housing and accommodation opportunities.

1.16 Working together with our NHS partners has been essential in supporting our response to COVID-19, and this has been a critical focus in the last eighteen months. In 2022/23 in the wider context of the new statutory ICS we will build on this to strengthen our East Sussex Health and Care Partnership in the following ways:

- How we organise our integrated approaches to planning, commissioning, delivering and transforming services across our shared priorities for health and social care and our work with our

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Borough and District Council and Voluntary, Community and Social Enterprise (VCSE) sector partners to further develop all the elements of the joined up offer of care for our population

- Jointly exploring how we can take forward the next phase of health and social care integration for our residents, including agreeing our roadmap and how it will be delivered. This will be co-produced with all of our stakeholders and there will be a key focus building wider ownership of our plans and proposals to ensure they fit with the broader offer to our communities in East Sussex.

Our priorities

1.17 Our long term East Sussex Health and Social Care Plan sets out our shared Council priorities and commitments in the NHS Long Term Plan, and our ambitions to deliver greater levels of integrated care, early intervention and prevention for people of all ages, and improve health and reduce health inequalities in our population.

1.18 In 2021/22 we updated our local plans to set out how we'll continue to develop our joint working, and to support our system's recovery from COVID. This sets out our shared priorities in the coming 12 – 18 months including the following areas:

Addressing health inequalities

1.19 We will build on our existing progress to help people stay healthy and well for as long as possible, receive personalised care and support, reduce health inequalities, and reduce the gap in life expectancy and healthy life expectancy in the county. We will do this by strengthening our partnership approach across all the services that impact on and influence health and wellbeing, like housing, employment, and leisure. We'll also work with local people to empower them to make healthy choices throughout their lives.

Community and locality working model

1.20 We will also work with our Primary Care Networks, Borough and District Councils and Voluntary, Community and Social Enterprise Sector (VCSE) partners on our shared agenda to strengthen links between community health and social care, primary

care, mental health, housing and voluntary and community sector teams, services and support on the ground, to ensure people receive a joined up offer of integrated and personalised care and support based on the strengths and assets in their lives and where they live.

1.21 Together we will develop a model of working in our communities and localities across East Sussex that brings all partners together make sure:

- There is joined up and personalised care for high risk vulnerable people, their families and carers who are living with long term conditions and complex care needs, including at the end of life, to support their independence and increase quality of life
- We better use data to understand the people and groups within our population who have 'rising risks' to their health and wellbeing, including healthy life expectancy and where fast and/or proactive and anticipatory action will reduce their risks.
- Better enable our efforts to improve mental health and wellbeing and address health inequalities in our diverse communities across the broad range of services and support that impact on wellbeing and life opportunities in our communities, including streamlined access to information, advice and support.

Joining up community health and social care

1.22 Our well-established integrated management arrangements and teams such as HSCC and JCR, and the community health and social care services target operating model (TOM) have all continued to enable our pandemic response, where this has required coordination and grip across our system. For example, supporting care homes and timely and appropriate discharge from hospital.

1.23 We have already taken steps to remove the barriers to our health and social care staff working effectively together, including co-locating teams in Eastbourne to increase care coordination and multi-disciplinary working for people with complex long term care needs; embedding Discharge to Assess (D2A), and Home First hospital discharge pathways to support people to leave hospital and have their needs assessed in either their own homes or in care home settings, and; increasing shared access to key summary

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1.24 In the coming year we will take steps to further develop our community health and social care TOM. Working across acute, community health and social care, an integrated urgent response team will support more integrated working to help people avoid hospital admission when alternative services can provide care and support and leave hospital quickly when they are ready to be discharged. This will further build on our joint work on D2A Home First pathways and helping people who are Medically Ready for Discharge (MRD) onto their onward journey of care.

Expanding support for mental health

1.25 We will expand our support for people with mental health needs by:

- making sure people have access to a full range of services that support emotional wellbeing in primary care
- extra support in the community to help avoid unnecessary inpatient admissions, and support recovery
- working with housing teams and providers to support people who also need help with housing and accommodation.

1.26 Our integrated approach to social care, community health and mental health will contribute to improving the delivery of urgent care and planned care and the restoration and recovery of services being taken forward by the NHS.

Integrated commissioning for population health

1.27 In 2022/23 we will also continue to work together to cement our strengthened collaboration across commissioners and providers as a result of responding to the Pandemic. Working within the new framework for healthcare commissioning provided by our Sussex-wide ICS we will ensure a critical focus on our East Sussex population across our joint commissioning functions:

- Our understanding of our population's health and care needs and planning and prioritising how to address them
- Shaping models of integrated care, services and investment decisions and bringing together our collective resources and

allocating them so that they can have the most impact for our population.

- Informing modelling of demand and capacity requirements now and in the future – including understanding the relationship between capacity requirements in different parts of the system, for example bedded capacity across acute, community health and nursing/residential care, to support D2A, Home First and people who are medically ready for discharge from hospital.

Safer Communities

1.28 The diversity of the East Sussex Safer Communities Partnership – with professionals across ESCC, Public Health, district & borough councils, Police/Probation, ESFRS and other agencies – means it can trial and scale creative and innovative ideas in how we protect and educate communities against any risk to community safety. It continues to build new relationships with public agencies, service users and the voluntary & community sector to explore the challenges brought on by the COVID-19 pandemic as well as trends in crime, substance misuse, public disorder and health to find new ways to prevent harm against individuals, families and communities.

1.29 Running across all themes of community safety remains the use of digital technology. We continue to work with the government and other agencies to find new ways to bring more people into the digital world, use it safely and combat exploitative, harmful or criminal behaviour using the internet. This includes recognising that the wide variety of social media and other digital technologies creates new avenues for criminals and abusers to exploit our most vulnerable people, as well as recognising that new forums, apps and technologies will create new routes for our partnerships to foster relationships, promote confidence and establish community resilience.

1.30 Political, social and economic pressures in the UK and internationally continue to influence the technologies and opportunities available to wishing criminals to exploit vulnerable people. These pressures equally affect communities' ability to respond to these threats in good time. The Partnership works together to establish new networks with communities and

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professionals working within them to create targeted programs to meet those new, emerging and established risks.

1.31 We are growing our networks within our local agencies and with regional and national partners to reaffirm our commitments to address the risks and harms associated with serious and organised crime, including county lines, modern slavery & human trafficking and fraud & scams. There is a key focus to finding pathways to reduce harm through contextual safeguarding strategies which use expertise across public and voluntary & community sectors to work with vulnerable people and their families. By providing public education and training alongside targeted early-intervention strategies, the Partnership aims to reduce the reach and effect of harms that can be caused by misinformation, isolation and exploitation by organised criminals.

1.32 We are developing more multi-agency approaches to tackling drug and alcohol-related harm by sharing expertise in policing & probation, public health, and the voluntary & community sector. Through the commissioning of services, and by engaging law enforcement, diversionary approaches, and treatment & recovery services together, we continue to tackle drug-related crime and reduce supply. We also utilise this multi-agency approach to support those with drug and/or alcohol disorders and their families and loved ones and provide an environment that allows them to reintegrate into their local communities. By working together, we are able to develop projects and initiatives that reduce the frequency and underlying causes of drug and alcohol related harm within the county.

1.33 The East Sussex Violence Reduction Partnership is a multi-agency partnership working together to address serious violence across East Sussex. Partners have considered those who are either causing or experiencing the most harm, along with developing place based responses and focussed contextual safeguarding initiatives to support young people who are most at risk of serious violence and exploitation, and their families. Funding for some of this work has been secured from the Home Office, the STAR grant and the Youth Justice Board.

1.34 The Serious Violence Duty will place a new requirement on schools, police, councils and health authorities to collaborate and plan to prevent and reduce serious violence. The Duty will also amend the Crime and Disorder Act 1998 to ensure that serious violence is an explicit priority for Community Safety Partnerships, which include local police, fire and probation services, as well as local authorities and wider public services. We are making preparations for the introduction of the Duty later in 2022.

1.35 We will be commissioning and delivering more specialist services for victims and survivors of domestic violence and abuse, sexual violence, and other forms of violence including stalking, harassment and harmful practices. We will be working across our partnership to review our working practices to ensure our services are connected, efficient and focused on providing long-term effective support for victims and survivors by integrating them back into their local communities.

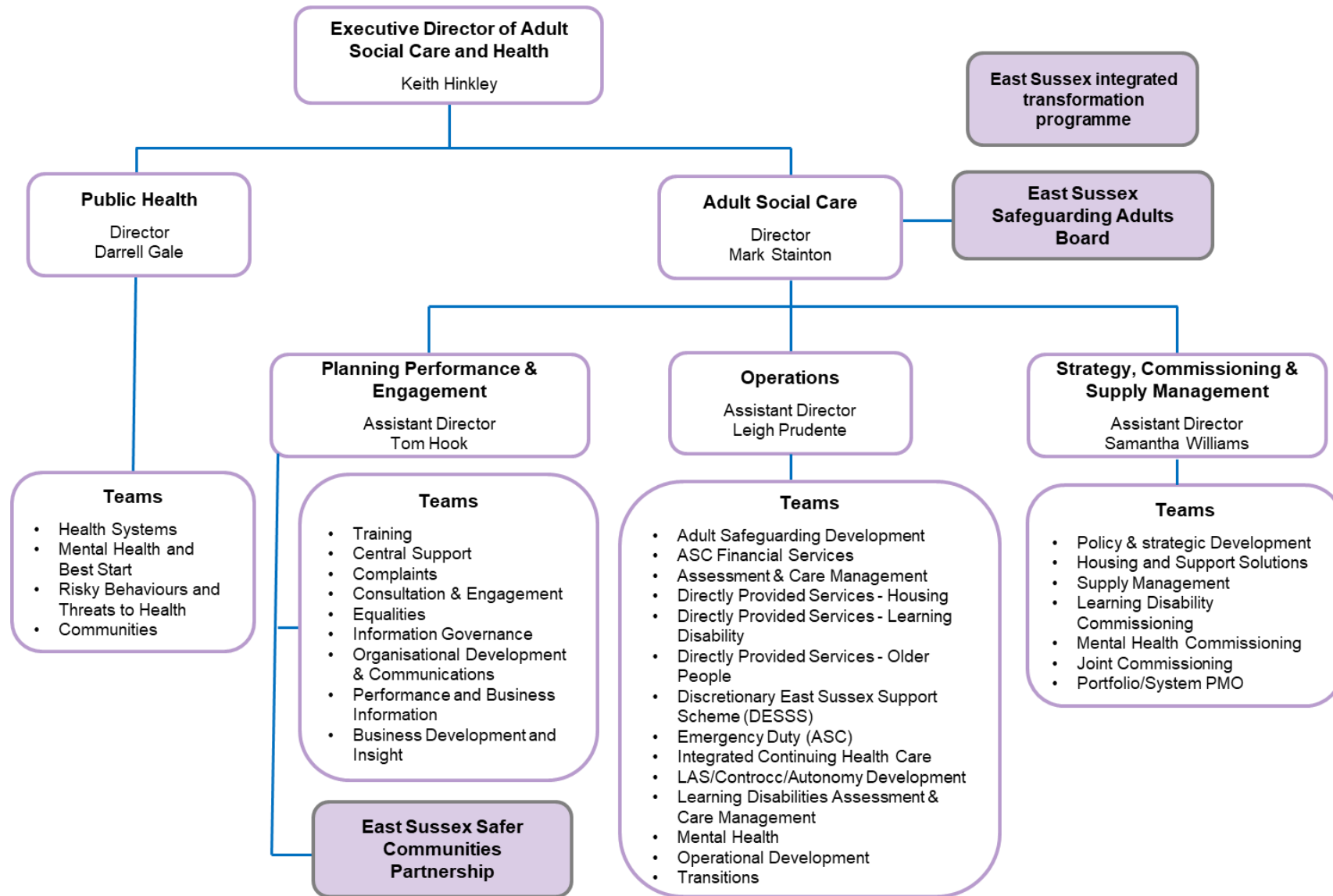
Public Health

1.36 The role of Public Health is to promote, protect and improve health and wellbeing of the population and reduce health inequalities. To do that we provide and commission a number of statutory services, some of which are known as mandated services because the manner of delivery is prescribed nationally. Other services commissioned by Public Health are conditions of the Public Health Grant or services based on the needs of people locally and support the Council's statutory responsibility for the improvement and protection of the health of people in East Sussex. The Joint Strategic Needs Assessment (JSNAA) is led by Public Health on behalf of the Health and Wellbeing Board.

1.37 As we approach the end of a second year of the pandemic, we are gradually shifting from an acute response role to a longer-term rebalancing of our functions. Nationally we have seen many fundamental changes with the demise of Public Health England and the newly formed UK Health Security Agency and Office for Health Improvement and Disparities. The pandemic leaves us with a legacy of a greater focus on health protection arrangements within Council services and in partnership with our colleagues. The pandemic has exacerbated existing inequalities and our task will

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continue to be to tackle and narrow the gap in health outcomes
between the most affluent and the most deprived residents.

Structure Chart



Delivering Priority Outcomes

The Priority Outcomes

The Council has four overarching priority outcomes: driving sustainable economic growth; keeping vulnerable people safe; helping people help themselves; and making best use of resources now and for the future. Making best use of resources now and for the future is the gateway priority through which any activity and accompanying resources must pass. For each priority outcome there are specific delivery outcomes. These are referenced to performance measures in this Portfolio Plan.

Driving sustainable economic growth - delivery outcomes

1. East Sussex businesses are supported to recover and grow through the delivery of the Economy Recovery Plan
2. The county's employment and productivity rates are maximised
3. Individuals, communities and businesses thrive in East Sussex with the environmental and social infrastructure to meet their needs
4. The workforce has and maintains the skills needed for good quality employment to meet the needs of the future East Sussex economy
5. The value of our role as both a significant employer and a buyer of local goods and services is maximised
6. All children progress well from early years to school leaver and into education, training and employment



Keeping vulnerable people safe - delivery outcomes

7. All vulnerable people in East Sussex are known to relevant local agencies and services are delivered together to meet their needs
8. People feel safe at home
9. People feel safe with services
10. We work with the wider health and care system to support people affected by Covid-19 to achieve the best health outcomes possible

Helping people help themselves - delivery outcomes

11. Commissioners and providers from all sectors put people first when providing services and information to help them meet their needs
12. The most vulnerable get the support they need to maintain their independence and this is provided at or as close to home as possible
13. Through our work with others, individuals and communities are encouraged to maintain and develop local mutual support systems

Making best use of resources now and for the future - delivery outcomes

14. Working as One Council, both through the processes we use and how we work across services
15. Delivery through strong and sustained partnership working across the public, voluntary community, and private sectors to ensure that all available resources are used to deliver maximum benefits to local people
16. Ensuring we achieve value for money in the services we commission and provide
17. Maximising the funding available through bidding for funding and lobbying for the best deal for East Sussex
18. To help tackle Climate Change East Sussex County Council activities are carbon neutral as soon as possible and in any event by 2050

Driving Sustainable Economic Growth

2.1 The COVID-19 pandemic has had a significant effect on the East Sussex economy and labour market. In East Sussex as at end of September 2021 there were 145,600 people claiming universal credit or JSA because they were unemployed (up 59% from March 2020). As at end of September 2021 6% of the working age population were being supported through the Coronavirus crisis, the Coronavirus Job Retention Scheme (CJRS, or Furlough scheme) and the Self-Employment Income Support Scheme (SEISS).

2.2 The sectors that were most severely affected by the Coronavirus pandemic are very significant in the East Sussex economy: Wholesale, retail and motors, Accommodation and Food service, and Arts, Entertainment and Recreation. These sectors have seen significantly better performance since restrictions have been lifted but are now seeing the effects of labour shortages due to the combined effects of the pandemic and Brexit.

2.3 ASCH is a major contributor to the East Sussex economy – In East Sussex there were an estimated 19,000 jobs in adult social care split between local authorities (8%), independent sector providers (85%) and jobs for direct payment recipients (6%) in 2020/21. Adult social care has an experienced 'core' of workers. Workers in East Sussex had on average 8.8 years of experience in the sector and 79% of the workforce had been working in the sector for at least three years.

2.4 Adult social care is a growing sector. Across England it has increased by 9% since 2012, and in the South East region it increased by 8% since 2012. If the workforce grows proportionally to the projected number of people aged 65 and over then the number of adult social care jobs in the South East region will increase by 37% (from 260,000 to 360,000 jobs) between 2020 and 2035.

2.5 In 2019/20 the adult social care sector was estimated to contribute £41.2 billion per annum to the English economy. Almost half of this is estimated to be the wage bill of the sector.

2.6 A key partner in East Sussex is the voluntary, community and social enterprise (VCSE) sector. The VCSE sector generates economic, social and environmental benefits to communities across the county. For every eight businesses that employ staff in East Sussex, there is at least one VCSE organisation. The vast majority of these VCSE organisations are small; they employ at least 6,000 people across the county; and their volunteers contribute a total of 9.6 million hours each year – equivalent to almost 6,000 full-time workers. The GVA (gross value added) of East Sussex VCSE organisations is at least £76m and the value of volunteering to the local economy is estimated at £110m.

2.7 The VCSE organisations are often the first to respond to the needs of communities. Organisations provide specialist support that is often not available from other providers. They take a person-centred approach, supporting people to access the different systems they need in order to be able to live an independent life. They are also providing safe, accessible, and inclusive spaces for individuals, groups and the wider community, that support inclusion and belonging.

2.8 The impact of Covid-19 on the sector was dramatic, leading to great uncertainty, but also adaptation and innovation. Although collaboration was already strong prior to Covid-19, existing partnerships have been strengthened and new ones have emerged. There is a desire amongst East Sussex stakeholders to continue the creativity and imagination that has characterised voluntary and public sector collaborations during this time. However, there is need to understand and properly resource the work of the VCSE sector, proportionate to the economic, social and environmental value of the work it is carrying out, that has never been more important.

2.9 During the last year the Council has invested over £1m in the VCSE sector using one-off Government COVID related grants, from the likes of DWP, DEFRA, and MLCHG. Investment has been based on guidance from Government, local knowledge of need across population and communities identified by the public and VCSE sectors.

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2.10 ESCC contributed over £300k to Sussex Crisis Fund (Phase 2 and 3) providing small grants to VCSE organisations affected by Covid restrictions.

2.11 A further £100k was allocated to Sussex Community Foundation (SCF) to manage a small grants programme for VCSE organisations working with food bank users, to help address the root causes of their food poverty and to organisations that can provide routes out of food bank usage.

2.12 ESCC made £270k worth of grants directly to the 15 Food Banks in East Sussex allocated according to identified need, as well as £75k to support the development of local and emerging Food Partnerships to enable them to focus on building food security and sustainability across the county in the longer term.

2.13 ESCC made grants totalling £550k to VCSE organisations to put in place additional measures for providing financial and benefits advice to people on the Shielded Person List (SPL), and for people that have been affected by Government Guidance in relation to the Covid pandemic.

2.14 ESCC through the DWP Household Support Fund allocated a further £950k to VCSE organisations to support households with children, and other households genuinely in need of support this winter.

2.15 For all one-off grant programmes ESCC worked at pace with partners from across the VCSE and public sectors to design and deliver programmes that would bring immediate help to people, communities, and organisations.

2.16 We have continued to support people working in independent care settings by changing the training we provide from classroom settings to blended training. Care providers and their employees can continue to undertake essential training to enable them to continue to work safely and legally with their clients.

2.17 A number of measures have been put in place to support staff wellbeing during this period, including regular webinars that staff can access to sustain morale whilst working remotely.

2.18 We have established a new workplace health programme to support employers, from micro through to large, to develop their credentials as healthy workplaces and to take a lead role in health promotion. The East Sussex Workplace Health Accreditation Scheme launched in autumn 2021 to support improvements to employee health and wellbeing whilst providing recognition for good practice. Embarking on the accreditation process will be free and available to any business that is based, or has sites, in East Sussex. Other initiatives included within the programme that have been well received include: the delivery of expert led webinars to support business during and after the COVID-19 pandemic; the wellbeing at work website containing information, resources, and training available to employers; and regular monthly newsletters.

Keeping vulnerable people safe

2.19 Our top priority currently is to limit transmission of COVID-19 which has a particularly devastating effect on the elderly. This has meant that we have had to change the way in which we communicate with people, moving to telephone and online communication in place of face-to-face conversations where this is appropriate. The ASCH Programme has developed new ways to conduct assessments safely and to ensure that safeguarding vulnerable adults remains a priority within everything we do. Where we need to visit or meet with clients or their families, staff use the necessary personal protective equipment (PPE) to reduce the risk of transmission.

2.20 The ASCH Programme has made changes to the way we provide services directly to clients. In Older People's services we have had to reduce the number of places available at our day centres to ensure people attending are able to maintain social distancing. In Learning Disability Day Services, we have changed the way we run sessions from two to three sessions per day, with a new evening session now offered. Our ability to offer transport for clients to access the day services across both older people and learning disability has been affected by the need for social distancing in vehicles. Transport has been prioritised for those who need it. In all day services we have made structural changes to ensure our clients and staff can access the buildings safely. Staff

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across both services have been incredibly flexible and understanding to be able to implement these temporary changes.

2.21 A key area of focus for the ASCH Programme is maintaining good social work practice throughout the pandemic. We will continue to audit case files to identify any areas of concern. The impact of the pandemic on our workforce has meant working from home for most people, not always in ideal situations, particularly in regard to sensitive conversations with clients and their representatives. We will continue to monitor the longer-term impacts of these changes on the quality of outcomes for our clients and their families.

2.22 The Safeguarding Adults Board (SAB) is a multi-agency partnership, made up of statutory and voluntary partners as well as lay members, established to promote well-being and oversee Safeguarding Adults work county-wide. The SAB areas of focus are:

- Adults, carers and the local community assisting to shape the work of the SAB and safeguarding responses.
- Ensuring the SAB provides strategic leadership to embed the principles of safeguarding across agencies and contribute to the prevention of abuse and neglect.
- Establishing robust feedback mechanisms on safeguarding policies and procedures.
- Making safeguarding personal (making sure adults are involved and consulted in the process of helping them to stay safe and agreeing goals to achieve) – ensuring these principles are central to safeguarding practice across all agencies.
- Ensuring learning from reviews is effectively embedded into practice to facilitate organisational change across agencies.
- Ensuring the workforce is equipped to support adults appropriately where abuse and neglect are suspected. This will include emerging themes of ensuring a trauma-informed approach to working with adults with multiple complex needs, including situations in relation to coercive control and domestic abuse, modern slavery, cuckooing, and safeguarding rough sleepers.

2.23 The East Sussex Safer Communities Partnership's ambition is to make East Sussex a safer place to live for everyone. We are committed to working collaboratively across the statutory and voluntary sectors to reduce and prevent crime and anti-social behaviour, support the victims of crime, protect our most vulnerable residents, and create more inclusive and resilient neighbourhoods and communities. We will achieve this by raising awareness, through coproduction and collaboration, and by driving wider policy change.

2.24 Championing integrated initiatives across systems and organisational boundaries, the Partnership is focused on keeping communities safe, identifying those at risk of harm, and protecting vulnerable people. These reflect and complement the individual priorities of the five district and borough Community Safety Partnerships, the County Council, Police, Probation, Fire and Rescue Services, and the Police and Crime Commissioner's Office, alongside those of our local Safeguarding Boards:

- In identifying those at risk of harm, workstreams range from preventing people from being drawn into violent extremism to reducing the harms associated with drug and alcohol misuse.
- In protecting vulnerable people, workstreams range from improving online safety to disrupting modern slavery and protecting people from domestic and sexual violence and abuse.
- In keeping communities safe, workstreams range from improving road safety to reducing public place serious violence.

2.25 The Partnership recognises that some people experience intersectional disadvantage and that this may have been compounded by their experience of the pandemic. Our approach is underpinned by a commitment to respond to people across the entirety of their experience and by the promotion of diversity and equality of access to service provision. Of equal importance is the proportionate targeting of resource to have the most impact, recognising for example, that males account for most of both perpetrators and victims of serious violent crime, and that females are most at risk of domestic and sexual violence and abuse.

2.26 There are various interdependencies between the Partnership's workstreams, with actions in one area affecting the

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outcomes in another. Our approach to tackling serious violence will therefore take account of the need to reduce drug and alcohol-related harm; our work on reducing re-offending will consider the impact of homelessness and worklessness on recidivism; and our actions to tackle public place anti-social behaviour will read across to our commitment to eliminating harassment and Violence Against Women and Girls (VAWG). Running through all our workstreams is a focus on online safety and an attention to individuals who have experienced severe disadvantage (those with multiple, complex needs).

2.27 The Partnership includes representation from specialists in Children's Services in recognition that communities are made up of both adults and children, and an understanding that upstream interventions that support behaviour change reduce the necessity for future crisis-driven responses. An integrated approach relies on partners taking an active role at a systems level tackling issues at scale through aligning priorities, commissioning, and external income generation; and sharing resources, data insights, intelligence, and learning. The implementation of change, however, happens at a local level - where people live, work and access services. It is at a place-based level that the contribution of our VCSE partners in enabling a safer East Sussex and as bridges to local communities is most important.

2.28 The Partnership will work together to create strong networks of support, building connections, shared values, and trust across and between communities, and empowering people in communities to have a sense of control, to support each other and to take collective action. This approach draws on community assets, encouraging participation, influence, and ownership, while continuing to safeguard more vulnerable individuals and finding ways to enable their voices to be heard.

2.29 Community safety is an outcome rather than a collection of services, and the East Sussex Safer Communities Partnership is more than just the sum of its parts. Taking a data and evidence-informed approach to strategic and business planning, the Partnership will continue to evaluate its collective impact,

developing a shared understanding of 'what works' and how best to achieve sustainability.

2.30 The Partnership works to identifying those at Risk of Harm by:

- Identifying emerging local counter-terrorism risks and coordinate activity to mitigate them through the East Sussex Prevent Board.
- Refreshing Prevent training to key agencies involved in the Channel process e.g. Single Point of Advice.
- Providing Prevent awareness training to staff in primary, secondary, special schools and Further Education.
- Providing targeted educational interventions to children and young people identified by the Channel process.
- Collaborating with the Home Office to review local Prevent delivery.
- Integrating trends identified through the Channel process into educational programmes and school delivery e.g., tackling misogyny.
- Working with local leaders in special educational needs to review and adapt educational training content to ensure the school offer meets the desired learning outcomes for students with Special Educational Needs.
- The Council's Safer Communities Team and Specialist Children's Services are working up a joint proposal to fund a Contextual Safeguarding Co-ordinator to co-ordinate the implementation of plans that are produced following place-based Contextual Safeguarding Assessments.
- Improving outcomes for the most vulnerable of East Sussex residents through a focus on:
 - Building stronger multi-agency partnerships and governance to improve local accountability for people who have experienced multiple disadvantages.
 - Improved data sharing to enhance service delivery and inform policy and commissioning.
 - Genuine co-production with service users and those with lived experience.
 - Service integration and workforce development
 - Joint commissioning approaches.

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- Establishing a network of Diversity and Inclusion Champions.
- Ensuring that services are accessible to all with a focus on hidden accessibility issues such as neurodiversity.
- Ensuring that services are available in all parts of the county – including those where transport links are poor, including through co-location.
- Ensuring that service opening hours are tailored to need.
- Underpinning all services, interventions and initiatives with meaningful opportunities for co-design.
- Encouraging people to seek help earlier especially in terms of alcohol misuse support in conjunction with Public Health through the implementation of the East Sussex Alcohol Harm Strategy.
- Removing stigma around accessing support by ‘normalising’ conversations about drugs and alcohol and raising the profile of support available.
- Making services more attractive to those who do not consider themselves to be drug users or alcohol misusers by delivering services in supermarkets and shopping centres, and by approaching local schools with a view of offering support around school opening times.
- Contributing to the development implementation of the new national commissioning standards outlined in From Harm to Hope.
- Establishing a new multi-agency Partnership Board which will meet as a sub-group of the East Sussex Safer Communities Board.
- Producing an updated needs assessment relating to drug and alcohol use in East Sussex, which will inform a local drugs strategy and action plan as well as informing future commissioning processes.

2.31 The Partnership works to protecting vulnerable people by:

- Ensuring that all East Sussex residents feel empowered to act when they witness an incident related to sexual or gender-based harassment, that victims feel they can safely make a complaint, and that perpetrators feel deterred from carrying on abusive behaviour. This will be achieved through a focus on:
 - Raising public awareness.

- Encouraging reporting to the police.
- Targeting prevention work with children and young people around respect and consent, coercion and coercive control and abuse via social media.
- Progressing the East Sussex Action Plan in relation to the Pan-Sussex Domestic Abuse and Sexual Violence Framework with a focus on the four priorities of: Prevention and Early Intervention, Service Provision, Pursuing Perpetrators, and Partnership. This will include implementation of the new Pan-Sussex Domestic Abuse Accommodation and Support Strategy and Action Plan.
- Mobilising a funded response to domestic abuse, including new commissioned services to enhance accommodation-based support including refuge for people experiencing domestic abuse who also have multiple and complex needs, and investment into a new dedicated children and young people’s service in refuge.
- Implementing the new duty for housing re: evidence of domestic abuse triggering priority need.
- Introducing and resourcing the Domestic Abuse Housing Alliance Whole Housing Approach.
- Participating in the Department for Levelling Up, Housing and Communities Respite Rooms trial programmes to fund specialist safe housing and support to victims of domestic abuse, sexual abuse, rape or sexual assault, sex workers or victims of exploitation who are rough sleeping or at risk of rough sleeping.
- Enhancing Multi-agency training and support programmes to include training in schools and colleges and alternative education settings.
- Ensuring services are accessible, particularly to those facing additional barriers when seeking support.
- Putting victim and survivor voices at the heart of development of the strategic agenda and local implementation.
- Implementing the White Ribbon Action Plan.
- Collaborating awareness raising and promotion of services through 16 Days of Activism.
- Ensuring learning from Domestic Homicide Reviews continues to be embedded in training and awareness raising and coordinated across agencies.

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- Working with upper tier Sussex authorities to shape and further enhance the effectiveness of the Pan-Sussex Modern Slavery Network.
- Working with the University of Sussex to develop a profile of Modern Slavery specifically for East Sussex which will seek to identify trends and develop a greater understanding of the local picture.

2.32 The Partnership works to keeping Communities Safe by:

- Agreeing a plan to help tackle the school exclusion of vulnerable pupils at risk of involvement in violent crime.
- Implementing a targeted contextual safeguarding place-based response to serious violence.
- Improving information sharing to better assess and manage risks of serious violence for young males aged 18-30 who are not part of Integrated Offender Management or Multi-Agency Risk Assessment Conferences frameworks.
- Developing workplace assessment frameworks for trauma-informed approaches to supporting vulnerable substance misusers who are victims of violent crime.
- Developing service provision in Eastbourne to enable equitable service provision for trauma-informed approaches to mirror services developed in Hastings under Project Adder.
- Understanding the reason for the high prevalence of victims and perpetrators in some wards through multi-agency data sharing, looking at people's histories, complexity of needs and local risk factors to reduce serious violence.
- Working to manage and reduce the high rates of serious violence associated with the street community in Hastings town centre; through a partnership approach including Seaview, Project Adder and the Rough Sleeping Initiative complemented by council wardens and police patrols.
- Delivering a Get Safe Online Business event: Working together to keep your Business safe online; a free training event aimed to increase awareness of the techniques used by criminals and the protective measures individuals and businesses can employ to protect themselves both at work and at home.

- Delivering online safety community awareness training across the Partnership.
- Attending a large-scale live event e.g., 999 Festival, to engage the public around online safety.
- Rolling out a digital cyber safety ambassador scheme delivered by volunteers.
- Utilising the GSO package to support the Council's Being Digital Strategy e.g., by offering GSO advice to residents accessing the ICT device loan scheme and ICT terminals in public libraries.
- Exploring strategic opportunities to increase East Sussex Against Scams Partnership Charter Partner membership.

Public Mental Health

2.33 We will continue to pursue a range of projects and initiatives aimed at improving the mental health and wellbeing of East Sussex residents. The findings of a one-off project will be used to develop a systems approach to loneliness which will inform next steps to address this issue in collaboration with system partners. We will also continue to support schools in their role, through leading on the Schools and Colleges Mental Health Network and developing the School Health Service mental health Tier 2 offer.

2.34 The multi-agency East Sussex Suicide Prevention Group coordinates suicide prevention activity through the suicide prevention action plan. The East Sussex Coastal Suicide Prevention Group has a reinvigorated work plan, underpinned by a newly established research programme and a strong partnership approach.

2.35 East Sussex Public Health also take a lead role in delivering the ICS suicide prevention programme which takes a wide and varied approach to addressing some of the key risk factors for suicide. This includes: social media campaigns; training for frontline staff; development of General Practitioner training roles; A&E brief intervention follow-up; bereavement support; Real Time Surveillance systems; and bespoke advice for people at risk of debt.

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2.36 Key work continues both to reduce the likelihood of homelessness and to support people who are homeless. Prior to COVID-19, the annual DPH report 2020 on Health and Housing included recommendations to both reduce homelessness and to support those who are insecurely housed. New roles of Housing and Wellbeing co-ordinators, for people living in temporary and emergency accommodation, are now in place to provide holistic assessments of people's health, well-being, social and finance/employment needs. Additional new roles are also in place to support those people into pre-employment and employment support (the new Employment Co-ordinators as part of the new East Sussex Employability and Skills service for People Living in Temporary Accommodation and Refuges (ESTAR) service). Other support to people who have been rough sleepers include a new Clinical Psychologist and two new mental health workers to support trauma-based care. We have also increased access to the flu and COVID vaccination. As was the case last winter, we are avoiding the use of winter night shelters (e.g. shared sleeping arrangements in local church halls etc.) and instead will provide access to self-contained units of accommodation with full access to rough sleeper initiative services.

2.37 Public Health have just extended the contract with DentAid to provide fortnightly outreach dental services to homeless people via the RSI in both Eastbourne and Hastings. The acceptance criteria are being expanded to include Project Adder clients, and the need for and feasibility of a session in Lewes District is being explored.

Reducing the gap in male life expectancy

2.38 Public Health is working with partners to deliver a programme in Hastings which is focused on creating the conditions for better health and a reduced gap in life expectancy for men living in the borough, compared with the rest of East Sussex. The programme is aimed at creating a social movement, which mobilises collaborative action between men and the services and groups that support them, in order to achieve the following long-term vision: 'Men living in the most deprived communities in

Hastings and St Leonards are living happier, healthier, and longer lives. They are at the heart of decision making about their lives and thrive in strong, supportive, and well-connected communities, where they are able to fulfil their potential.'

Warmer Homes

2.39 Public Health continue to work closely with system partners to lead on a comprehensive fuel poverty reduction programme. Central to this is the free Warm Home Check service providing advice and offering funded home improvements for the most vulnerable, enabling them to keep warm and well at home. Externally funded partnership projects also provide low-carbon heating and home insulation for low-income households living in the least energy efficient homes. We raise awareness through communications activities and training health, housing and social care professionals and voluntary sector workers to support identification and referral of vulnerable people who live in a cold home.

Healthy Child Programme

2.40 Public Health are lead commissioners for the Healthy Child Programme, which includes the provision of the School Health Service and the 0-19 Early Help Service (Health Visiting/ Children's Centres/Keywork). Over the next two years, we plan to continue with the implementation and evaluation of the East Sussex Healthy Schools Programme, and embedding of the Healthy Active Little Ones (HALO) programme for early years settings (which supports a broader range of health and wellbeing topics and includes an awards programme). We will also continue to support the delivery of high quality personal, social, health and economic (PSHE) education through the ongoing establishment of East Sussex PSHE Hubs, commissioned support and partnership work. Other planned work includes: the development of an East Sussex 'Best Start' strategy, the continued expansion of the infant wellbeing project across East Sussex; the development of peer-led perinatal support for parents, a partnership approach to reducing Sudden Infant Death, actions to enhance access to the East Sussex Child Home Safety Advice and Equipment Service, and insight

Adult Social Care and Health gathering/initiatives to support parenting, infant feeding and fathers and non-birthing partners.

Impacts of Covid-19

Health Protection - Impacts of Covid-19

2.41 Significant work continues to react and respond to local infection rates. This includes continued work to report and present accurate data and analysis, produce consistent and well-placed communications, ensure appropriately placed testing sites and test and trace services and to promote vaccine up take.

2.42 The work and function of Infection Control has been both broadened and refined during the pandemic response. We will continue to have a joint collaborative and co-ordinated approach to supporting East Sussex care settings including care homes, extra care housing and supported housing in managing COVID-19 outbreaks with the aim of reducing transmission, protecting the vulnerable and preventing increased demand on healthcare services. Infection control support for care homes is normally provided by CCGs. During the pandemic we have supported the training being delivered by commissioning a provider to provide bespoke service IPC COVID-19 training and we will continue to support where requested.

2.43 During the Pandemic response we have been working collaboratively with the NHS and ICS in Sussex on the National/ Regional Influenza Programme. The programme will target areas of lower uptake, especially BAME, pregnant women and areas of deprivations.

2.44 We will participate in providing clinical leadership and advice to inform the delivery of the COVID-19 Vaccination Programme across Sussex Integrated System. We act as clinical professionals to inform on subject matter including on immunology, infection prevention and control, public health, vaccination service provision, pharmaceutical technology and regulation and medical, nursing, Allied Health professionals and pharmacy professional practice. It is too early to present any meaningful information on the rollout of a vaccine but logistically this will be an enormous undertaking with

great deal of effort required by all those working in social care and health.

2.45 It is difficult to convey the sheer amount of data that has been generated by multiple sources. It has been painstakingly pieced together to help inform decision making and rearranged and presented in different ways to ensure it can be clearly understood by partners, stakeholders and the public and that they are on the journey of understanding with us.

2.46 The Clinical Cell successfully responded to internal and external queries working with teams across the council and across Districts and Boroughs. It works in a limited capacity now but is able to be scaled up quickly to bring in specialist advice and support for a range of situations including:

- Support in accessing COVID-19 testing for specific individuals and groups that fall outside of mainstream testing options.
- Advice on interpreting national guidance.
- Care home visiting policy and procedures and the role of Director of Public Health in assessing the local epidemiological picture to enable care home visits.
- Responding to queries raised by Councillors and Members of Parliament on behalf of their constituents.
- Support for the local tracing partnership team and management of escalations.
- Supporting the NHS and Health system working on logistic planning to prepare for the roll -out of COVID-19 vaccination.

2.47 A Local Outbreak Plan is in place and has been subject to continued update to reflect local learning and latest guidance. The plan outlines the action needed for outbreaks to support care homes and schools, high risk places, settings and communities and vulnerable people. The development of this plan was led by public health but a collective effort across a range of partners, including all parts of the Council, Police, Public Health England, ESHT, CCG, Districts and Boroughs, Sussex Resilience Forum, Health Watch.

2.48 A number of one-off projects have been underway, some of which are mentioned here, to complement and support existing work within the system. As the funding is one-off, proposals are

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designed to effect change which will remain after the end of the project, through building system capability, supporting groups to work together, mitigating against some of the impacts of lockdown (such as increased alcohol consumption, impacts on mental health and loneliness and social isolation) or reinforcing the positive side-effects of lockdown (such as increased physical activity, housing rough sleepers).

2.49 Access to testing has improved alongside increases in lab processing capacity at a national level. We have worked across the system to help set up:

- Three local testing sites (LTS) in Bexhill, Eastbourne and Hastings. We are in discussion for additional LTS sites in Wealden.
- Numerous locations where we deploy Mobile Testing Units (MTU) sites for 2-3 days.
- The Regional Testing Site (RTS) at Plumpton racecourse (in West Sussex RTS also operate at Tangmere and Gatwick).

2.50 Tracing was passed to Local Authorities in late November to contain COVID-19 onward transmission. The programme is known as Local Tracing Partnerships. The purpose is to trace people who have tested positive for COVID-19 (defined as a 'case') whom the national COVID-19 test and trace team have failed to contact.

2.51 The national team attempt to trace for 34 hours after which the case is passed to the East and West Sussex County Council (ESCC/WSCC) combined local tracing partnership team. The call centre (based in WSCC but using local phone numbers) will check all case details with District and Borough records and attempt contact by text and phone. Failure to trace the case may mean that District and Borough Environmental Health Officer teams attend the home address to provide advice on isolation and assess where there might be additional needs or further action required. In some cases, welfare checks by the police will be required.

Vulnerable People

2.52 Support to a wider cohort of vulnerable people was provided through Community Hubs. Community Hubs are led by a partnership of District and Borough Councils, Voluntary Action (VAs)

organisations, and other local voluntary community and social enterprise (VCSE) organisations. The Community Hubs continued as the public's main point of contact for advice and help with general pandemic-related concerns until September 2021. Whilst Community Hubs activities have changed and become integrated with business as usual as social restrictions have been relaxed, there is still a range of support available through Councils and the VCSE organisations.

2.53 It is unclear at this stage the impacts of COVID-19 in the following areas: those with long term conditions; the impacts on people's mental health and wellbeing; the impact of delayed access to health services; and the reported numbers of people experiencing long COVID-19. These areas will continue to be monitored and the operational response to these will be delivered through Public Health and Adult Social Care as part of the broader whole system response.

Personal Protective Equipment

2.54 Since April 2020 we have issued over 3 million emergency supplies of PPE across the county to a range of internal and external teams, including providers, GPs, pharmacies, and crematoriums. We continue to supply PPE to internal teams and to meet the needs of external services where emergency supply is required.

Care sector impacts

2.55 We will continue to work as a whole health and social care system to manage existing and new challenges and requirements as they arise from COVID-19, and deliver co-ordinated support to enable our local independent care sector to provide safe, effective care for our population. This will focus on all aspects of social care, including care homes, home care, Personal Assistants, Extra Care, and supported housing, and for the Council will be managed alongside significant financial risks that have arisen from the pandemic.

Helping people help themselves

2.56 Health and Social Care Connect, the ASCH contact centre, has continued to operate fully throughout the pandemic and will continue to provide a single point for information, advice and access to community health and social care services 7 days a week, from

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8am to 8pm, with the addition of the Shielded Line support for periods of national or local lockdowns. HSCC operates from offices to allow robust telephony and IT systems to be used, ensuring that staff can respond to the high numbers of calls received on a daily basis. The ASCH Programme has further developed the systems already in use to enable these to be used as effectively from a home base as from the office, for those staff who are self-isolating or for periods when it is not possible to physically accommodate the full team in the office, to ensure there is no impact on the service provided.

2.57 Between April and September 2021, HSCC received an average of 13,231 contacts per month, this compares to an average of 11,571 per month in the same period in 2020 (an increase of 14%).

2.58 Hospital discharges to social care settings during the pandemic have been managed by NHS staff, which is a temporary shift from the usual process where people in hospital requiring care on leaving will be assessed by social workers based in the hospital, and have their assessed care needs met through the adult social care department. With NHS staff taking the lead on managing discharges a number of clients have been discharged to community care settings which will in time revert to the ASCH department for ongoing funding. It is likely that these settings will be at a higher cost than would have been negotiated through the ASCH Brokerage service, and this may have an impact on our budget in the future. In the initial response to the pandemic the care home sector was affected by residents who were discharged from hospital without being tested for COVID-19, leading to some infections within care settings. There is also now a new requirement for care home providers to input into a national Capacity Tracker tool which provides the Government with oversight of bed capacity in the health and social care system. We are increasing the resources within the Supply Management service to provide additional support and engagement with care homes and home care providers to help the sector remain sustainable.

2.59 The integrated community health and social care services have implemented Discharge To Assess (D2A)/Home First

pathways. The pathways are designed to avoid prolonged stays in hospital for people awaiting assessment or commissioned services to enable their discharge. Where possible D2A will aim to avoid unnecessary admissions to hospital, and where an admission is necessary, it will ensure that people are discharged as soon as is safe and practical, back to their own homes or to a D2A temporary bed to have their assessment need undertaken by Adult Social Care. If a person is eligible for social care assistance then a care plan would be prepared to meet the person's long term needs and subsequently services arranged.

2.60 Frail adults across East Sussex can receive Technology Enabled Care Services (TECS), to help manage risks and maintain independence at home. TECS includes Telecare, which offers a range of sensors and detectors to meet different needs, such as wearable alert buttons, fall detectors or medication dispensers. The sensors can be monitored 24/7 by a local contact centre. Environmental sensors, such as smoke alarms or flood detectors are also linked to the centre for automatic alerts. Individuals can also benefit from scheduled live or recorded telephone calls to provide welfare checks or reminders during periods of reablement.

2.61 Adults across East Sussex can access our reablement service, which works with adults for a time limited period to support them to maximise their independence and reduce the need for ongoing care and support.

2.62 Our Occupational Therapy service offer preventative clinics around the county where adults and carers can access advice and information on maintaining independence, as well as access some daily living equipment without the need for a full statutory assessment.

2.63 Occupational Therapy services have been affected by the pandemic through the requirement for staff to work from home and to temporarily suspend the clinics which were in operation for people requiring assessments and equipment. The need to ensure social distancing to reduce transmission of the virus to vulnerable adults has seen a risk assessment approach to visits, with people with lower needs being triaged to a pilot Virtual Assessment process. A new clinic has been launched to provide an assessment

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centre based on health clinic models whilst the normal OT clinics are suspended. OT assessments in the longer term will be dependent on robust systems and processes to enable these to be undertaken remotely where this is clinically appropriate. OT services are also looking to the future, by establishing an Occupational Therapy Apprenticeship Scheme with Brighton University, and extending our student placement offer to include physiotherapists and paramedics. It is anticipated that these measures will help with recruitment and retention to keep the OT service stable and functioning. We will need to be responsive to the anticipated increase in demand for OT services through our clients suffering deconditioning and lack of access to health management services during the pandemic lockdown period, and through the effects of long COVID on those who are and will suffer with the longer term post-viral effects.

2.64 One of our key objectives, which has been highlighted and prioritised by the pandemic, is to invest in systems which will enable clients to access information, advice and support using digital platforms. A virtual assistant, or 'chatbot', has been developed for the Blue Badge service which will provide much quicker answers to questions than the telephone and email service does currently. We will expand the systems we already have in place to open these to clients who wish to access their case information. Clients will be able to provide documentary evidence much more quickly and easily than at present, reducing the administrative burden on both them and on our staff.

Health Systems

2.65 Over the next three years we will continue our systematic approach to prevention, health improvement and reducing health inequalities through the services we commission and the approaches we take to meet population health needs. We will work with General Practice, PCNS and community providers to embed proportionate universalism into the mandated NHS Health Check programme, as a foundation to reducing inequalities in health outcomes and maximise the programme's impact as a systematic intervention to identify, prevent and reduce the risk of cardiovascular and other non-communicable diseases.

- We will support CVD prevention in East Sussex through a CVD prevention working group to align NHS CVD prevention initiatives with existing prevention and detection programmes, alongside a targeted approach to reduce health inequalities. We aim to improve the subsequent entry from health checks to interventions that address smoking, harmful alcohol consumption, obesity, sedentary lifestyles and the detection of conditions such as hypertension, hypercholesterolemia, nondiabetic hyperglycaemia/ diabetes and atrial fibrillation. We will also work with partners to ensure there are robust pathways from clinical services to the integrated lifestyle service.
- We will ensure good quality checks are reaching the right people through regular monitoring of coverage and performance. We will support efficiencies where appropriate to align checks with other existing programmes e.g. learning disability or BAME health checks.
- In 2022/23 We will continue to work with partners across East Sussex to implement the Healthy Weight Partnership plan (2021-2026) which has a whole system approach to nutrition and physical activity from wider determinants, e.g., increasing opportunities for active transport and the availability of healthy affordable food, through prevention activities and interventions such as individual weight management programmes. We aim to ensure strong links to our communities and to clinical services to deliver improvements in population health.
- We will continue to work with partners to build a more secure and sustainable food system for our population through the further development of local food partnerships and delivery of action plans focused on ensuring that everyone in East Sussex has physical and economic access to sufficient, safe, and nutritious food that meets their dietary needs and food preferences for an active and healthy life.
- We will work with the provider of our integrated health and wellbeing service, One You East Sussex, to embed learning from the pandemic into future service delivery. We will adopt a hybrid approach to supporting people around weight management, smoking cessation, physical activity, healthy diet and alcohol

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harm reduction, with effective high quality support available online, face-to-face and by telephone. As we move towards the recommissioning of the service in 2023, we will engage with citizens and partners to ensure the new contract continues to support those with the highest needs in our population and is aligned effectively with other health improvement programmes being delivered across the health and care system.

2.66 East Sussex now has a new Alcohol Harm Reduction Strategy (2021-2026). This is a whole systems approach to reducing alcohol harm. Alcohol harm can be physical and may involve hospital admission, social, resulting in relationship breakdown or economic, affecting income and workplace productivity; often it is all three. The strategy has been developed through a collaborative process with 25 local stakeholders. A whole system approach responds to complexity through an ongoing, dynamic, and flexible way of working, focused on tackling the causes of the causes e.g. availability, whilst ensuring that treatment and support are available to those in need. It involves stakeholders from across the system agreeing actions and deciding as a network how to work together in an integrated way to generate sustainable system change. A launch event in December 2021 will bring together senior leaders to from key stakeholders to ensure multi-agency commitment to reduce alcohol related harm and collectively achieve the five ambitions by 2026.

2.67 A new East Sussex Tobacco Control Strategy will be developed collaboratively with partners across the county in 2022. The strategy will address wider determinants of tobacco dependency i.e.: smoke-free organisations including secondary care, healthy workplaces, working with housing providers to create smoke-free social housing, reducing access by disrupting supply and reducing demand for cheap illegal tobacco and through local enforcement of national underage sales legalisation. There will also be emphasis on continued access to quality behavioural support, for people who want to quit, though locally commissioned stop smoking services and community pharmacy (medication and behaviour support).

Planning

2.68 A new post of Strategic Lead for Creating Healthy Places is in place to support the county and district and borough councils to best enable the built and natural environment to improve health and well-being and reduce inequalities. This will be enacted through supporting planning policy, development management and health impact assessment. There will be a strategic framework including the Public Health priority areas for getting health into place. Ultimately a small team will support this work, based in the district and borough planning teams.

Asset based community development

2.69 Public Health continues to commission an Asset Based Wellbeing Programme (Making it Happen). This is delivered by Sussex Community Development Association and partner organisations, supporting target communities in East Sussex to make positive change in their neighbourhoods. This is a 5.5 years programme that started in September 2019 and is initially focussed on 17 neighbourhoods within East Sussex. It uses the principles of Asset Based Community Development to build the confidence and capability of people to come together to tackle issues that matter to them most, with a focus on what is positive and works well in particular populations. The programme contributes to the Council's 'Helping People to Help Themselves' priority, encouraging residents and communities to work together to build better local communities, meet local need, and support individuals to stay independent. An evaluation partner will seek to understand the impact that the programme is having on key outcomes such as people feeling more connected to their community.

EU SHIFT Project

2.70 We are a project partner of a European 2 Seas funded project examining Sexual Health in the those aged 45 and over (SHIFT). Initial need assessments have been completed with those aged over 45 including those who are in harder to reach groups. A web portal and virtual learning environment are being developed with our partners in Belgium, the Netherlands and England, to

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provide information and training for the public and health and social care staff.

Sexual Health services

2.71 Specialist Genito Urinary medicine and contraceptive sexual health services will be procured this year leading to contract start in Autumn 2022. The service model has changed significantly due to accepted national changes, digital innovation and Covid-19. The new model means that appointments will be restricted to those who are, symptomatic, complex or vulnerable after being triaged online, on the phone or through the two dedicated drop in triage sessions. Those wanting general screening with or without simple symptoms being offered online STI testing. Alternatives such as remote services already are and are envisaged to further fulfil a greater access to these services for those residents.

2.72 Contraception will follow the same triage and (if needed) appointment system. Under 20s will be assessed, provided contraception and be able to attend for repeat prescriptions whilst linking them back into the primary care system to ensure their holistic care needs are met. Over 20s will be assessed, offered twelve months (pills, patches or rings) contraception, and referred to GP for repeat prescriptions. Complex cases, coil fittings, implant fittings and care of the vulnerable will all be catered for as normal through the specialist services. Support will be given to organisations who work with the most vulnerable to offer a direct service or clear signposting to specialist services. The condom distribution scheme has been moved to an online platform and will remain so, with some physical 'pick-up' providers such as pharmacies, early help team, school health and GPs.

2.73 Access to face to face contraception and STI services remains greatly reduced due to COVID-19 service delivery model restrictions, however this may not be impinging upon total access for contraception as monitoring has demonstrated no significant upturn in requirements for emergency contraception nor termination of pregnancies. Drop-in clinic sessions are often reported to be still not possible, and access was dependent on phone triage.

2.74 Online services that were boosted or started at the start of Covid-19 are well used. Emergency Hormonal Contraception (EHC) access and prescriptions have remained relatively constant following a 16% drop during 2020. The online offer of EHC also now includes the offer to commence Progesterone only Pill (PoP) contraception. Of the number of requests for EHC, 21% take up the offer of PoP is 21% indicating women who may have had no access to contraception have taken the opportunity to commence contraception. STI testing via online request was also further invested in and marketed during 2020-21 and continues to be utilised often. However actual testing numbers and STI diagnosis are significantly down comparing 2019/20. A number of elements could be creating this effect: access, staffing shortages, a changed focus of chlamydia screening only testing women aged 15-25 rather than previously men and women aged 15-25, changed behaviour resulting in individuals not testing as not been at risk, and testing not being priority for individuals. Condom provision has dropped by 65% in 2020 compared to the previous year in the absence of face to face services. More recently, online provision of condoms has been expanded to all those aged over 13 years of age. It remains unclear what issues may arise from these figures, There could include a growing reservoir of undiagnosed communicable disease as many infections do not have immediately obvious symptoms that would prompt testing. The concern is that the lack of testing is hiding a pool of infections in the residents of East Sussex.

2.75 The risks for East Sussex residents include the potential for undiagnosed communicable STIs (and onward transmission including HIV). The challenges of and fall out from COVID-19 pose significant pressures for our usual aims to promote positive sexual health.

Making best use of resources

2.76 Overall our plans to revisit and refresh our previous (pre-pandemic) plans for how we can further develop our ICP and integrated delivery of services in East Sussex, are designed to make best use of our collective resources and improve our population's health and outcomes. This includes our work to agree where our integrated working can have the most significant impacts

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for our population, and what we will need to deliver during 2021/22 to further strengthen our ICP by 2022.

2.77 To ensure we make continuous progress our in year integration programme focusses on our collective shared priorities across children and young people, community, urgent care, planned care and mental health with an emphasis on the shared quality, efficiency, and productivity gains that can be made through integrated working, as well as improving outcomes.

2.78 At the beginning of 2020/21 the programme was paused in order to deliver the pandemic emergency response. We have since made significant progress as a system to update and reset our in-year integration programme in order to incorporate the learning from new ways of working that were rapidly developed as part of our emergency response, and sustain new models of delivery where there have been agreed benefits.

2.79 As part of this we have reviewed our overarching target operating model (TOM) for community health and social care services across the county that was agreed in 2021/20, in light of the learning from delivering the response to COVID-19, and taking account of the recently published Hospital Discharge Service Guidance. The following areas are now the revised priority projects which will be delivered in the coming 12 – 18 months:

- **Joint review and development of hospital discharge processes** - embedding the hospital discharge hubs that have been developed as part of the pandemic response, including for out of county acute pathways.
- In the context of the above work some specific projects to support Home First Pathways:
 - **Developing a multi-disciplinary, integrated rapid response community team** to support delivery of Home First Pathway 1 (hospital discharge to own home with a package of support), and;
 - **Reviewing Home First Pathway 3** (discharge to temporary nursing or residential beds for assessment), across acute and community health and social care processes and a strategic approach to commissioning, procurement and supplier management of beds.

- **Continuing to implement the use of SingleView** - in community health and social care and linking other key systems in order to give a summary view for staff across more key services.

2.80 A critical focus for our system will continue to be avoiding attendance and admissions to hospital where alternative services can be provided, and ensuring that patients are discharged to their own homes or into appropriate care settings in a timely and appropriate way.

2.81 Our current system focus has necessarily shifted to the immediate collaborative working required to rapidly improve the flow of patients Medically Ready for Discharge (MRD) from hospital, as we move into the winter period. This includes increased use of Home First Pathway 1 (discharge to a person's own home with a package of care), an increase in same day discharges, and more effective utilisation of Discharge to Assess (D2A) and community bed provision. This work will complement the broader community programme of work set out above, which is designed to embed more sustainable system working in this area and improve longer term health and wellbeing for frail older people and those with multiple long-term conditions. We expect to see impacts being evidenced over the next three months as the new processes start to embed, and these will be further formalised in 2021/22 as part of our community TOM.

2.82 It is also the intention to establish strong links between the community health and social care TOM and our system work in the following areas:

- Developing and delivering a system approach to supporting care homes through building on the East Sussex Care Homes Resilience Plan, clinical support offer and mutual aid support and the primary care Directed Enhanced Service developments to deliver a cohesive model of support to the care market.
- The potential to develop a strategic partnership approach to workforce with Primary Care Networks, community health providers and Adult Social Care relating to allied health professional and new practitioner roles.

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- Links with wider integrated working in our communities, including the work to develop a sustainable model for the Community Hubs that were created by the Council, district and borough councils, the VCSE, and CCG in response to COVID-19 and lock down.

2.83 A project is also taking forward further expansion of the High Intensity User service that was successfully introduced last year in East Sussex, refining the offer and delivering to a wider potential cohort of people who frequently use emergency services including opportunities to collaborate with Brighton and Hove.

2.84 Work has been taking place to develop and shape a single plan and integration programme for Mental Health services in East Sussex and the following key areas of focus have been agreed for project development in 2021/22:

- **Emotional wellbeing services** – developing integrated teams aligned with Primary Care Networks to ensure improved access to a wide range of primary care based mental health services, including Improved Access to Psychological Therapies (IAPT) and Health in Mind.
- **Community Services enhancements** – to provide a consistent range of specialist services for adults with personality disorders, eating disorders and rehabilitation in line with the NHS Long Term Plan commitments.
- **Housing and supported accommodation needs and pathways** – working with district and borough council partners as part of wider work on accommodation related support to ensure a focus on mental health accommodation needs.

Primary care

2.85 General Practice and Community Pharmacy play a vital role, given their footfall, for opportunistic delivery of public health commissioned services including smoking cessation, NHS Health Checks and contraception and STI testing. COVID-19 has seriously affected access to primary care. The situation prompted earlier and additional review of service delivery and how they might be made more effective through targeting, signposting to specialist services and aligning with existing service provision.

Publicly owned green space

2.86 We plan to work with partners in East Sussex to develop a methodology for understanding the natural capital, social and health and wellbeing value of publicly owned green spaces. The aim is that these methodologies will support organisations to understand the potential of green and open spaces in public ownership for delivering benefits for nature and people - thus increasing their relevance across a range of public sector objectives including climate change, health and wellbeing, biodiversity and environmental quality.

Public Health as a centre for excellence

2.87 We will continue to host a Foundation Year 2 Doctor rotation and at least one Speciality Trainee in Public Health. We will continue work to enable our team to be 'research ready' and develop and strengthen links with our local universities and other academic partners including the National Institute for Health Research.

Arts and Culture

2.88 Commissioners will use the evaluation of the COVID-19 recovery project - Everyday Creativity - which enabled participants from five different population groups impacted by COVID to codesign and /or participate in creative and artistic activities with the aim of improving wellbeing and connection. To further develop an approach of working with creativity and creative practitioners to improve health and wellbeing of our population.

Impact of COVID-19 on performance measures

2.89 In 2020/21 COVID-19 impacted on the delivery of some performance measures due to the re-prioritisation of services as part of our response to the pandemic.

2.90 Capacity for rehabilitation and reablement was reduced as a result of COVID-19 due to the temporary redeployment of rehab services to support Covid positive patients in the Community. Performance for the two related performance measures showed a decrease in 2020/21 but have now improved above targets level in 2021/22:

Adult Social Care and Health

- Achieve independence for older people through rehabilitation/intermediate care
- The proportion of people who received short-term services during the year, where no further request was made for ongoing support

2.91 Additionally, NHS Hospital Discharge Covid-19 Funding was in place since March 2020 to support the timely discharge of patients from hospital to community. When a person is discharged under this scheme all care is fully funded by the NHS. As a result of this, Direct Payments were not offered as an immediate option but instead discussed with individuals as and when NHS Funding ceased and funding was picked up by Adult Social Care. This in turn has impacted on the performance indicator for Direct Payments and has continued to do so in the first half of 2021/22 as NHS Funding under Hospital Discharge continues.

Carbon Footprint

2.92 The majority of our Operational Teams have been remote working since the start of the pandemic. This in turn has meant that staff are travelling less to their normal place of work, there has been an increase in virtual assessments with clients and families, and the introduction of Microsoft Teams has also meant less travel time across the county travelling to meetings. All of this has contributed to our commitment of reducing our carbon footprint.

2.93 With more staff working from home and less staff being in offices, this has also reduced the need for lighting and heating within some buildings.

2.94 This new way of working will continue as we look for staff to return to offices through our Team Agreements and the continuation of a hybrid way of working.

Equalities

2.95 Our equality and inclusion strategy is a three-year strategy that sets out our commitment to equality and diversity, and how we will:

- tackle equality issues
- aim to eliminate discrimination

- create good relationships between communities
- ensure those from different backgrounds have similar life opportunities

2.96 The strategy has 5 priority areas:

- Priority 1: Know our communities - We want to get to know our communities better. This will enable us to understand the diverse needs of our service users and help us to target and use our resources better.
- Priority 2: Have inclusivity at the heart of service development and strengthening engagement with communities - We want to keep our residents and staff at the centre of our planning, service provision and development. This will help us to achieve better outcomes of social care provision.
- Priority 3: Create a safe, fair and inclusive work environment - We want to create a safe, fair and inclusive work environment for our staff to make sure that service provision is the best it can be.
- Priority 4: Use robust data collection from service users and use of data for equality analysis - We want to strengthen our equality monitoring and use data to improve our equality analysis and service provision.
- Priority 5: Strengthen Adult Social Care and Health staff practice and knowledge on all aspects of equality and human rights as they connect with ASCH work - Better informed staff will have the confidence to address issues of equality and diversity through strength-based practice

2.97 Annual Procurement Forward Plans were introduced during 2019/20 to enable the Council to maintain an oversight of procurement activity across a full range of Council services. The Forward Plans also enable the Procurement team to plan ahead and prioritise resource on the projects where they can add most value. Procurement Officers worked with their service stakeholders and commissioners to develop the Forward Plans for each directorate area across the Council. For 2022/23, there will be an estimated 14 projects being worked on by Procurement over £1m in

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value, covering the areas of this Portfolio. Attached as Appendix 1
are the details of these projects.

Performance Measures and Targets

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	The proportion of service users discharged from the Joint Community Rehabilitation Service that do not require on-going care	<u>56%</u>	59%	<u>>55.0%</u>	<u>>55.0%</u>	<u>>55.0%</u>	Adults who have required support are able to live as independently as possible. Delivery outcome 12.
Cllr Maynard	National outcome measure: The proportion of people who use services who say that those services have made them feel safe and secure (Adult Social Care Survey)	Cannot be implemented due to COVID-19	87.1%	>83.6%	>83.6%	>83.6%	Services received by adults with long term support also have a positive impact on their safety. Delivery outcomes 8 and 9.
Cllr Maynard	National outcome measure: Proportion of working age adults and older people receiving self-directed support CP	100%	100% (4,583 clients)	100%	100%	100%	Adults are able to take control of the support they receive. Delivery outcomes 11 and 12.
Cllr Maynard	National outcome measure: Proportion of working age adults and older people receiving direct payments CP	<u>33.9%</u>	32.7%	<u>≥31.5%</u>	<u>≥31.5%</u>	<u>≥31.5%</u>	Adults who have required support are able to live as independently as possible. Delivery outcome 12.
Cllr Maynard	The proportion of clients who find it easy to find information about services (Adult Social Care Survey)	N/A	74.5%	>72.0%	>72.0%	>72.0%	Adults who need our support are able to easily find the appropriate service information. Delivery outcome 11.
Cllr Maynard	Number of carers supported through short-term crisis intervention CP	100	474	390	390	390	To support carers when they most need it to enable them to carry on in their caring role. Delivery outcome 12.
Cllr Maynard	National outcome measure: Proportion of people who use services, who reported that they had as much social contact as they would like (Adult Social Care Survey)	N/A	47.7%	<u>≥48.7%</u>	<u>≥48.7%</u>	<u>≥48.7%</u>	Adults supported by the department do not become socially isolated. Delivery outcomes 7 and 12.

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Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	National outcome measure: Self-reported experience of social care users quality of life (Adult Social Care Survey)	N/A	19.6	≥19.5	≥19.5	≥19.5	To monitor various aspects of quality of life and the impact service provision has. Delivery outcomes 7 and 12.
Cllr Maynard	National outcome measure: The proportion of people who use services who have control over their daily life (Adult Social Care Survey)	N/A	83.1%	≥80.7%	≥80.7%	≥80.7%	The services received by adults complement their ability to maintain control over how they live their lives. Delivery outcomes 7 and 12.
Cllr Maynard	National outcome measure: Overall satisfaction of people who use services with their care and support (Adult Social Care Survey)	N/A	66.1%	>68.0%	>68.0%	>68.0%	Adults who use adult social care services are satisfied by what they receive. Delivery outcomes 9 and 12.
Cllr Maynard	Satisfaction rates for people with mental health conditions arising from NHS mental healthcare	80.7%	80% of respondents 'positive'	80% of respondents 'positive'	80% of respondents 'positive'	80% of respondents 'positive'	Adults who use mental health services are satisfied by what they receive. Delivery outcome 12.
Cllr Maynard	Proportion of people with mental health conditions likely to recommend NHS mental healthcare	50.3%	55% 'extremely likely' to recommend	50% 'extremely likely' to recommend	50% 'extremely likely' to recommend	50% 'extremely likely' to recommend	The services received by adults complement their ability to maintain control over how they live their lives. Delivery outcomes 7 and 12.
Cllr Maynard	Outcomes for people with mental health conditions arising from NHS mental healthcare: number of people entering treatment	7,483	10,101	7,500	7,500	7,500	To monitor the number of people who are being supported by NHS mental health services. Delivery outcome 12

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Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	Outcomes for people with mental health conditions arising from NHS mental healthcare: percentage of people completing treatment	44.5%	50%	50%	50%	50%	Adults who use mental health services are satisfied by what they receive. Delivery outcome 12
Cllr Maynard	Percentage of interventions for Joint Community Rehabilitation started within 5 days timescales	59%	56%	60%	60%	60%	Services are provided in a timely manner. Delivery outcomes 11, 12 and 14.
Cllr Maynard	Percentage of Health and Social Care Connect referrals triaged and progressed to required services within 24 hours CP	New measure 2022/23	N/A	95%	95%	95%	Services are provided in a timely manner. Delivery outcomes 11, 14, 15 and 16.
Cllr Maynard	Percentage of Health and Social Care Connect contacts that are appropriate and effective (i.e. lead to the provision of necessary additional services) CP	98%	98%	95%	95%	95%	Monitor the number of contacts from health professionals that aren't taken any further. Delivery outcomes 11, 14, 15 and 16.
Cllr Maynard	Number of people receiving support through housing related floating support CP	7,829	8,919	5,000	5,000	5,000	Adults can maintain their independence. Delivery outcomes 11, 12 and 13.
Cllr Maynard	National outcome measure: Achieve independence for older people through rehabilitation / intermediate care CP	89%	89.7%	>90%	>90%	>90%	Provide effective early intervention to ensure people are given the support they need as quickly as possible, this will also reduce the need for more expensive intensive interventions at a later date ensuring the most effective use of resources. Delivery outcomes 12, 16 and 17.

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Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	Number of providers registered with Support With Confidence CP	296	327	360 (10% increase on 2021/22 outturn)	10% increase on 2022/23 outturn	10% increase on 2023/24 outturn	Increase the options for people who need support ensuring vulnerable people are given effective reliable support to help maintain their independence. Delivery outcomes 8, 9 and 12.
Cllr Maynard	The proportion of people who received short-term services during the year, where no further request was made for ongoing support CP	88.1%	93.7%	>90.5%	>90.5%	>90.5%	Provide effective early intervention to ensure people are given the support they need as quickly as possible, this will also reduce the need for more expensive intensive interventions at a later date ensuring the most effective use of resources. Delivery outcomes 12, 16 and 17.
Cllr Maynard	Number of Newly Qualified Social Workers (NQSW) recruited per relevant team per year across all the care groups	≥1	1	≥1	≥1	≥1	Ensure there are sufficient numbers of staff to meet future service requirements, particularly where there is a local and national shortage and there are high vacancy rates and difficulty recruiting. Delivery outcomes 7, 12 and 14.

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Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	Percentage of respondents who strongly agree or agree that the professionals who are involved in organising and providing their care communicate well with each other and share information to make sure their support is the best it can be (Listening To You) CP	N/A	New measure 2022/23	>56%	To be set 2022/23	To be set 2023/24	Through joint and partnership working as part of the Sussex Health and Care Partnership ensure all available resources are used to deliver maximum benefits to local people and achieve value for money. Delivery outcomes 10, 15 and 16
Cllr Maynard	Number of households vulnerable to the effects of living in a cold home that have received a Warm Home Check	TBC	569	500	500	500	Protect the most vulnerable people from the harmful effects of fuel poverty and living in a cold home by providing support and interventions to help households keep warm and well. Delivery outcomes 8, 12 and 17.
Cllr Maynard	Healthy Active Little Ones (HALO) Programme: Proportion of participating early years settings who have gained the HALO Award or HALO Excellence Award (or achieved improvement in line with specified award criteria)	N/A	N/A	10%	40%	80%	Support early years settings to adopt and embed a 'whole-setting approach' to health and wellbeing – including aspects such as policy development, teaching and learning, staff professional development, engaging with parents/carers, and children's voice – contributing to improved school readiness and health & wellbeing outcomes for children and families. Delivery outcome 6.

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Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	East Sussex Healthy Schools Programme: Proportion of participating schools who have achieved 'Healthy Schools' status via the School Health Check (self-assessment tool).	N/A	N/A	15%	40%	80%	Support schools and colleges to adopt and embed a 'whole-school approach' to health and wellbeing – including aspects such as policy development, teaching and learning, staff professional development, engaging with parents/carers, and pupil voice – contributing to improved health and wellbeing outcomes for children and families. Delivery outcome 6.
Cllr Maynard	East Sussex alcohol strategy – progress against five ambitions agreed in strategy	New measure 2022/23	N/A	Engagement strategy developed and actioned	Collaborative implementation of East Sussex Alcohol Strategy	Continue work to achieve five ambitions	East Sussex residents have a healthier relationship with alcohol. People get the support they need when they need it to recover from alcohol dependence. Alcohol harm in Hastings has been reduced to East Sussex and England levels. Delivery outcomes 2, 7, 9, 11, 15, 16 & 17.
Cllr Maynard	Healthy Weight Partnership (HWP) Plan– progress against actions agreed by HWP in three priority areas- food, physical activity, environment:	New measure 2021/22	Local food partnerships have been established in each district and borough and have action plans in place	Place-based physical activity plans, which are co-produced with local partners, are in place in each district and borough	Demonstrate improvement or maintenance across indicators associated with healthy weight and physical activity	Demonstrate improvement or maintenance across indicators associated with healthy weight and physical activity	Work collaboratively with partners, using a whole system approach, to tackle unhealthy weight (both overweight and underweight) and physical inactivity, with a focus on system-wide prevention and early intervention. Delivery outcomes 12 and 13.

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Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	Number of new service user interventions started through One You East Sussex as part of the Integrated Lifestyle Service CP	4,673	5,204	5,000	Recommissioning Service	To be confirmed following recommissioning in 23/24	Support people (particularly those with multiple lifestyle risk factors such as smoking, excessive alcohol consumption, poor diet and low physical activity) to make changes to improve health outcomes and reduce their risk of developing conditions such as diabetes, cancer and heart disease. Delivery outcomes 12 and 13.
Cllr Maynard	Improving targeting of NHS Health Checks CP	N/A	70% (37/51)	35% uptake rate by eligible patients from IMD1 (pandemic baseline 18%)	50% uptake rate by eligible patients from IMD1	Increase proportion of eligible people referred into lifestyles services as a result of NHS health check	People understand their future risk of developing vascular disease and make changes to their lifestyle, or receive additional clinical advice and support to reduce their risk. Delivery outcomes 12 and 13.
Cllr Maynard	Cumulative number of businesses that have signed up to receive information, advice and support to improve employee health and wellbeing	New measure 2022/23	N/A	300	450	550	Employers are supported to improve the health and wellbeing of their employees, by receiving information and resources to enable them to implement health and wellbeing interventions. Delivery outcomes 2 & 3.

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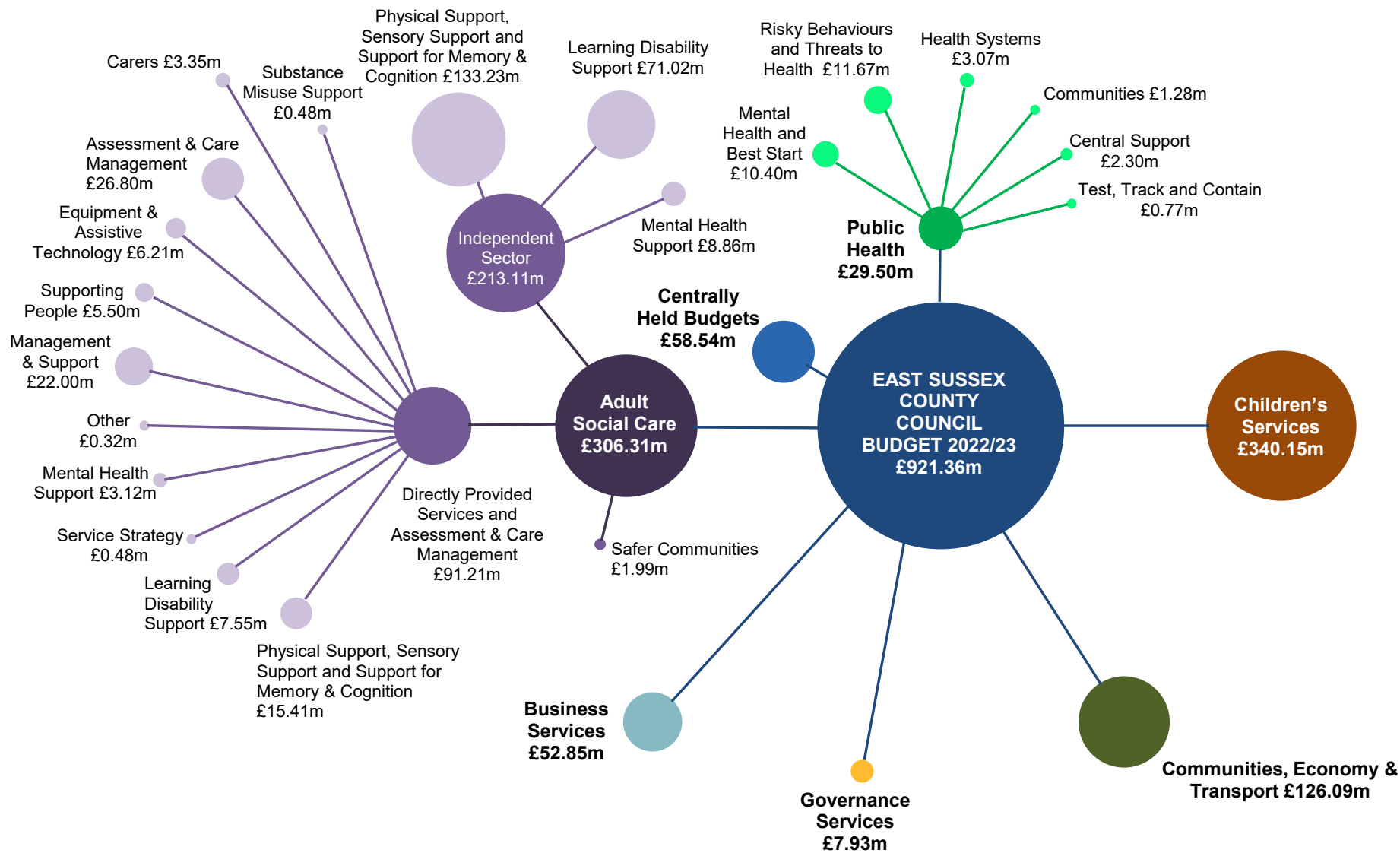
Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	Number of East Sussex Wellbeing at Work awards that have been received by businesses	New measure 2022/23	N/A	25	40	40	Employers are supported and incentivised to improve the health and wellbeing of their employees, by implementing best practice in areas such as mental health, physical activity & active travel, healthy eating, musculoskeletal health and health & safety, Sickness absence, substance misuse, leadership, management & workplace culture Delivery outcomes 2 & 3.
Cllr Maynard	Through the Drug and Alcohol Funding streams commission services that sustain the development of the recovery community in East Sussex CP	Commission services	Services commissioned	Commission services	Commission services	Commission services	The rates of people entering recovery from drug and alcohol misuse are maximised and the stigma associated with misuse is reduced. Delivery outcomes 7, 12 and 13.
Cllr Maynard	The % of people affected by domestic violence and abuse who have improved safety/support measures in place upon leaving the service CP	N/A	90%	80%	80%	80%	To enable vulnerable people who have been affected by domestic violence to feel more in control of their life, and better able to make decisions to increase their safety. Delivery outcomes 7, 8, 9, 11 and 12.

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Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Maynard	When they leave the service the % of those affected by rape, sexual violence and abuse who have improved coping strategies CP	94%	89%	88%	88%	88%	Protect vulnerable people who have been the affected by rape, sexual violence and abuse, and provide them with skills which enable them to be more in control of their lives and more optimistic about the future. Delivery outcomes 7, 8, 9, 11, 12.
Cllr Maynard	The number of community safety training and awareness raising sessions delivered to organisations within the county, including schools, staff, partners and the wider community	110	251	100	100	100	Provide early effective training and awareness to organisations within East Sussex, including schools, staff, partners and the wider community around community safety Delivery outcomes 7, 8, 9, 11, 12 and 13.

CP = Council Plan

Gross Revenue Budget



Totals may differ from sum of components due to rounding

Revenue Budget

Revenue Budget £000

Adult Social Care	Gross 2020/21	Income + Net Recharges 2020/21	Net 2020/21	Gross 2021/22	Income + Net Recharges 2021/22	Net 2021/22	Gross 2022/23	Income + Net Recharges 2022/23	Net 2022/23
Physical Support, Sensory Support and Support for Memory & Cognition	120,380	(43,514)	76,866	126,399	(44,828)	81,571	133,231	(45,393)	87,838
Learning Disability Support	63,737	(4,878)	58,859	71,071	(8,131)	62,940	71,023	(8,131)	62,892
Mental Health Support	7,822	(1,805)	6,017	8,855	(2,305)	6,550	8,855	(2,305)	6,550
Subtotal Independent Sector	191,939	(50,197)	141,742	206,325	(55,264)	151,061	213,109	(55,829)	157,280
Physical Support, Sensory Support and Support for Memory & Cognition	14,927	(4,470)	10,457	14,987	(4,677)	10,310	15,408	(4,710)	10,698
Learning Disability Support	7,163	(236)	6,927	7,507	(569)	6,938	7,545	(534)	7,011
Mental Health Support	3,008	(2,985)	23	3,121	(3,098)	23	3,121	(3,098)	23
Substance Misuse Support	591	(115)	476	476	-	476	476	-	476
Equipment & Assistive Technology	5,599	(3,101)	2,498	6,205	(3,707)	2,498	6,205	(3,707)	2,498
Other	332	-	332	323	-	323	322	-	322
Supporting People	6,830	(310)	6,520	6,434	(310)	6,124	5,504	(310)	5,194
Assessment & Care Management	26,528	(3,558)	22,970	27,128	(2,465)	24,663	26,804	(2,288)	24,516
Carers	3,188	(2,494)	694	3,328	(2,635)	693	3,347	(2,653)	694
Management & Support	20,686	(29,434)	(8,748)	17,818	(29,039)	(11,221)	22,004	(31,312)	(9,308)
Service Strategy	290	-	290	479	(198)	281	478	(198)	280
Subtotal Directly Provided Services and Assessment and Care Management	89,142	(46,703)	42,439	87,806	(46,698)	41,108	91,214	(48,810)	42,404
Total Adult Social Care	281,081	(96,900)	184,181	294,131	(101,962)	192,169	304,323	(104,639)	199,684
Safer Communities	484	(25)	459	1,368	(909)	459	1,988	(909)	1,079
Total Adult Social Care incl Safer Communities	281,565	(96,925)	184,640	295,499	(102,871)	192,628	306,311	(105,548)	200,763

Adult Social Care and Health

Public Health:	Gross 2020/21	Income + Net Recharges 2020/21	Net 2020/21	Gross 2021/22	Income + Net Recharges 2021/22	Net 2021/22	Gross 2022/23	Income + Net Recharges 2022/23	Net 2022/23
Mental Health & Best Start	10,428	-	10,428	10,705	-	10,705	10,399	399	10,798
Risky Behaviours and Threats to Health	11,318	50	11,368	10,500	50	10,550	11,673	(1,300)	10,373
Health Systems	3,083	(17)	3,066	2,766	-	2,766	3,072	-	3,072
Communities	643	-	643	1,278	-	1,278	1,278	-	1,278
Central Support	3,846	(1,649)	2,197	3,103	(328)	2,775	2,304	249	2,553
Test, Track and Contain	-	-	-	1,868	(1,868)	-	773	(773)	-
Public Health Grant	-	(27,702)	(27,702)	-	(28,074)	(28,074)	-	(28,074)	(28,074)
Total Public Health	29,318	(29,318)	0	30,220	(30,220)	0	29,499	(29,499)	0

Capital Programme

Capital Programme, Gross £000

Lead Member	Project	Total for Scheme	Previous Years	2022/23	2023/24	Future Years
Cllr Maynard	Greenacres	2,598	2,454	144	-	-
Cllr Maynard	House Adaptations Fund over and above disabled facilities grant to adapt properties to enable people to stay in their own homes	**	**	50	50	-

**Rolling programme: no total scheme value.

Appendix 1: Annual Procurement Forward Plans

Details of all projected ASC procurements over £1m during 2022/23 are provided below.

Service	Contract Description	Start date for procurement work to begin (estimated)	Start date of new contract(s) or extension (estimated)
Housing & Support Solutions	Block Nursing Beds Dynamic Purchasing System	01/07/2019	01/06/2022
Housing & Support Solutions	Residential & Nursing Dynamic Purchasing System	01/07/2019	01/06/2022
Housing & Support Solutions	Care & Support at Extra Care Housing Schemes	01/04/2020	01/02/2023
Joint Commissioning	Integrated Community Equipment Service	01/08/2021	01/04/2023
Housing & Support Solutions	Telecare	01/08/2021	01/04/2023
Public Health	Web based HIV & STI sampling and diagnostics	01/02/2022	TBC
Strategy, Commissioning & Supply Management	Working Aged Adult Nursing & Residential Approved List	01/06/2022	01/10/2023
Health Improvement	Integrated Lifestyle Services	01/08/2022	07/08/2023
ASC / CSD	Shared Care Information Systems (SCIS) (extension)	01/04/2022	04/12/2022
ASC / CSD	Shared Care Information Systems (SCIS)	01/04/2022	04/12/2024
Public Health	Drug & Alcohol Recovery Services	01/11/2022	01/04/2024
Public Health	Specialist Sexual Health Services	01/05/2022	TBC
ASC	Daycare and Outreach Services	03/01/2023	01/09/2023
Payments	Direct Payment Client Support Services	01/07/2023	01/04/2024

Children's Services

Portfolio Plan 2022/23– 2024/25

July 2022

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Cabinet Portfolio Lead Members

Councillor Bob Bowdler

Lead Member for Children and Families



Responsible for strategy and policy for all Children's Services (social care) matters.

Principal service area responsibilities covered in this plan include child protection and family support, fostering and adoption for children, residential care for children, youth justice, youth service and all ancillary activities.

Councillor Bob Standley

Lead Member for Education and Inclusion, Special Educational Needs and Disability



Responsible for strategy and policy for all Children's Services (education) matters.

Principal service area responsibilities covered in this plan include quality and standards in educational establishments, special educational needs and disability, school admissions and transport, early years and childcare, school organisation and place planning, skills (shared with economy) and all ancillary activities.

Portfolios Overview

1.1 Children's Services contributes significantly to the Council's four key priority outcomes and also plays a key role in the development of strong partnerships across all agencies whose work affects children in East Sussex, with the aim of improving the lives and life chances of children, young people and their families. This plan describes our aims for Children's Services for the next few years. We will continue working as one council, with our partners, to make sure we use the resources we have wisely.

1.2 Our planning processes for 2022/23 and beyond have taken into consideration the impact of the pandemic. The long term impact is unclear at this stage, but the following areas are likely to increase short to medium term pressure:

- the post pandemic high demand for early help and social care support
- the impact on children of long periods out of school
- the widely recognised impact of the pandemic on mental health
- the ending of the temporary uplift to Universal Credit

1.3 All parts of the Department, have a part to play in our response to these pressures.

1.4 In our initial response to the pandemic we made swift and careful changes to the way we work to maintain contact with children. Some of these changes will be retained and developed. Equally workers have resumed face-to-face contact with families to focus on building relationships and understanding what is happening for children on a day-to-day basis.

1.5 Our digital developments will look to develop the way we communicate with children, young people and families. We will develop easier methods for people to access our services and update their information. This will improve outcomes, maximise efficiency and enable us to contribute to the Council's Climate Change agenda through reduced travel. On climate change we will

continue to work with young people and through education settings to support the County Council to achieve net zero by 2050.

1.6 As a local authority we have legal obligations to provide services to our residents. These are set out in law and describe what we must do, at a minimum, to meet these obligations. Nationally the children's system is under increasing pressure with a particular and significant increase in children presenting with emotional wellbeing and mental health difficulties, linked to the impact of the pandemic.

1.7 In line with the Council's Core Offer, which will be funded according to the priority outcomes, we aim to provide the best service offer we are likely to be able to afford. One of our overriding principles is to work, with partners, with the right children and families, in the right way, for the right amount of time to bring about change. This will allow us to fulfil our duties, offer support to those most in need, preserve some level of early help and prevention where it helps manage demand, and assist with the economic development of the county.

1.8 We will look at where we can influence high costs through different practices and service offers and where appropriate and possible, shift resources to where they will have the most impact in terms of both managing demand and ensuring the best outcomes for children and young people and their families.

1.9 Working to mitigate the impacts of the pandemic we will help to create a stable environment in which children can thrive and help families to develop resilience. Individual and community responsibility is fundamental in helping us manage demand over the coming years, supported by good public health services (particularly for young children).

1.10 A strong and integrated 0-19 Early Help service is an important component to effective work with families, using a whole family approach to support we will continue to create a more sustainable system and to improve outcomes for children, young people and families.

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1.11 During the pandemic we saw a rise in the number of children on child protection (CP) plans. Since the start of school term in September 2021 we have also seen a steady rise in the number of children and families needing additional support with increased demand on both the Early Help and Social Care. The number of children in our care has risen slightly because of a combination of factors including more older teenagers coming to the attention of safeguarding partners because of criminal exploitation and participation in the National Transfer system for Unaccompanied Asylum-Seeking Children.

1.12 The [national independent review of social care](#), described by the Chief Social Worker for England as a "once in a generation" opportunity for reform, has published its final report and recommendations. We support the view of the review team that a central aim of our work should be for all children to grow up supported by an enduring network of loving relationships. We are keen to play our part at local level in creating the system of support recommended by the review; the Government will also be publishing a statement of national policy in the autumn, in response and we will need to be ready to respond to new requirements.

1.13 We recognise that strong multi-agency/multi-disciplinary support is needed for families to avoid the need for children to come into the care of the council. We will continue to do all we can to keep families together and will also focus this year on more consistent support for the reunification for more children.

1.14 The Standards and Learning Effectiveness Service (SLES) has refreshed the Excellence for All strategy. It outlines our ambitions for 2021 to 2023 and draws on the innovation and creativity of the work that was done during lockdown on remote learning, participation, and inclusion. Our partnership infrastructure remains the key local mechanism for delivering the shared ambitions set out in this strategy. We will continue to work collaboratively to build capacity for improvement, drive innovation and ensure the very best education for all children and young people across our settings. In doing this we will look to take opportunities created through

national policy, such as the designation of East Sussex as an Education Investment Area.

1.15 School improvement in East Sussex is delivered in partnership with schools. The Primary and Secondary Boards are at the heart of the school-led system, shaping trusted professional practices between schools, academies, and the local authority. Both Boards have played an important role through the last year in supporting schools through the COVID-19 pandemic and then beyond. The boards have set priorities for the current academic year which include a focus on:

- Securing high quality classroom teaching and learning
- Closing 'achievement gaps' where they exist and ensuring the most disadvantaged pupils achieve consistently high outcomes
- Promoting a dynamic curriculum through an emphasis on consistently strong subject leadership
- Prioritising mental health and wellbeing support for Headteachers
- Committing to maximising attendance and minimising exclusions
- Improving language and communication across all phases
- Ensuring effective transition between phases

1.16 We will work with settings, schools, academies and colleges to assist them to discharge their responsibilities for the inclusion of all learners. This will include those who are disadvantaged and/or have Special Educational Needs and/or Disabilities (SEND); promoting good mental health, emotional wellbeing and resilience; and removing barriers to accessing education close to their local communities. We will extend our work with all educational settings to develop their understanding of children's behaviour and continue to roll out training in the Therapeutic Thinking approach to improve the happiness and wellbeing of children and reduce distress which leads to behaviour that is difficult and dangerous.

1.17 We maintain our focus on supporting schools to secure good attendance by children and young people and reduce significantly the level of suspensions and exclusions.

1.18 During the pandemic we saw an increase in the demand for support for children who experienced poor mental health and

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emotional wellbeing. We will continue to target work around these children and families, and support schools to develop their universal offer so that children can access timely interventions.

1.19 Working in partnership with health colleagues we will work to deliver the priorities for children and young people, in the East Sussex Plan for local health and social care integrated working. Our five key priority areas are:

- Best Start in Life
- children and young people's mental health and emotional wellbeing
- safeguarding
- looked after children
- disability pathways

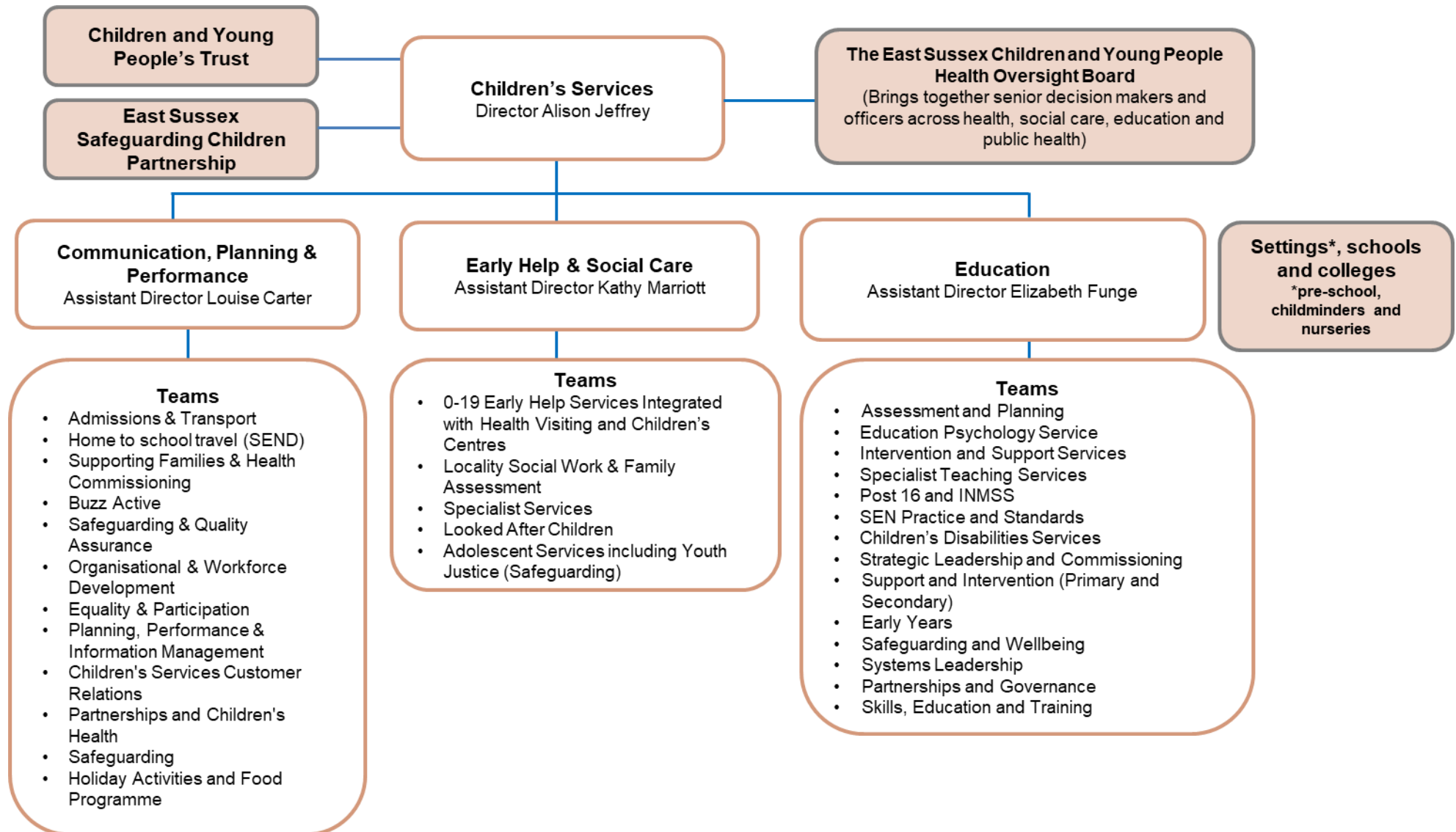
1.20 Through the partnership network of organisations which constitute the Children and Young People's Trust, we aim to work across health, social care, education, and criminal justice. We will work with partners in the statutory and voluntary sector to progress our priorities. We will continue to work with partners to support them to bring in additional resources to focus on three priority areas:

- involving young people in developing preventative services and promoting youth voice
- enhancing support for parents and carers through positive co-production
- partnership working with schools and colleges to improve outcomes

1.21 Drawing on the results of the 2020 staff consultation, we are building on co-design approaches and staff forums to support our programme of staff wellbeing through organisational values of psychological safety, relational practice and kindness. This includes our race equality pilot programme supported by equality and diversity practice leads and refreshing the health and wellbeing strategy.

1.22 We will aspire, within the resources available, to deliver the best possible services within the changing context of Covid-19 and minimise the impacts including on our ability to sustain or improve performance. This is reflected in the performance targets we have set.

Structure Chart



Delivering Priority Outcomes

The Priority Outcomes

The Council has four overarching priority outcomes: driving sustainable economic growth; keeping vulnerable people safe; helping people help themselves; and making best use of resources now and for the future. Making best use of resources now and for the future is the gateway priority through which any activity and accompanying resources must pass. For each priority outcome there are specific delivery outcomes. These are referenced to performance measures in this Portfolio Plan.

Driving sustainable economic growth - delivery outcomes

1. East Sussex businesses are supported to recover and grow through the delivery of the Economy Recovery Plan
2. The county's employment and productivity rates are maximised
3. Individuals, communities and businesses thrive in East Sussex with the environmental and social infrastructure to meet their needs
4. The workforce has and maintains the skills needed for good quality employment to meet the needs of the future East Sussex economy
5. The value of our role as both a significant employer and a buyer of local goods and services is maximised
6. All children progress well from early years to school leaver and into education, training and employment

Keeping vulnerable people safe - delivery outcomes

7. All vulnerable people in East Sussex are known to relevant local agencies and services are delivered together to meet their needs
8. People feel safe at home
9. People feel safe with services
10. We work with the wider health and care system to support people affected by Covid-19 to achieve the best health outcomes possible

Helping people help themselves - delivery outcomes

11. Commissioners and providers from all sectors put people first when providing services and information to help them meet their needs
12. The most vulnerable get the support they need to maintain their independence and this is provided at or as close to home as possible
13. Through our work with others, individuals and communities are encouraged to maintain and develop local mutual support systems



Making best use of resources now and for the future - delivery outcomes

14. Working as One Council, both through the processes we use and how we work across services
15. Delivery through strong and sustained partnership working across the public, voluntary community, and private sectors to ensure that all available resources are used to deliver maximum benefits to local people
16. Ensuring we achieve value for money in the services we commission and provide
17. Maximising the funding available through bidding for funding and lobbying for the best deal for East Sussex
18. To help tackle Climate Change East Sussex County Council activities are carbon neutral as soon as possible and in any event by 2050

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Driving sustainable economic growth

2.1 We will contribute to driving sustainable economic growth by working collaboratively with partners to fulfil our shared strategic ambitions. We will:

- support every setting and partnership to strengthen leadership at all levels, enabling leaders who promote excellence and ensure all children and young people make good levels of progress
- improve literacy and oracy, across all phases, which will have a particular impact on outcomes for disadvantaged students
- take the innovations in approaches to learning and participation, developed during the pandemic, into our post lockdown working to support the inclusion and wellbeing of children and young people and improve skills and qualifications

2.2 In addition, our public health and targeted early help services will help parents to care for their children in ways which effectively promote their development and well-being, so that they can make the most of their opportunities in early years education, school and college.

School Improvement

2.3 The Primary and Secondary Boards are underpinned by Education Improvement Partnerships and Area Groups respectively. These locality groups are led by serving Headteachers and supported by the local authority and our external advisers. Alongside the Boards, the East Sussex Learning Collaborative Network is another critical strand of the school-led improvement system. This network of schools works collaboratively to provide a professional training and support resource to local schools. Members share a commitment to an excellent self-improving school system and to building on the successes of the East Sussex Teaching School Network. The network provides a blended offer of provision for all East Sussex schools that maximises the resources and expertise of local, regional, and national providers to improve co-ordination and avoid duplication of provision in the region.

2.4 Education is a protective factor against many of the risks to good mental health and wellbeing that face children and young people across East Sussex. A key area of our school improvement strategy involves opportunities for schools and settings to develop school communities which promote and foreground good mental health and wellbeing. The Mental Health Support Teams (MHSTs) will continue to be integrated into the existing education and clinical landscapes to support this.

School planning and access

2.5 We will plan and deliver educational provision across the county to meet local need. We will:

- ensure there are sufficient early years and school places where they are needed, including provision for pupils with SEN
- co-ordinate and administer the admission process
- provide home to school transport where we have a statutory duty to do so

Participation in Education, Training and Employment with Training

2.6 We will work with our partners to promote and secure participation and engagement in post 16 education, training, and employment, through:

- good quality careers guidance
- digital tools and resources on career pathways
- targeted support for vulnerable groups including those with SEN
- skills development opportunities which reflect the evolving sector skills priorities of East Sussex

2.7 We will support post-16 providers to understand and respond to local skills needs and economic priorities. Agreed actions will be driven forward through the East Sussex Economy Recovery Plan, under the priority mission 'Building Skills, Creating Jobs'. We will work with partners to ensure we make best use of the opportunities and initiatives announced as part of the Government 'Plan for Jobs' response to the pandemic, including Kickstart, Youth Hubs, Sector Based Work Academies, incentives for apprenticeships and traineeships and an increase in work coaches

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to help ensure all young people have the opportunity to progress into the world of work.

2.8 As the country works towards net zero, and as automation and new ways of working emerge, we will see a shift in skills requirement for all roles. We will need to constantly adapt our learning provision and identify how we can ensure that skills are updated in relation to change. This will address this through:

- research to identify future skills and employment needs and changes
- Skills Development Fund awarded to colleges for new developments
- creating new and adapted training centres
- modular learning opportunities from L3+
- careers campaigns about new roles and emerging technologies and skills requirements for existing roles (e.g., retrofitting, energy, electric vehicles etc)
- exploration of wider net zero education and organisation cultural change (climate awareness training) for those in leadership roles in any sector

Corporate parents

2.9 As good corporate parents we have high aspirations for the children in our care and for young people as they leave care. We set appropriately challenging targets, supporting them to achieve healthy lifestyles, succeed in education and to find work. We use a personal education plan for each child and a pathway plan for each young person to support them via their school, social worker, foster or residential carers and via the Virtual School. This ensures that they can make progress in line with their peers and achieve better in school than children in care nationally, so that they can become successful adults. We have extended support for our care leavers who become parents including the establishment of Care Leavers Council/parents group/peer mentoring for older care leaver parents to mentor new parents.

Attendance and Exclusion

2.10 Across East Sussex, our children and young people have lower rates of attendance and higher exclusion than their peers nationally. Standards and Learning Effectiveness Service (SLES), and Inclusion, Special Educational Needs and Disability (ISEND) teams will continue to work closely together with schools through the Behaviour and Attendance Partnerships, Education Improvement Partnerships (EIPs) and the Primary and Secondary School Improvement Boards to support them to identify ways in which they can develop best practice and secure improvement.

2.11 There will be a continued focus on working with schools to improve the engagement of some families so that they ensure their children are in school, and on improving the quality of teaching and provision of support to ensure that pupils engage in learning and stay in school.

2.12 We will share the learning from targeted resource projects, such as the strategic school improvement fund exclusions and attendance projects and the Hastings Opportunity Area attendance strand, to ensure we maximise impact across the county.

2.13 It is essential that educators understand that all behaviour has a cause and a purpose and staff must actively identify what the behaviour is communicating and support that underlying need through reasonable adjustments to the curriculum, environment, provision and behaviour policies. Development work through ISEND/SLES strategic change is focussed on this central premise.

2.14 Our new 'Therapeutic Thinking' programme for schools develops understanding and confidence in this area; building capacity in our schools to meet needs, increase learner engagement and reduce exclusion. This approach uses protective and educational consequences not sanctions; seeking to use consequences to safeguard learners and developing safer ways for learners to communicate their needs. This leads to improved mental health and emotional wellbeing, which improves outcomes for all learners in the setting.

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2.15 We will also further develop our work with schools through specific projects aimed at reducing exclusions and promoting shared ownership for all children and young people. This will include the development of a strategic framework that aims at creating a whole-systems approach to reducing exclusions and improving provision for children at risk of exclusion in the county.

Keeping vulnerable people safe

2.16 Targeted early help and children's social care services, together with public health services, make a significant contribution to the delivery of the Council priorities of keeping vulnerable people safe and helping people help themselves.

Early Help

2.17 Early identification is crucial to effective safeguarding. Effective delivery of the Healthy Child programmes, including universal development reviews for all children age 0-5, supports early identification of families with additional needs. We will deliver this via an integrated service with health visitors as part of the 0-19 Early Help service where it helps us manage the demand for higher cost services.

2.18 Following an independent review of young people's emotional health and wellbeing services across Sussex commissioned by leaders in the local NHS Clinical Commissioning Groups, the NHS mental health provider Trust and East Sussex County Council, West Sussex County Council and Brighton and Hove City Council in 2020; the East Sussex Children and Young People's Mental Health and Emotional Wellbeing (MHEW) Group has been set up to drive and oversee the East Sussex place based delivery of Foundations for our Future. The group will develop an East Sussex MHEW strategy and plan which will provide the strategic direction on the commissioning of services for children and young people with MHEW (up to 25). This will include wellbeing promotion and prevention as well as support in crisis. It will align to the East Sussex place-based priorities in the East Sussex Health and Care Partnership Plan 2021/22.

Multi-agency early help and child protection system

2.19 We continue to work effectively with partners as part of the multi-agency early help and child protection system. This system ensures that children and young people who are, or are likely to be, at risk of harm are identified, supported and protected. This is part of a wider multi-agency safeguarding system, underpinned by strong statutory multi-agency governance and scrutiny (by the East Sussex Safeguarding Children Partnership).

2.20 We will provide a statutory social care offer to safeguard children at risk of harm. This includes protecting children, looking after children who are in our care, helping care leavers become successful adults, and managing efficient and effective fostering and residential services.

- When it is clear that a social worker is needed one of the two Multi Agency Safeguarding Hubs (MASH) which cover the whole of East Sussex and are based in Eastbourne and Hastings will respond. The MASH co-locate police, health and social work staff so that responses are joined up, effective and prompt.
- The Child Protection Information Sharing system is now embedded and enables NHS staff, nationally, to be aware when children who are looked after or subject to Child Protection (CP) plans are seen in hospitals anywhere in England.

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2.21 Children's Services use IDACI (Income Deprivation Affecting Children Index) expected rates to measure our performance against comparable authorities. IDACI ranks areas in England from the most to the least deprived, IDACI expected rates are calculated using statistical techniques. Many performance indicators in East Sussex are below IDACI which suggests that East Sussex is managing to keep activity levels below that of other similarly deprived authorities. Although the numbers of children protected via formal interagency Child Protection (CP) plans remains above IDACI. Higher rates of children on CP plans are not feeding through

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to increases in looked after children where numbers have stayed broadly stable and below IDACI.

2.22 There are pressures across the children's social care system and a rise in demand and costs as a result of external factors, for example:

- A lack of, and therefore increased costs for, placements for often very complex children who can't be cared for within the family setting. As a result, we have a new children's home that will open in spring 2022 and we have extended block contracts for supported accommodation for older young people in our care to provide more choice.
- Working with the West Sussex County Council, Brighton and Hove City Council and Surrey County Council, the Regional Adoption Agency, Adoption South East was launched in 2020. The agency's first annual report was very positive despite the inevitable impacts of Covid.
- The Council has committed to taking the equivalent of 0.07% of the total child population over three years as Unaccompanied Asylum Seeking Children (UASC) and to participate actively in the National Transfer Scheme which will mean the Council caring for about 72 UASC 16-18 in total. The amount that the Council can recoup from Central Government is insufficient to cover the costs for these children and young people and this becomes particularly acute when they become care leavers to whom the Council has ongoing support responsibilities.

2.23 We will work with partners to prevent young people from offending and to respond effectively when they do and to develop our response to the criminal exploitation of children.

2.24 In 2020/21 the Council allocated additional funding for two projects: an extension to the existing Family Group Conference Service which allows wider family networks to develop plans to support children who are in need of protection or who may enter care; and No Wrong Door, a model developed successfully in North Yorkshire, which has seen a significant reduction in the numbers

and costs of supporting children and young people who are on the edge of care or who are in the care system. After a delayed start caused by the pandemic, work has now begun with partners on our edge of care model. The additional flexible "edge of care" workforce capacity (including adult service workers) will help families address adult needs and parent their teenagers without the need for care, or with minimal temporary care. We were also successful in a bid to develop a Lifelong Links project which will link to an expanded Family Group conference model and will build stronger support networks around children in our care and young people that we support as care leavers.

2.25 We have been successful in a bid to join with Lancaster University and a number of other local authorities to take forward the Born into Care model that is part of a national focus on safeguarding infants.

Accommodation provision for vulnerable young people

2.26 As corporate parents we will continue to ensure that looked after children live in a place where they are safe and cared for. We continue to work in partnership with colleagues from the District and Borough Councils and with a range of providers from both the private and voluntary sectors to extend and develop housing options for vulnerable young people. This includes care leavers with severe, complex and/or multiple needs (aged 16 – 25) and young homeless people under 18.

Holiday activities and food programme

2.27 Children's Services took a lead in the 2021/22 development of the Department for Education (DfE) Holiday Activities and Food Programme (HAF) for East Sussex. We coordinated free holiday provision, including health food and enriching activities for children who receive benefits-related free school meals. This programme covers activity in Easter, summer and Christmas holidays. The Government has announced that the programme will be extended into 2022/23.

Helping people help themselves

2.28 A key aim of both social care and targeted early help support is to enable families to become resilient and self-sufficient so that they only need universal services in order to thrive. All our support is designed to motivate and empower families so that they can achieve this goal. Following a review, the early help aspects of this support have been increasingly targeted on family keywork, working with families with specific vulnerabilities such as parental substance misuse and/or mental ill health. We know that this both helps families and helps the Council manage demand for more expensive services. We are one of 70 authorities nationally which are expected to be allocated transformation funding to develop the Family Hubs Model in East Sussex. This model includes ensuring integrated advisory and support services are accessible to families of children of all ages, with the goal of stronger families.

2.29 Ongoing government funding has now been confirmed for the Supporting Families (previously Troubled Families) programme over the three years 2022 – 2025. We will also work with partners to promote a whole system, whole family approach for the planning and delivery of services. We will identify as many external funding streams as possible to sustain family support programmes and youth work.

2.30 The East Sussex Children & Young People's Trust (CYPT) hosted a series of partnership webinars during September 2021 to engage with partners to improve our approach to whole system, whole family working and our response to the Supporting Families [Early Help System Guide](#). We plan held an in person CYPT annual event in May 2022, the focus was on the review of the Children and Young People's Plan.

2.31 The volunteering programme will be sustained in our 0-19 Early Help Service so that individual and communities can lead activities that promote health, wellbeing and good development for children.

Inclusion, Special Educational Needs and Disability (ISEND)

2.32 ISEND has an important role to play in supporting children and young people to achieve their very best, keeping vulnerable people safe and helping people help themselves. We will help children and young people with SEND achieve their ambitions and ensure young people have a successful transition to adulthood. We will:

- carry out statutory assessments of pupils with SEN, who have significant barriers to learning
- use our best endeavours to secure the right education provision for those with the greatest need
- fulfil our statutory duties to safeguard and promote the welfare of disabled children who meet the threshold under the continuum of need
- where possible, work to build capacity in Early Years setting to ensure vulnerable young children can attend pre-school settings from two years old and can be supported to attend and succeed in mainstream school
- build on our learning from the challenges arising when ensuring continuity of education during the pandemic to ensure that schools continue to prioritise education for the most vulnerable

2.33 We will ensure that families and children are involved in the development and delivery of services, giving families more choice and control over the services they receive and providing a more personalised response.

2.34 We will ensure that pupils with SEND have good educational outcomes and are able to access high quality SEN provision in their local community education and care settings. We will also ensure that there is a sufficiency of specialist educational placements to provide for the forecast numbers of children with the most complex SEND.

2.35 Work to develop our new co-produced 2022-2024 SEND Strategy is underway. The strategy, will set our high-level direction. It will keep Children and Young People and their families, at the forefront. We are working with East Sussex Parent Carer Forum on

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every aspect of the strategy. A Steering Group (representative of the broader Strategy Governance Group) are driving the development. The strategy will also set out a joint approach to service provision and commissioning across Education, Health and Care. As part of this, we are organising a programme of engagement activities, including with schools, families, and CYP. Some of these are underway, including a co-production session we hosted last week with our new Young SEND Ambassadors. Alongside this, we will be reviewing the Strategy Governance Group. This is to ensure that our Group is as effective as possible to oversee the delivery, and governance of our new strategy. The findings of the recent Joint SEND Joint Strategic Needs Assessment (JSNA) will feed into the strategy. Published in August 2021, the JSNA helps us to better understand what works well and what to improve for our SEND community in East Sussex. The NHS Clinical Commissioning Group, East Sussex Parent Carer Forum, community voluntary sector partners and public health were all involved. The findings included several areas for improvement, the majority of which we had already begun work to address.

2.36 Our previous support for free school applicants meant that the county was successful in securing agreement for four new schools (three special schools and one alternative education provider) from the Department for Education in April 2017. The Workplace, an alternative provision free school and Ropemakers Academy, a special school for children with social, emotional and behavioural difficulties both opened in September 2020. The Flagship School, a special school for children with autism and social, emotional and mental health difficulties opened in September 2021. The Summerdown School, two special schools on the same campus for children with autism and profound and multiple learning difficulties will open in September 2022.

2.37 Following the successful opening of new specialist facilities attached to mainstream schools across the county, we are looking to develop the facilities programme further over the next year and bring more capacity to local mainstream schools. Our SEN place

planning strategy also identifies the need for an expansion of special school places in the north of the county.

2.38 One of our key priorities in the East Sussex Plan for local health and social care integrated working is to develop a single NHS Neurodevelopmental pathway for children and young people up to age 18. The Sussex Learning Disability and Autism Strategy agreed in April 2021 and the Draft East Sussex Development Plan will ensure a place based, whole system solution. The Draft East Sussex Development Plan focuses on four areas: screening and referral, pre-diagnostic support, assessment and post diagnostic support.

2.39 Four Mental Health Support Teams (MHSTs) will continue to operate across the county, and we will work to embed them into 54 targeted schools. Our goal is to deliver high quality interventions to support children and young people who are referred to the service. We will use the learning from these schools to champion the Whole School Approach to mental health and emotional wellbeing, and work with partners to develop a cohesive offer of Whole School Approach support for all schools and colleges. Throughout the year, engagement and communication plans will improve pupil and parent awareness of the MHSTs and we will develop self-referral routes for young people in secondary schools and colleges.

Making best use of resources now and for the future

2.40 We will contribute to the Council's priority outcome of making best use of our resources and using our learning from the pandemic to ensure our services are more innovative, efficient and effective, whilst safeguarding vulnerable children and helping all children to succeed. We use robust evaluation, performance data and case auditing to ensure that our work with children and young people and families is effective and that we are investing in the right interventions. This year we will also be launching a revised quality assurance framework for Early Help and Children's Social Care.

2.41 Income generation is one of the key challenges where there is economic uncertainty. We have developed a range of successful traded services, for example Buzz Active, our schools' Information

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Governance Service, ISEND and SLES services. We will maximise income generation through our traded offer with schools and review fees and charges.

2.42 Buzz Active, through its three sites in Cuckmere, Bushy Wood and Eastbourne allows children, young people and families to connect with nature. This will help to support sustainability and climate change allowing them to connect with and think about protecting the environment.

2.43 We will review our policies and procedures to ensure best use of resources. We will also deliver services and provide access to services very differently in some areas, for example by continuing to:

- shift routine advice to the public and professionals from phone services to web pages
- communicate with service users digitally where appropriate
- collaborate with colleagues using web tools to avoid unnecessary travel time
- use technology to its maximum potential in our joint working across the service

2.44 Experience during lockdown showed that digital solutions can offer families, staff and partnerships better ways of working. We want to use digital developments to improve the difference we make to children, young people and families and maximise our productivity. We'll review opportunities to:

- meet families' needs for online support, advice and information - empowering families to help themselves
- use digital to amplify the child's voice in our practice, help ensure their stories need not be repeated, help looked after children maintain key relationships and understand their journey
- offer carers and providers the online advice and support they need to achieve the best outcomes for children and young people, and get immediate answers to routine requests
- provide colleagues with the skills, systems, and tools to improve their work's effectiveness and efficiency

- make better use of data to work effectively in partnership and to target our services, so that we'll support the right families with the right service at the right time

2.45 We are mindful of the barriers to digital communication, and digital services will put children, young people and families first and support them to get online safely. Where possible, we'll join up digital developments with other departments and partners, so that digital supports whole-system working and removes duplicated activity.

2.46 We are working to improve the use of our data by using the Department of Levelling Up, Housing and Communities (DLUHC) Data Maturity Model. The model is part of their approach to assist local strategic partnerships responsible for the Supporting Families [Early Help System](#). Through this we want to use data to further our understanding of needs across East Sussex and specific areas within the county, optimising services and support, and efficiently evidencing successful family outcomes.

2.47 Completion and registration of the phase 2 new build extension of Lansdowne secure children's home has been delayed due to the impact of Covid on the availability of building materials. This is also the case for the new children's home that is being developed. Lansdowne includes several credentials which will assist with lowering the carbon emissions of the site. These include:

- a ground source heat pump which provides the building with heating or cooling depending on the time of year. This was sized to accommodate the recent extension
- 14 new solar photo voltaic roof panels which will provide the building with an estimated annual generation of approximately 4800 kWh
- as part of the phase 2 car parking provision, we have suitable power infrastructure to install two Electric Vehicle (EV) charging points, once a county-wide EV charging strategy has been agreed.

2.48 The new Specialist Facility, which opened at Lewes Priory in September 2020, offering additional provision for pupils with autism

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(see paragraph 2.33) has large solar panels on the roof which will provide much of the power for lighting.

2.49 Tackling domestic violence and protect the environment / tackling plastic pollution continue to be the priorities for the Youth Cabinet to April 2022. These were the top issues voted for by young people in the East Sussex in the 2020 Make Your Mark-national ballot. The Youth Cabinet is working with Community Safety Partnership, Public Health, Children's Services and others, to inform the Domestic Abuse Strategy. They will promote school-based training on positive relationships. The Youth Cabinet worked with a number of schools across the county on the use of its youth-led schools energy audit. The audit is being used as a template for schools to use in partnership with a national organisation.

2.50 A new Youth Cabinet, elected through schools and appropriate targeted services, was formed in December 2021. The new Youth Cabinet will serve for two years. They will work on the new Make Your Mark priorities for East Sussex young people determined through a ballot in April 2022.

2.51 We will work with partners, for example, through the Children and Young People Trust, the Children and Young People Health Oversight Board and the Youth Infrastructure Forum to champion the involvement of young people in supporting equality priorities. This will include working with them to improve understanding and the experiences of different groups of people. The Youth Cabinet will also promote guidance for schools on promoting a whole school approach to equality and the race equality guidance.

2.52 We will improve our collaborative work on the children and family's agenda with the voluntary, community and social enterprise sector (VCSE). We will do this through partnership mechanisms such as Partnership Plus, the VCSE Alliance and the Youth Infrastructure Forum. We will improve and further develop place-based relationships with smaller, more localised, VCSE organisations who are championing and delivering services for children and families.

2.53 We will progress our Equality Strategy working with our communities, council and external partners and staff, especially through the CS Equality Champions Group and the Divisional Equality Leads Groups. The priority areas for equality are to improve:

- effective data collection and monitoring related to equality protected characteristics
- fair access and positive outcomes from inclusive services
- effective engagement with groups and people with equality protected characteristics or from minority and marginalised backgrounds
- inclusive partnerships and commissioning
- personal safety and tackling harassment
- workforce knowledge and understanding
- diversity and inclusion in recruitment and retention

2.54 The race equality pilot on improving recruitment and retention of black, Asian and minority ethnic people will continue into 2022/23. It will focus on key areas including talent progression, targeted promotion of job opportunities and improving team leaders' confidence in anti-racism.

2.55 We will work more closely with partners to improve collaboration regarding inward investment. This will include developing shared priorities for accessing funding and joint bidding and exploring the development of a proactive 'pipeline' approach to taking advantage of funding opportunities as they arise.

2.56 While savings have to be made, we will take every opportunity to reduce any negative impacts through streamlining services and reviewing priorities carefully.

2.57 Annual Procurement Forward Plans were introduced during 2019/20 to enable the Council to maintain an oversight of procurement activity across a full range of Council services. The forward plans also enable the Procurement team to plan ahead and prioritise resources on the projects where they can add most value. Procurement officers worked with their service stakeholders and commissioners to develop the forward plans for each directorate

Children's Services
area across the Council. For 2022/23, there will be an estimated 10
projects being worked on by Procurement over £1m in value,

covering the areas of this Portfolio. Attached as Appendix 1 are the
details of these projects.

Performance Measures and Targets

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Standley	The percentage of eligible 2 year olds who take up a place with an eligible early years provider CP	90% National Average 69%	84% National Average 62%	Equal to or above the national average	Equal to or above the national average	Equal to or above the national average	All children engage, attain and progress well from early years into education, training and employment Delivery outcomes 4 and 6
Cllr Standley	The percentage of pupils achieving a "good level of development*" at the Early Years Foundation Stage CP <i>*A pupil achieving at least the expected level in each Early Learning Goal (ELG) within the three prime areas of learning, and at least the expected level in each ELG within the literacy and numeracy specific areas of learning</i>	Ac Year 19/20 Measure not monitored as assessments cancelled due to COVID-19	Ac Year 20/21 Measure could not be monitored as assessment results not published	Ac Year 21/22 Equal to or above the national average	Ac Year 22/23 Equal to or above the national average	Ac Year 23/24 Equal to or above the national average	All children engage, attain and progress well from early years into education, training and employment Delivery outcomes 4 and 6
Cllr Standley	Proportion of pupils in all schools who achieved at least the expected standard in each of reading, writing and maths at Key Stage 2	Ac Year 19/20 Measure not monitored as assessments cancelled due to COVID-19	Ac Year 20/21 Measure could not be monitored as assessment results not published	Ac Year 21/22 ≥ 62.7% (ESCC outturn for academic year 2018/19)	Ac Year 22/23 TBC after national data is released in 2022	Ac Year 23/24 TBC after national data is released in 2022	All children engage, attain and progress well from early years into education, training and employment Delivery outcomes 4 and 6
Cllr Standley	Average Progress 8 score for state funded schools CP <i>The average Progress 8 score shows how much progress pupils at this school made between the end of key stage 2 and the end of key stage 4, compared to pupils across England who got similar results at the end of key stage 2</i>	Ac Year 19/20 Measure not monitored as exams cancelled due to COVID-19	Ac Year 20/21 Measure could not be monitored as assessment results not published	Ac Year 21/22 ≥ -0.06 (ESCC outturn for academic year 18/19)	Ac Year 22/23 TBC after national data is released in 2022	Ac Year 23/24 TBC after national data is released in 2022	All children engage, attain and progress well from early years into education, training and employment Delivery outcomes 4 and 6

Children's Services

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Standley	The percentage of disadvantaged pupils achieving at least the expected standard in each of reading, writing and maths at Key Stage 2 CP	Ac Year 19/20 Measure not monitored as assessments cancelled due to Covid-19	Ac Year 20/21 Measure could not be monitored as assessment results not published	Ac Year 21/22 ≥ 45.8% (ESCC outturn for academic year 18/19)	Ac Year 22/23 TBC after national data is released in 2022	Ac Year 23/24 TBC after national data is released in 2022	The gap for disadvantaged pupils at all Key Stages is kept as small as possible so that all children attain and progress well from early years into education, training and employment Delivery outcomes 4 and 6
Cllr Standley	The average Attainment 8 score for disadvantaged pupils CP	Ac Year 19/20 Measure not monitored as exams cancelled due to Covid-19	Ac Year 20/21 Measure could not be monitored as assessment results not published	Ac Year 21/22 ≥ 33.6 (ESCC outturn for academic year 18/19)	Ac Year 22/23 TBC after national data is released in 2022	Ac Year 23/24 TBC after national data is released in 2022	The gap for disadvantaged pupils at all Key Stages is kept as small as possible so that all children attain and progress well from early years into education, training and employment Delivery outcomes 4 and 6
Cllr Standley	The percentage of young people meeting the duty of RPA (Raising the Participation Age) by either participating in education, training or employment with training or undertaking re-engagement provision at academic age 16 (Year 12) CP	94.9%	93%	93%	93%	93%	Young people participate in education, training or employment with training until they are at least 18 improving their long term employment and health prospects Delivery outcomes 4 and 6
Cllr Standley	The percentage of young people meeting the duty of RPA by either participating in education, training or employment with training or undertaking re-engagement provision at academic age 17 (Year 13) CP	89%	85%	86%	86%	86%	Young people participate in education, training or employment with training until they are at least 18 improving their long term employment and health prospects Delivery outcomes 4 and 6

Children's Services

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Standley	The proportion of academic age 16-17 year olds whose Education, Employment and Training (EET) situation is not known	1.2%	1.4%	No more than 3%	No more than 3%	No more than 3%	Young people participate in education, training or employment with training until they are at least 18 improving their long term employment and health prospects Delivery outcomes 4 and 6
Cllr Standley	Proportion of Primary schools judged by Ofsted to be good or outstanding	Measure not monitored as inspections are unlikely to resume before April 2021 due to Covid-19	91.9% (136/148) National Average 88.3%	At or above the national average	At or above the national average	At or above the national average	All children attend a school that is judged to be at least good by Ofsted. All children progress well from early years, through compulsory schooling, into education, training and employment Delivery outcome 6
Cllr Standley	Proportion of Secondary schools judged by Ofsted to be good or outstanding	Measure not monitored as inspections are unlikely to resume before April 2021 due to Covid-19	88.5% (23/26) National Average 78.2%	At or above the national average	At or above the national average	At or above the national average	All children attend a school that is judged to be at least good by Ofsted. All children progress well from early years, through compulsory schooling, into education, training and employment Delivery outcome 6
Cllr Standley	Proportion of Special schools judged by Ofsted to be good or outstanding	Measure not monitored as inspections are unlikely to resume before April 2021 due to Covid-19	100% (10/10) National Average 89.6%	At or above the national average	At or above the national average	At or above the national average	All children attend a school that is judged to be at least good by Ofsted. All children progress well from early years, through compulsory schooling, into education, training and employment Delivery outcome 6

Children's Services

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Standley	The percentage of exclusions in primary schools per school population in that year. (i) Fixed term (ii) Permanent	Ac Year 19/20 Measure not monitored due to COVID-19 and school closures	Ac Year 20/21 Measure could not be monitored as data not published	Ac Year 21/22 Outturn for monitoring only as national data unavailable	Ac Year 22/23 To be set 22/23	Ac Year 23/24 To be set 23/24	Reduced exclusions and improved attendance in primary and secondary schools. All children engage and participate well from early years into education, training and employment Delivery outcome 6
Cllr Standley	The percentage of exclusions in secondary schools per school population in that year: (i) Fixed term (ii) Permanent	Ac Year 19/20 Measure not monitored due to COVID-19 and school closures	Ac Year 20/21 Measure could not be monitored as data not published	Ac Year 21/22 Outturn for monitoring only as national data unavailable	Ac Year 22/23 To be set 22/23	Ac Year 23/24 To be set 23/24	Reduced exclusions and improved attendance in primary and secondary schools. All children engage and participate well from early years into education, training and employment Delivery outcome 6
Cllr Standley	The percentage of children in primary schools who are persistently absent	Ac Year 19/20 Measure not monitored due to COVID-19 and school closures	Ac Year 20/21 Measure could not be monitored as data not published	Ac Year 21/22 Outturn for monitoring only as national data unavailable	Ac Year 22/23 To be set 22/23	Ac Year 23/24 To be set 23/24	Reduced exclusions and improved attendance in primary and secondary schools. All children engage and participate well from early years into education, training and employment Delivery outcome 6
Cllr Standley	The percentage of children in secondary schools who are persistently absent	Ac Year 19/20 Measure not monitored due to COVID-19 and school closures	Ac Year 20/21 Measure could not be monitored as data not published	Ac Year 21/22 Outturn for monitoring only as national data unavailable	Ac Year 22/23 To be set 22/23	Ac Year 23/24 To be set 23/24	All children progress well from early years, through compulsory education, into education, training and employment Delivery outcomes 4 and 6

Children's Services

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Bowdler	Average Progress 8 score for Looked After Children (LAC) CP	Ac Year 19/20 Measure not monitored as exams cancelled due to COVID-19	Ac Year 20/21 Measure could not be monitored as assessment results not published	Ac Year 21/22 No more than 0.5 points below the national average for looked after children	Ac Year 22/23 To be set 22/23	Ac Year 23/24 To be set 23/24	Looked after Children participate in education, training or employment with training until they are at least 18 improving their long term employment and health prospects Delivery outcomes 4 and 6
Cllr Bowdler	The percentage of LAC participating in education, training or employment with training at academic age 16 (Year 12) CP	87%	78%	80%	80%	80%	Looked after Children participate in education, training or employment with training until they are at least 18 improving their long term employment and health prospects Delivery outcomes 4 and 6
Cllr Bowdler	The percentage of LAC participating in education, training or employment with training at academic age 17 (Year 13) CP	75%	82%	70%	70%	70%	Looked after Children participate in education, training or employment with training until they are at least 18 improving their long term employment and health prospects Delivery outcomes 4 and 6
Cllr Bowdler	The percentage of Care Leavers undertaking a Level 4-6 qualification	13%	9%	10%	10%	10%	Children at risk from significant harm are kept safe Delivery outcomes 7 and 15
Cllr Bowdler	Rate of children with a Child Protection Plan (per 10,000 children) CP	49.4 525 children	50.3 536 children	50.3 536 children	To be set 2022/23	To be set 2023/24	Children at risk from significant harm are kept safe Delivery outcomes 7 and 15

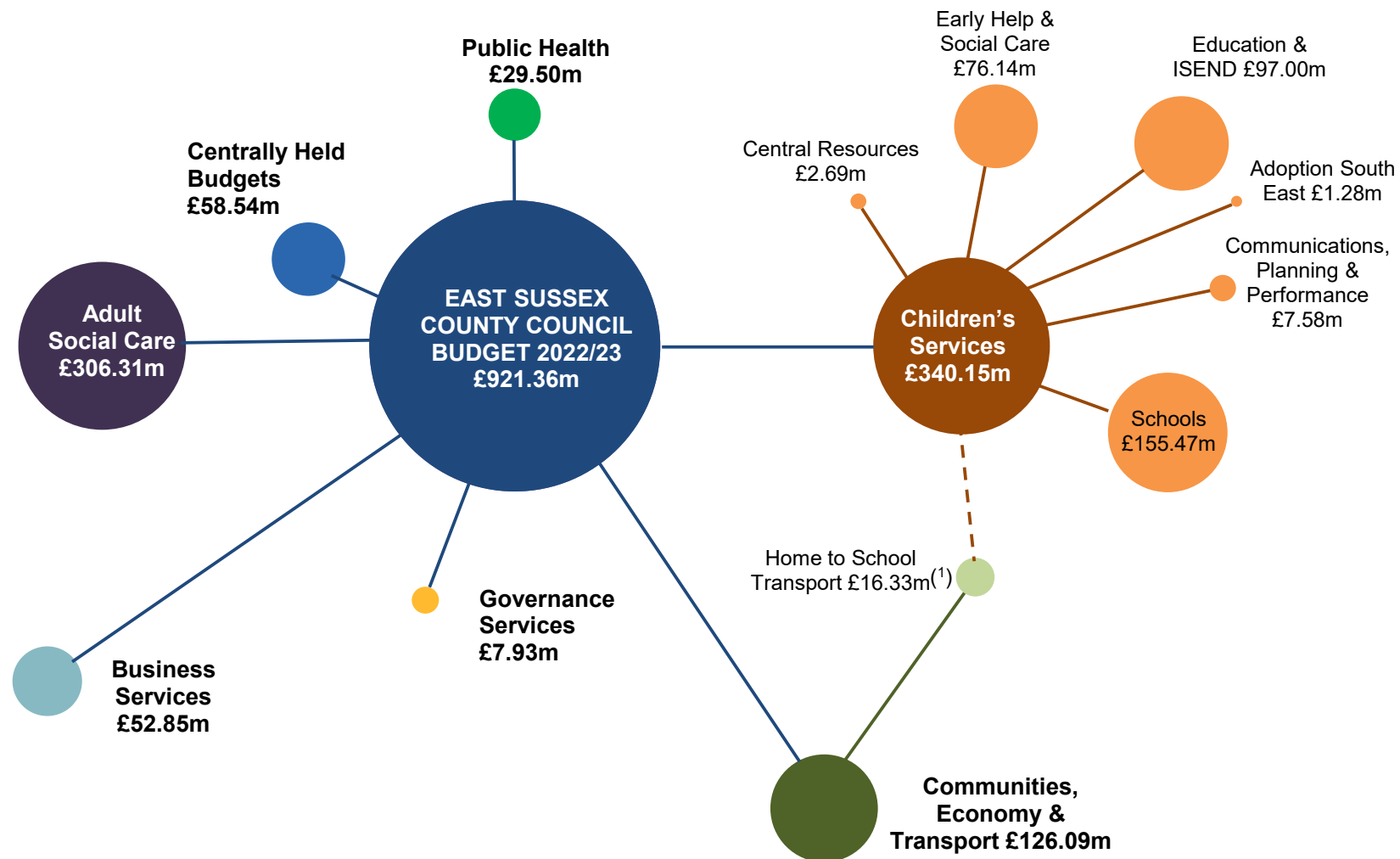
Children's Services

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Bowdler	Rate (of 0-17 population) of referrals to children's social care services (per 10,000 children) CP	359	392	489	489	489	Children at risk from significant harm are kept safe Delivery outcomes 7 and 15
Cllr Bowdler	Rate (of 0-17 population) of assessments completed by children's social care services (per 10,000 children) CP	303	330	517	517	517	Children at risk from significant harm are kept safe Delivery outcomes 7 and 15
Cllr Bowdler	Rate of Looked After Children (per 10,000 children) CP	57.6 612 children	58.9 621 children	59.8 637 children	60.6 646 children	61.9 660 children	Children at risk from significant harm are kept safe Delivery outcomes 7 and 15
Cllr Bowdler	Number of Care Leavers in Bed and Breakfast accommodation (aged 16 – 18)	No care leavers placed in B&B accom	No care leavers placed in B&B accom	No care leavers placed in B&B accom	No care leavers placed in B&B accom	No care leavers placed in B&B accom	Care leavers, aged 16 – 18, are safe and appropriately supported Delivery outcomes 7 and 8
Cllr Bowdler	First Time Entrants (FTE) to the Youth Justice System per 100,000 population aged 10-17	200 FTE per 100,000 population	200 FTE per 100,000 population	Maintain a rate of less than 300 FTE per 100,000 population	Maintain a rate of less than 300 FTE per 100,000 population	Maintain a rate of less than 300 FTE per 100,000 population	The rate of first-time entrants to the youth justice system is maintained to improve outcomes for young children and reduce costs Delivery outcome 7
Cllr Bowdler	The proportion of children who receive a new birth review (all visits)	Updated measure	97.5%	90%	90%	90%	Newborn babies and one year olds are reviewed to check that they are developing well, have the best start in life and are able to progress to their full potential Delivery outcome 11

Children's Services

Lead Member	Performance measure (CP = Council Plan)	2020/21 Outturn	2021/22 Outturn	2022/23 Target	2023/24 Target	2024/25 Target	2021-25 Outcome Summary
Cllr Bowdler	The proportion of children who receive a 1 year review	79.2%	81.7%	80%	80%	80%	Newborn babies and one year olds are reviewed to check that they are developing well, have the best start in life and are able to progress to their full potential Delivery outcome 11
Cllr Standley	Percentage of EHCP (Education, Health and Care Plans) annual review meetings where the child gave their view and/or participated CP	94.1%	94.5%	85%	85%	85%	Children and young people with SEND participate in decisions to ensure that their needs are understood, and they are supported to achieve their potential. Delivery outcome 11
Cllr Standley	The proportion of respondents to the feedback surveys who agree that things have changed for the better as a result of ISEND Services	74.9%	75%	75%	75%	75%	The services provided are making a difference to the lives of service users. Delivery outcome 11
Cllr Bowdler	The proportion of respondents to the feedback surveys who agree that things have changed for the better as a result of getting targeted support from the 0 – 19 Early Help Service CP	91%	93%	80%	80%	80%	The services provided are making a difference to the lives of service users. Delivery outcome 11
Cllr Bowdler	Number of households eligible under the government's Supporting Families programme receiving a family support intervention CP	816	856	1350	1668	To be set 2023/24 pending information from Government	Families supported by a whole family approach to achieve their goals and the Council is able to maximise payment by results claims. Delivery outcomes 11 and 13

Gross Revenue Budget



(1) Home to School Transport is administered by Communities, Economy and Transport on behalf of Children's Services.
Totals may differ from sum of components due to rounding

Revenue Budget

Revenue Budget £000

Divisions	2020/21 Gross	2020/21 Income + Net Recharges	2020/21 Net	2021/22 Gross	2021/22 Income + Net Recharges	2021/22 Net	2022/23 Gross	2022/23 Income + Net Recharges	2022/23 Net
Central Resources	2,639	(1,171)	1,468	2,640	(1,368)	1,272	2,692	(1,421)	1,271
Early Help and Social Care	65,208	(8,957)	56,251	72,369	(11,139)	61,230	76,135	(12,592)	63,543
Education and ISEND	89,112	(1,770)	87,342	95,962	(2,218)	93,744	96,997	(2,697)	94,300
Communications, Planning and Performance	7,422	9,848	17,270	7,065	11,421	18,486	7,575	12,451	20,026
Adoption South East	1,114	(226)	888	1,537	(561)	976	1,282	(227)	1,055
DSG Non Schools	-	(74,381)	(74,381)	-	(80,437)	(80,437)	-	(80,015)	(80,015)
Schools	146,200	(146,200)	-	155,767	(155,767)	-	155,467	(155,467)	-
Total Children's Services	311,695	(222,857)	88,838	335,340	(240,069)	95,271	340,148	(239,968)	100,180

Capital Programme

Capital Programme £000

Lead Member	Project	Total for Scheme	Previous Years	2022/23	2023/24	Future Years
Cllr Bowdler	House Adaptations for Disabled Children's Carers Homes	**	**	50	50	50
Cllr Standley	Schools Delegated Capital	**	**	729	1,150	1,150

** Rolling programme: no total scheme value

Appendix 1: Annual Procurement Forward Plans

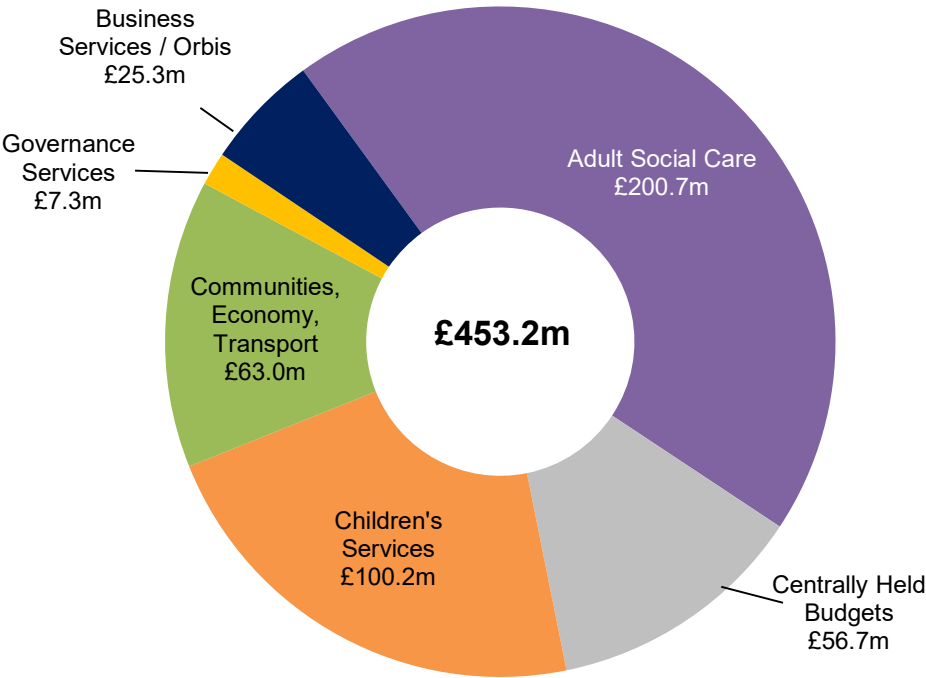
Details of all projected Children's Services procurements over £1m during 2022/23 are provided below.

Data subject to change according to the RPPR process

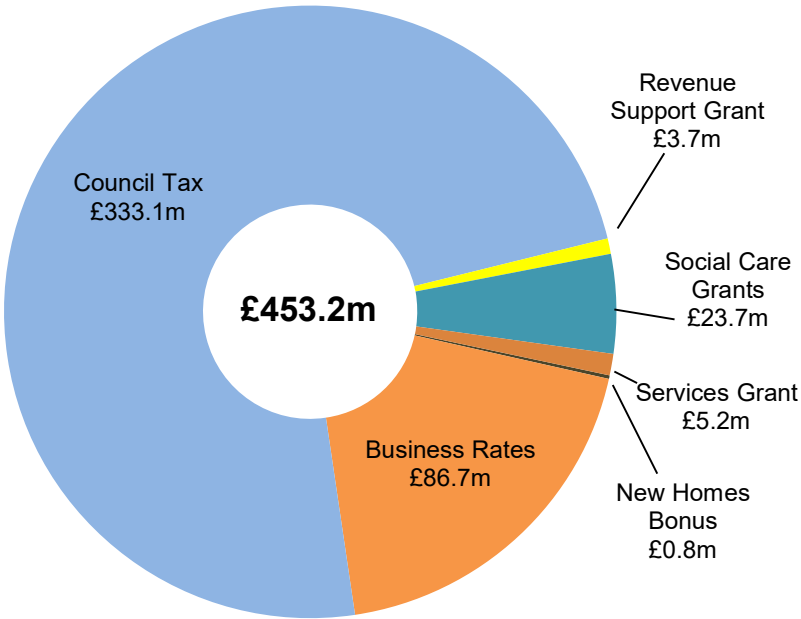
Service	Contract Description	Start date for procurement work to begin (estimated)	Start date of new contract(s) or extension (estimated)
Education and iSend	Targeted Information, Advice & Guidance Service	01/03/2021	01/09/2022
Looked After Children	Framework for Provision of Fostercare Services	01/03/2022	01/04/2023
Early Help & Commissioning	Children's Supported Accommodation Framework	01/07/2022	TBC
Early Help & Commissioning	Supported Accommodation & Move On Beds - extension of various call off contracts under the current Framework Agreement	01/05/2022	08/12/2022
Public Health	School Health Services	01/10/2022	01/01/2023
Looked After Children	Residential Care Framework	01/12/2022	TBC
Looked After Children	External Staffing Solutions	01/12/2022	TBC
Education & ISEND	Youth Employability Service contract (Advice and Guidance)	01/11/2022	01/09/2023
ASC / CSD	Shared Care Information Systems (SCIS) - extension	01/04/2022	04/12/2022
ASC / CSD	Shared Care Information Systems (SCIS)	01/04/2022	04/12/2024

Revenue Budget Summary 2022/23 - net revenue budget

How we will spend your money (net)

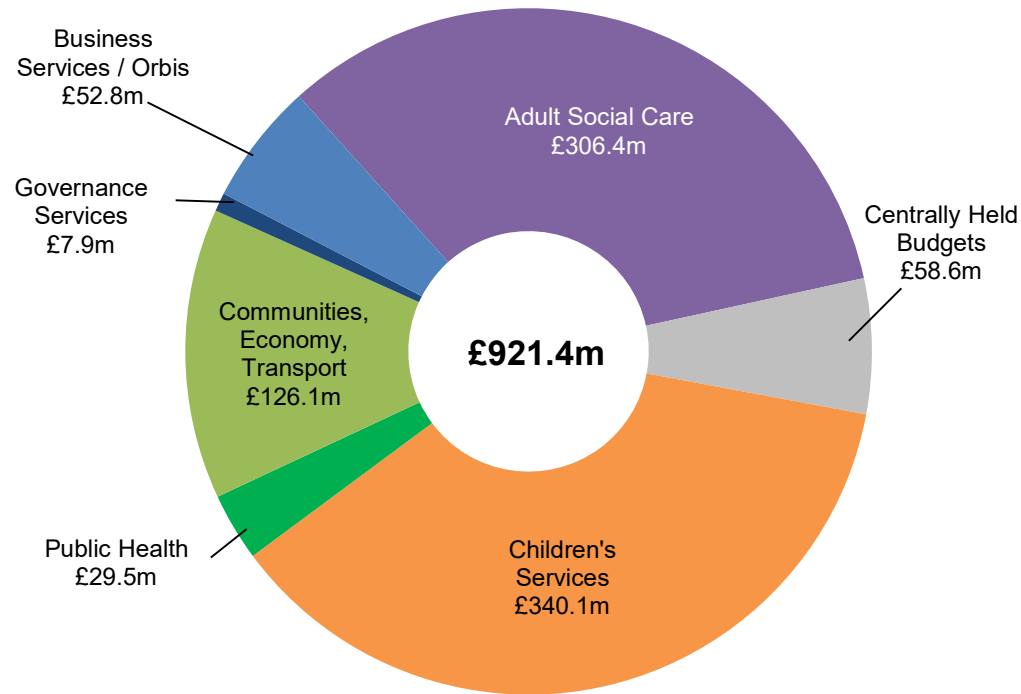


Where the money comes from (net)

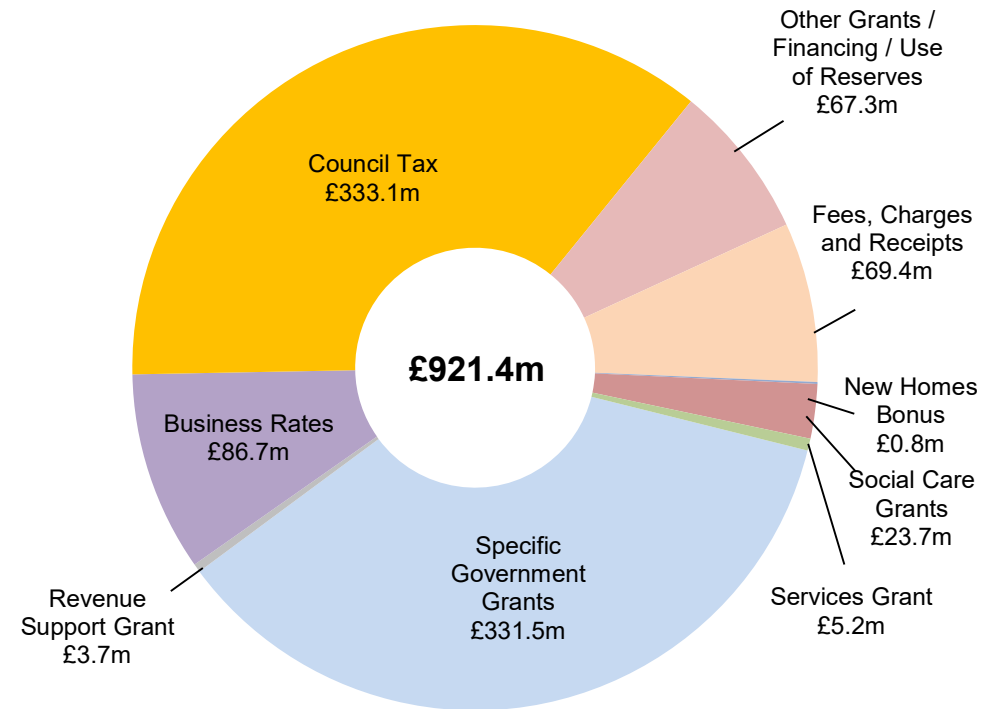


Revenue Budget Summary 2022/23 - gross revenue budget

How we will spend your money (gross)



Where the money comes from (gross)



Revenue Budget Summary 2022/23 - budget changes 2021/22 to 2022/23

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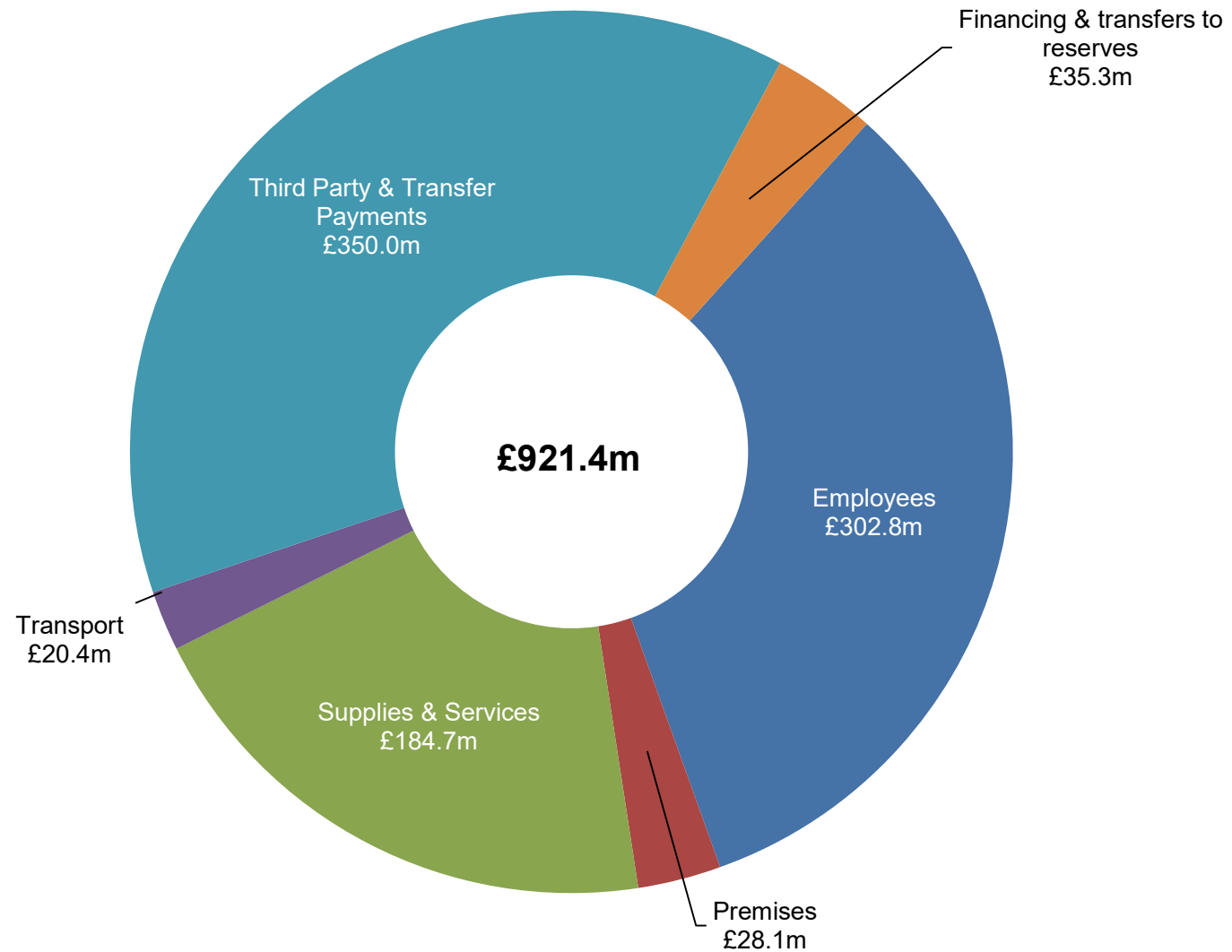
	2021/22 Rebased Net Budget £'000	Additions £'000	Reductions £'000	2022/23 Net Budget £'000	Change £'000 %	
Adult Social Care	192,628	14,402	(6,267)	200,763	8,135	4.22%
Public Health	-	-	-	-	-	0.00%
Business Services / Orbis	24,324	944	-	25,268	944	3.88%
Children's Services (inc. schools)	95,271	4,909	-	100,180	4,909	5.15%
Communities, Economy & Transport	61,942	2,277	(1,257)	62,962	1,020	1.65%
Governance Services	7,209	79	-	7,288	79	1.10%
Total Departments	381,374	22,611	(7,524)	396,461	15,087	3.96%
Centrally held budgets	35,371	21,799	(400)	56,770	21,399	60.50%
Total	416,745	44,410	(7,924)	453,231	36,486	8.75%

NB: increase in Centrally Held budget is due to balances being held for reserves

Revenue Budget Summary 2022/23 - subjective analysis

Department	Employees	Premises	Transport	Supplies & Services	Transfers & Third Party Payments	Financing & Transfers to Reserves	Total Expenditure	Government Grants	Other Grants & Contributions	Fees, Charges & Receipts	Financing & Planned Use of Reserves	Total Income	Internal Recharges (exp & inc)	Net Service Expenditure
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Adult Social Care	53,303	850	1,055	13,925	237,174	4	306,311	(31,241)	(38,041)	(36,716)	-	(105,998)	450	200,763
Public Health	2,047	-	16	461	26,975	-	29,499	(29,424)	(773)	-	(128)	(30,325)	826	-
Business Services / Orbis	9,587	11,651	127	29,977	1,498	6	52,846	(2,193)	(5,279)	(9,862)	(1,058)	(18,392)	(9,186)	25,268
Children's Services	198,915	11,332	1,667	45,306	82,903	25	340,148	(261,765)	3,805	(5,472)	(1,648)	(265,080)	25,112	100,180
Communities Economy & Transport	17,575	3,998	17,473	84,380	534	2,131	126,091	(6,755)	(20,745)	(17,066)	(1,363)	(45,929)	(17,200)	62,962
Governance Services	5,531	317	58	2,014	8	-	7,928	(53)	(307)	(274)	(4)	(638)	(2)	7,288
Services	286,958	28,148	20,396	176,063	349,092	2,166	862,823	(331,431)	(61,340)	(69,390)	(4,201)	(466,362)	-	396,461
Centrally held budgets	15,828	-	-	8,685	912	33,115	58,540	(70)	-	-	(1,700)	(1,770)	-	56,770
Total	302,786	28,148	20,396	184,748	350,004	35,281	921,363	(331,501)	(61,340)	(69,390)	(5,901)	(468,132)	-	453,231

Revenue Budget Summary 2022/23 - subjective analysis



Revenue Budgets - Adult Social Care

2021/22		2022/23														
Rebased Net Budget		Employees	Premises	Transport	Supplies and Services	Third Party & Transfer Payments	Financing and Transfer to Reserves	Total Expenditure	Government Grants	Other Grants and Contributions	Fees, Charges & Receipts	Financing and Planned Use of Reserves	Total Income	Internal Recharges (exp & inc)	Net Service Expenditure	
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	
Page 122	Physical Support, Sensory Support and Support for Memory & Cognition															
	54,290	Residential & Nursing	4,435	209	73	421	71,465	-	76,603	-	(3,218)	(18,479)	-	(21,697)	92	54,998
	6,537	Supported & Other Accommodation	-	-	-	-	6,537	-	6,537	-	-	-	-	-	-	6,537
	27,951	Home Care	5,672	-	253	93	22,412	-	28,430	-	(822)	-	-	(822)	3	27,611
	1,539	Day Care	208	97	-	28	1,485	-	1,818	-	-	(429)	-	(429)	170	1,559
	18,543	Direct Payments	-	-	-	-	18,543	-	18,543	-	-	-	-	-	-	18,543
	(6,633)	Other Services	721	18	8	2,562	13,399	-	16,708	(986)	(16,087)	-	-	(17,073)	-	(365)
	(10,347)	Fairer Charging *	-	-	-	-	-	-	-	-	-	(10,347)	-	(10,347)	-	(10,347)
	-	- Meals in the Community	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	91,880	Subtotal	11,036	324	334	3,104	133,841	-	148,639	(986)	(20,127)	(29,255)	-	(50,368)	265	98,536
	Learning Disability Support															
	45,422	Residential & Nursing	1,640	104	7	92	46,843	-	48,686	-	-	(3,338)	-	(3,338)	25	45,373
	14,120	Supported & Other Accommodation	1,577	22	20	23	12,619	-	14,261	-	(5)	(162)	-	(167)	5	14,099
	1,367	Home Care	-	-	-	-	1,367	-	1,367	-	-	-	-	-	-	1,367
	3,826	Day Care	1,909	95	30	24	1,765	4	3,827	-	-	(372)	-	(372)	442	3,897
	7,506	Direct Payments	-	-	-	-	7,506	-	7,506	-	-	-	-	-	-	7,506
	(1,010)	Other Services	1,565	10	40	56	1,251	-	2,922	(153)	(3,663)	(98)	-	(3,914)	5	(987)
	(1,352)	Fairer Charging *	-	-	-	-	-	-	-	-	-	(1,352)	-	(1,352)	-	(1,352)
	69,879	Subtotal	6,691	231	97	195	71,351	4	78,569	(153)	(3,668)	(5,322)	-	(9,143)	477	69,903
	Mental Health Support															
4,066	Residential & Nursing	-	-	-	-	4,604	-	4,604	-	-	(538)	-	(538)	-	4,066	
2,702	Supported & Other Accommodation	-	-	-	-	2,702	-	2,702	-	-	-	-	-	-	2,702	
431	Home Care	-	-	-	-	431	-	431	-	-	-	-	-	-	431	
34	Day Care	36	3	1	15	35	-	90	-	(52)	(2)	-	(54)	-	36	
1,033	Direct Payments	-	-	-	-	1,033	-	1,033	-	-	-	-	-	-	1,033	
(1,195)	Other Services	-	-	-	-	3,118	-	3,118	(34)	(4,279)	-	-	(4,313)	-	(1,195)	
(497)	Fairer Charging *	-	-	-	-	-	-	-	-	-	(497)	-	(497)	-	(497)	
6,574	Subtotal	36	3	1	15	11,923	-	11,978	(34)	(4,331)	(1,037)	-	(5,402)	-	6,576	

Revenue Budgets - Adult Social Care

2021/22		2022/23													
Rebased Net Budget		Employees	Premises	Transport	Supplies and Services	Third Party & Transfer Payments	Financing and Transfer to Reserves	Total Expenditure	Government Grants	Other Grants and Contributions	Fees, Charges & Receipts	Financing and Planned Use of Reserves	Total Income	Internal Recharges (exp & inc)	Net Service Expenditure
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Substance Misuse Support															
476	Other Services (including residential)	-	-	-	-	476	-	476	-	-	-	-	-	-	476
476	Subtotal	-	-	-	-	476	-	476	-	-	-	-	-	-	476
Other Adult Services															
323	Other Services	148	-	1	36	137	-	322	-	-	-	-	-	-	322
323	Subtotal	148	-	1	36	137	-	322	-	-	-	-	-	-	322
2,498	Equipment & Assistive Technology	-	-	-	4,061	2,144	-	6,205	-	(2,857)	(850)	-	(3,707)	-	2,498
6,124	Supporting People	-	3	-	-	5,501	-	5,504	-	(310)	-	-	(310)	-	5,194
459	Safer Communities	558	-	2	25	1,403	-	1,988	-	(509)	-	-	(509)	(400)	1,079
24,663	Assessment & Care Management	25,598	80	208	409	509	-	26,804	(54)	(2,121)	(127)	-	(2,302)	15	24,517
694	Carers	1,180	-	78	205	1,885	-	3,348	-	(2,653)	-	-	(2,653)	-	695
16,324	Management & Support	8,056	209	334	981	8,004	-	17,584	(364)	(1,465)	(125)	-	(1,954)	93	15,723
(27,266)	Improved Better Care Fund and Disabled Facilities Grant	-	-	-	-	-	-	-	(27,905)	-	-	-	(27,905)	-	(27,905)
-	Adult Social Care Reform	-	-	-	4,894	-	-	4,894	(1,745)	-	-	-	(1,745)	-	3,149
192,628	Total	53,303	850	1,055	13,925	237,174	4	306,311	(31,241)	(38,041)	(36,716)	-	(105,998)	450	200,763

* Fairer Charging is income from clients for non residential/nursing services. This represents contributions towards packages of care that may include a combination of Supported Accommodation, Home Care, Day Care, Direct Payments or Other Services.

Main changes between years	£'000
Rebased Net Budget 2021/22	192,628
Growth / Pressures	(3,058)
Inflation	11,253
Savings	-
Pay award	-
Tfrs between depts	(60)
Departmental Estimate 2022/23	200,763

Revenue Budgets - Public Health

2021/22	2022/23													
Rebased Net Budget	Employees	Premises	Transport	Supplies & Services	Transfers & Third Party Payments	Financing & Transfers to Reserves	Total Expenditure	Government Grants	Other Grants & Contributions	Fees, Charges & Receipts	Financing & Planned Use of Reserves	Total Income	Internal Recharges (exp & inc)	Net Service Expenditure
£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
10,705 Mental Health and Best Start	-	-	-	-	10,397	-	10,397	-	-	-	-	-	400	10,797
10,550 Risky Behaviours and Threats to Health	13	-	-	60	11,600	-	11,673	(1,350)	-	-	-	(1,350)	50	10,373
2,766 Health Systems	-	-	-	10	3,063	-	3,073	-	-	-	-	-	-	3,073
1,278 Communities	-	-	-	-	1,278	-	1,278	-	-	-	-	-	-	1,278
(25,299) Central Support	2,034	-	16	391	637	-	3,078	(28,074)	(773)	-	(128)	(28,975)	376	(25,521)
- Total	2,047	-	16	461	26,975	-	29,499	(29,424)	(773)	-	(128)	(30,325)	826	-

Main changes between years	£'000
Rebased Net Budget 2021/22	-
Growth / Pressures	-
Inflation	-
Savings	-
Pay award	-
Tfrs between depts	-
Departmental Estimate 2022/23	-

Revenue Budgets - Children's Services

2021/22		2022/23													
Rebased Net Budget		Employees	Premises	Transport	Supplies & Services	Transfers & Third Party Payments	Financing & Transfers to Reserves	Total Expenditure	Government Grants	Other Grants & Contributions	Fees, Charges & Receipts	Financing & Planned Use of Reserves	Total Income	Internal Recharges (exp & inc)	Net Service Expenditure
£'000		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Early Help & Social Care															
1,137	Policy Support & Commissioned Services	313	-	2	39	660	-	1,014	-	(82)	-	-	(82)	206	1,138
5,660	Early Help Keywork and Children's Centres	6,010	410	180	1,196	100	-	7,896	-	(1,967)	(55)	-	(2,022)	(187)	5,687
12,784	Locality Social Work & Family Assessment	9,429	-	221	386	4,501	-	14,537	-	(262)	-	-	(262)	16	14,291
37,114	Looked After Children	12,790	201	569	2,324	28,743	25	44,652	(1,605)	(282)	(3,683)	(1,125)	(6,695)	235	38,192
3,289	Other Children & Families	2,058	32	67	104	4,177	-	6,438	(2,328)	(521)	-	-	(2,849)	(201)	3,388
707	Youth Justice	1,310	28	31	29	197	-	1,595	(654)	(212)	-	-	(866)	-	729
60,691	Subtotal	31,910	671	1,070	4,078	38,378	25	76,132	(4,587)	(3,326)	(3,738)	(1,125)	(12,776)	69	63,425
Education & ISEND															
11,818	ISEND	19,054	106	346	6,007	41,517	-	67,030	(53,043)	(112)	(669)	-	(53,824)	(845)	12,361
2,775	Standards & Learning Effectiveness	4,318	-	87	24,690	585	-	29,680	(26,603)	(2,095)	(190)	(35)	(28,923)	2,016	2,773
281	Other Education	214	-	-	73	-	-	287	(6)	-	-	-	(6)	-	281
14,874	Subtotal	23,586	106	433	30,770	42,102	-	96,997	(79,652)	(2,207)	(859)	(35)	(82,753)	1,171	15,415
976	Adoption South East	1,043	-	36	203	-	-	1,282	-	(228)	-	-	(228)	1	1,055
-	Schools	134,214	10,508	59	8,353	2,333	-	155,467	(173,602)	9,819	-	(201)	(163,984)	8,517	-
Management & Support															
14,312	Admissions & Transport	497	-	7	269	2	-	775	(1,102)	-	(25)	(220)	(1,347)	16,342	15,770
2,827	Management & Support	6,029	47	29	1,513	88	-	7,706	(2,822)	(145)	(842)	(67)	(3,876)	(1,003)	2,827
1,591	Safeguarding	1,636	-	33	120	-	-	1,789	-	(108)	(8)	-	(116)	15	1,688
18,730	Subtotal	8,162	47	69	1,902	90	-	10,270	(3,924)	(253)	(875)	(287)	(5,339)	15,354	20,285
95,271	Total	198,915	11,332	1,667	45,306	82,903	25	340,148	(261,765)	3,805	(5,472)	(1,648)	(265,080)	25,112	100,180

Main changes between years		£'000
Rebased Net Budget 2021/22		95,271
Growth / Pressures		3,240
Inflation		1,669
Savings		-
Pay award		-
Tfrs between depts		-
Departmental Estimate 2022/23		100,180

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Report to:	People Scrutiny Committee
Date of meeting:	17 November 2022
By:	Assistant Chief Executive
Title:	People Scrutiny Committee Work Programme
Purpose:	To review and discuss the People Scrutiny Committee's future work programme

RECOMMENDATIONS: The Committee is recommended to:

- 1) review and agree the latest work programme set out at Appendix 1;**
 - 2) consider the update on school attendance data at Appendix 2; and**
 - 3) review upcoming items on East Sussex County Council's Forward Plan as set out at Appendix 3 to identify any issues that may require more detailed scrutiny.**
-

1 Background

1.1 The work programme is an important tool in ensuring the correct focus and best use of the Committee's time in scrutinising topics that are of importance to the residents of East Sussex, and the efficient and effective working of the Council. It also provides clarity for those who may be requested to give evidence to the Committee on the issues under review, and the questions the Committee requires answers to.

1.2 Discussion of the work programme provides the Committee with the opportunity to consider topics that it may be of value to scrutinise, and to decide whether further scoping work is required. This provides a basis for deciding the best way of scrutinising a topic, the timescale, and who from the Committee will be involved in carrying out the review work. If there are a number of potential topics for review, Members can determine the priority of the work within the resources available to the Committee.

2 Supporting information

Work programme

2.1 The Committee's latest work programme is attached at Appendix 1. The Committee is asked to consider, discuss and agree any changes required.

School attendance data update

2.2 A Scoping Board of a potential People Scrutiny Review of School Attendance took place in March this year. At that meeting, the Board agreed although the subject was appropriate for a Scrutiny Review, as so much of the current situation regarding school absence rates in East Sussex was related to the ongoing impact of, and disruption from, the coronavirus pandemic, it was too early for the Committee to undertake a scrutiny review of school attendance. The Board agreed the review should commence in Spring 2023 when we were expected to have a clearer sense of the long-term impact of COVID on school absences. It was agreed that in the interim an update on school attendance data would be reported to the November 2022 Committee as part of the work programme update to support work programming of this planned Scrutiny Review. The Committee is asked to consider the update on school attendance data at Appendix 2 and work programming of this planned review.

2.3 When considering potential topics for inclusion in the work programme, the Committee is asked to consider a range of questions. These include:

- Is the topic relevant to the Council's Corporate Priorities?
- Is the issue of concern or of relevance to East Sussex residents?
- Can Scrutiny have an impact and add value by scrutinising this issue, service or policy?
- Is the issue one that the Committee can realistically influence?
- Are the resources needed to undertake the review available?

Scrutiny Reviews

Use of Digital and Technology in ASC

2.4 The Review of Use of Digital and Technology in ASC has continued to progress throughout the autumn, with three Review Board meetings held on Wednesday 21 September, Friday 7 October, Wednesday 2 November and a final evidence gathering session planned on Monday 14 November. The Review Board has started to draw conclusions and consider recommendations and the final report detailing the Review's findings will be reported back to the short People Scrutiny Committee meeting scheduled on Friday 16 December ahead of the Committee's 2022 RPPR Board.

2.5 Due to the focus on conducting the above review, work on delivery of the other two scrutiny reviews agreed at the Committee's July meeting – on Adult Social Care Equality and Inclusion and Use of Prevention in Children's Services – has been paused to make best use of available resources. Review Board meetings of these reviews will commence at the earliest opportunity and updated timetables for the reviews will be considered then.

2.6 Any suggestions for potential Scrutiny Review topics should be discussed with the Chair, or the Senior Policy and Scrutiny Adviser, in advance of the Committee meetings.

Forward Plan

2.7 A copy of the Council's Forward Plan of executive decisions for the period 1 November 2022 to 28 February 2023 is included at Appendix 3. The Committee is requested to review the forthcoming items on the Forward Plan to identify any issues within the remit of this Committee that may require more detailed scrutiny. The Forward Plan is revised and published on a monthly basis and Committee members should regularly review the Forward Plan.

3. Conclusion and reasons for recommendations

3.1 An important part of managing the work of the People Scrutiny Committee is regularly reviewing its future work programme. This involves the Committee assessing its priorities, ensuring its ongoing reviews are completed in a timely fashion and identifying new areas for scrutiny.

PHILIP BAKER
Assistant Chief Executive

Contact Officer: Beth McGhee, Senior Policy and Scrutiny Adviser

Tel. No. 01273 335828

Email: beth.mcghee@eastsussex.gov.uk

People Scrutiny Committee - Work Programme

Current Scrutiny Reviews		
Title of Review	Detail	Proposed Completion Date
Use of digital and technology in Adult Social Care	<p>The Committee has accepted the recommendation of the Initial Scoping Board that the Committee proceed with a review of this area, focussed on exploring the cultural and behavioural changes needed to support greater use of online services, 'self-service' options and adoption of a 'digital by default' approach in ASC.</p> <p>Membership of the Review Board: Councillors di Cara (Chair), Geary and Maples.</p>	December 2022
ASC Equality and Inclusion	<p>The Committee has accepted the recommendation of the Initial Scoping Board that the Committee proceed with a review of this area, looking at how the Department engages with 'seldom heard' groups and whether residents of all backgrounds know how to access ASC services.</p> <p>Membership of the Review Board: Councillors Geary, Ungar (Chair) and Webb.</p>	March 2023
Use of Prevention in Children's Services	<p>The Committee has accepted the recommendation of the Initial Scoping Board that the Committee proceed with a review of this area, focussed on examining work planned and underway to strengthen use of prevention in Children's Services.</p> <p>Membership of the Review Board: Councillors Adeniji, Field, Howell (Chair) and John Hayling, Parent Governor Representative.</p>	March 2023
School Exclusions	<p>The previous Committee agreed in March 2020 to undertake a Scrutiny Review of issues relating to school exclusions. The Committee also agreed the Terms of Reference proposed by the Scoping Board. Due to the COVID-19 pandemic and its effect on the availability of schools to contribute to further work on this review, it was subsequently paused with the intention to recommence it at a suitable future date.</p> <p>Since the original review was scoped, the Department has commenced a project with ISOS consultancy to draw together aspects of good and emerging practice into a clear, whole-system, strategic approach to inclusion and the use of Alternative Provision for secondary-age pupils in East Sussex.</p> <p>The Committee wishes to recommence this review and will hold a further short scoping meeting to consider the outcomes of the ISOS project and any adjustments required to the existing Terms of Reference before commencing the review.</p>	To be confirmed when second scoping board undertaken in December 2022/ January 2023.

	Membership of the Review Board: Councillors Adeniji, Field, Maples and Nicola Boulter, Parent Governor Representative.	
Initial Scoping Reviews		
Subject area for initial scoping	Detail	Proposed Dates
School Attendance	<p>The Committee heard at their 2021 work planning awayday that overall school absence and persistent absence rates across East Sussex are high, when compared to national and statistical neighbours; and that East Sussex has a significant number of children and young people deemed too ill to attend school due to anxiety and poor mental health, and increasing levels of Emotionally-Based School Avoidance.</p> <p>A scoping board meeting was held on 10 March 2022 and the Board agreed that although the subject was appropriate for a Scrutiny Review, as so much of the current situation regarding school absence rates in East Sussex was related to the ongoing impact of, and disruption from, the coronavirus pandemic, it was too early for the Committee to undertake a scrutiny review of school attendance.</p> <p>The Board therefore agreed that the review should commence in Spring 2023 when we expect to have a clearer sense of the long-term impact of COVID on school absences. A further short scoping board meeting will be held in early 2023 to build on issues discussed at the 2022 scoping board and draft Terms of Reference for this review.</p> <p>Membership of the Scoping Board: Cllrs Adeniji, di Cara, Field and Howell (Chair) and Nicola Boulter, Parent Governor Representative.</p>	To be confirmed following a further short scoping board in early 2023.
Suggested Potential Future Scrutiny Review Topics		
Suggested Topic	Detail	
Elective Home Education	<p>The Committee heard at their 2021 work planning awayday that issues relating to the increase in the numbers of children being electively home educated (EHE) remain a concern for the Children's Services Department and expressed an interest in scrutinising the work the Department is doing in response. The Committee also heard about national developments expected to impact future policy and the approaches of local authorities in this area.</p> <p>The Committee agreed at the November 2021 and March 2022 meetings to retain this as a potential area for review and an update on the Department's work in this area and national developments impacting this work is scheduled for the November 2022 Committee to support consideration of how and whether to progress with a scrutiny review.</p>	

Scrutiny Reference Groups		
Reference Group Title	Subject area	Meeting Dates
Health and Social Care Integration Programme (HASCIP) Reference Group	<p>The Committee agreed to establish a Reference Group to monitor progress of the East Sussex Health and Social Care Integration Programme and identify areas for future scrutiny. It will review HASCI progress reports provided to the Health and Wellbeing Board and meet on an ad hoc basis as required to consider issues arising in more detail.</p> <p>The group last met on 6 April 2022 and considered an update on the Better Care Fund, as well as a presentation on anticipated impacts of the Integration White Paper and progress with establishing an Integrated Care System (ICS) in Sussex. The group requested that the next meeting consider the next substantive phase of work on establishing the Sussex ICS and will meet later in November to consider and comment on key elements of the draft Sussex ICS Integrated Care Strategy ahead of it being considered by the Lead Member for Strategic Management and Economic Development. The group has also requested to consider progress with work at the locality level in East Sussex and a meeting to consider this is expected to take place in 2023 when this work is further progressed.</p> <p>Membership of the group: Councillors Clark, di Cara, Geary (Chair), Ungar and Webb.</p>	Next meeting: Tuesday 22 November 2022
Loneliness and Resilience Scrutiny Reference Group	<p>The Committee agreed to establish a Loneliness and Resilience Scrutiny Reference Group at its meeting in March 2021. The purpose of the group is to provide scrutiny input into a loneliness project being undertaken by the Adult Social Care and Health Department. The project will aim to develop practical solutions that will help address some of the key negative impacts of loneliness on local communities in East Sussex.</p> <p>The Group had presentations on progress with the project in August and December 2021. The Group last met in March 2022 and considered and commented on the draft recommendations for the project. Officers and partners are now considering the final report and how to take forward its recommendations. A final meeting of the Reference Group will take place later in November to consider the final recommendations and next steps, as well as what and how the Group wish to report back to the Committee on this project.</p> <p>Membership of the group: Councillors Clark, Geary, Maples, Howell, Ungar and Webb.</p>	Next meeting: Tuesday 29 November 2022
Educational Attainment and Performance Scrutiny Reference Group	<p>The Committee agreed in June 2018 to establish a Reference Group to focus on reviewing data on educational attainment in East Sussex and related issues. The group meets on an annual basis.</p>	Next meeting: Late January/ Early February 2023

	<p>The next meeting of the Group is anticipated to take place in late January/ early February 2023 when Department for Education ratified attainment data for the 2021/22 academic year is expected to be available.</p> <p>Membership of the group: Councillors Adeniji, Field and Howell and Nicola Boulter, Parent Governor Representative.</p>	
Adult Social Care reforms Reference Group	<p>The Committee agreed at its 2022 work planning awayday to establish a reference group to consider the impact and implementation of the Adult Social Care reforms.</p> <p>It has been agreed that the first meeting of the Group will take place after October, when the Fair Cost of Care exercise is complete, and will receive a report on the anticipated impact of the reforms on the Council's finances, Care Act assessment volumes, staffing, other operational issues, and the local care market.</p> <p>Membership of the group: Councillors di Cara, Geary and Ungar.</p>	First meeting: Post-October 2022
Reconciling Policy, Performance and Resources (RPPR) Board	RPPR Board meet annually to agree detailed comments and any recommendations on the emerging portfolio plans and spending and savings proposals to be put to Cabinet on behalf of the scrutiny committee.	Next meeting: 16 December 2022
Reports for Information		
Subject Area	Detail	Proposed Date
Market Sustainability Plan	At its September 2022 meeting the Committee asked to receive a copy of the Market Sustainability Plan once it was finalised.	When finalised – expected to be February 2023
Training and Development		
Title of Training/Briefing	Detail	Proposed Date
Future Committee Agenda Items		Author
16 December 2022		
Scrutiny Review - Use of digital and technology in Adult Social Care	To consider the final report of the Review.	Councillor Penny di Cara, Chair of the Review Board

16 March 2023		
Armed Forces Covenant	At their September meeting the Committee asked for an update on ESCC's work to deliver the Armed Forces Covenant, particularly on work required to achieve gold accreditation.	Director of Children's Services
Committee Work Programme	To manage the Committee's programme of work including matters relating to ongoing reviews, initial scoping boards, future scrutiny topics, reference groups, training and development matters and reports for information.	Beth McGhee, Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To provide the Committee with an opportunity to review its input into the RPPR process for 2023/24 financial year.	Becky Shaw, Chief Executive
17 July 2023		
Implementation of Schools White Paper Reforms	The Committee requested at its July 2022 meeting an update in 12 months on progress with implementing reforms set out in the Schools White Paper.	Assistant Director, Education
Committee Work Programme	To manage the Committee's programme of work including matters relating to ongoing reviews, initial scoping boards, future scrutiny topics, reference groups, training and development matters and reports for information.	Beth McGhee, Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To commence the Committee's involvement with the RPPR process for 2024/25 financial year by reviewing the information in the Quarter 4 (end of year) (2022/23) Council Monitoring report and the State of the County report.	Becky Shaw, Chief Executive
25 September 2023		
Committee Work Programme	To manage the Committee's programme of work including matters relating to ongoing reviews, initial scoping boards, future scrutiny topics, reference groups, training and development matters and reports for information.	Beth McGhee, Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To continue the Committee's work on the RPPR process for 2024/25 financial year.	Becky Shaw, Chief Executive
Safeguarding Adults Board - Annual Report	The Safeguarding Adults Board (SAB) Annual Report outlines the safeguarding activity and performance in East Sussex during the previous financial year, as well as some of the main developments in place to prevent abuse from occurring.	Chair, Safeguarding Adults Board
Annual Review of Safer Communities	To update the Committee on performance in relation to Safer Communities in 2022/23 and the priorities and issues for 2023/24 that will be highlighted in the Partnership Business Plan.	Assistant Director - Planning, Performance and Engagement

East Sussex Safeguarding Children Partnership (ESSCP) Annual Report	<p>Presentation of the annual report of the East Sussex Safeguarding Children Partnership.</p> <p>This report will include a progress update on the work of multi-agency exploitation coordinators as requested at the March 2022 Committee.</p>	Independent Chair, East Sussex Safeguarding Children Partnership
29 November 2023		
Committee Work Programme	To manage the Committee's programme of work including matters relating to ongoing reviews, initial scoping boards, future scrutiny topics, reference groups, training and development matters and reports for information.	Beth McGhee, Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To continue the Committee's work on the RPPR process for 2024/25 financial year.	Becky Shaw, Chief Executive

Overall Absence

% attendance	East Sussex	National	Difference to national
2021/22	89.9%	90.6%	-0.7%
2018/19	94.0%	94.5%	-0.5%

Overall absence

Phase	East Sussex (2021/22)	East Sussex (2018/19)	National (2018/19)*
Primary	6.52%	4.3%	4.0%
Secondary	10.45%	6.0%	5.5%
Special	16.82%	10.9%	10.1%

*National data for 2021/22
is not available

Persistent Absence

% persistent absence rate	East Sussex	National	Difference to 2019 national
2021/22	32.8%	Not available	+19.11%
2018/19	14.96%	13.69%	+1.27%

Persistent Absence

Phase	East Sussex (2021/22)	East Sussex (2018/19)	National (2018/19)
Primary	18.91%	9.1%	8.2%
Secondary	32.69%	15.0%	13.7%
Special	56.09%	29.5%	28.8%

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EAST SUSSEX COUNTY COUNCIL'S FORWARD PLAN

The Leader of the County Council is required to publish a forward plan setting out matters which the Leader believes will be the subject of a key decision by the Cabinet, individual Cabinet member or officer in the period covered by the Plan (the subsequent four months). The Council's Constitution states that a key decision is one that involves

- (a) expenditure which is, or the making of savings which are, significant having regard to the expenditure of the County Council's budget, namely above £500,000 per annum; or
- (b) is significant in terms of its effects on communities living or working in an area comprising two or more electoral divisions.

As a matter of good practice, the Council's Forward Plan includes other items in addition to key decisions that are to be considered by the Cabinet/individual members. This additional information is provided to inform local residents of all matters to be considered, with the exception of issues which are dealt with under the urgency provisions. Only key decisions to be taken by officers are included.

For each decision included on the Plan the following information is provided:

- Page 139 -
- the name of the individual or body that is to make the decision and the date of the meeting or relevant time period for an officer decision
 - the title of the report and decision to be considered
 - groups that will be consulted prior to the decision being taken
 - a list of documents that will be considered when making the decision
 - the name and telephone number of the contact officer for each item.

The Plan is updated and published every month on the Council's website two weeks before the start of the period to be covered.

Meetings of the Cabinet/individual members are open to the public (with the exception of discussion regarding reports which contain exempt/confidential information). Copies of agenda and reports for meetings are available on the website in advance of meetings. Key decisions taken by officers will not be taken at a meeting – documents listed can be made available on request to the contact officer, with the exception of those which contain exempt/confidential information.

For further details on the time of meetings and general information about the Plan please contact Andy Cottell at County Hall, St Anne's Crescent, Lewes, BN7 1UE, or telephone 01273 481583 or send an e-mail to stuart.mckeown@eastsussex.gov.uk. For further detailed information regarding specific issues to be considered by the Cabinet, individual Member or officer please contact the named contact officer for the item concerned.

EAST SUSSEX COUNTY COUNCIL
County Hall, St Anne's Crescent, Lewes, BN7 1UE

For copies of reports or other documents please contact the officer listed on the Plan or phone 01273 335274.

FORWARD PLAN – EXECUTIVE DECISIONS (including Key Decisions) –1 November 2022 TO 28 February 2023

Additional notices in relation to Key Decisions and/or private decisions are available on the [Council's website](#).

Cabinet membership:

Councillor Keith Glazier - Lead Member for Strategic Management and Economic Development
Councillor Nick Bennett – Lead Member for Resources and Climate Change
Councillor Rupert Simmons – Lead Member for Economy
Councillor Claire Dowling – Lead Member for Transport and Environment
Councillor Carl Maynard – Lead Member for Adult Social Care and Health
Councillor Bob Bowdler – Lead Member for Children and Families
Councillor Bob Standley – Lead Member for Education and Inclusion, Special Educational Needs and Disability

Date for Decision	Decision Taker	Decision/Key Issue	Decision to be taken wholly or partly in private (P) or Key Decision (KD)	Consultation	List of Documents to be submitted to decision maker	Contact Officer
8 Nov 2022	Lead Member for Resources and Climate Change	Ringmer Swimming Pool - outcome of the Public Consultation To analyse the results of the public consultation and to agree the next steps for Ringmer Swimming Pool. The Consultation concludes on 15 August 2022.	P KD		Report, other documents may also be submitted	Nigel Brown 07394 410630
8 Nov 2022	Lead Member for Resources and Climate Change	To consider proposals to acquire the freehold of a property following a blight notice being served under the Town and Country Act 1990	P KD		Report, other documents may also be submitted	Zoe Tweed 07701 021868

21 Nov 2022	Lead Member for Transport and Environment	Petition to urgently improve safety measures at the junction of the A267 with the B2102 at Cross in Hand To consider the petition asking that the County Council urgently improves safety measures to help save the lives of drivers and pedestrians at the junction of the A267 with the B2102 at Cross in Hand following a pedestrian fatality on 22 March 2022 on the A267 to the east of the B2102 junction.			Report, other documents may also be submitted	Helen Clee 0345 6080193
21 Nov 2022 Page 141	Lead Member for Transport and Environment	East Sussex County Council Household Waste Recycling Sites - waste acceptance policy relating to use of vans and cash payments for non-household waste Following the Covid-19 shutdown of the HWRS network in 2020, sites reopened with slightly amended changes to access arrangements for vans and how Non-Household Waste deposits can be charged for. In order to improve the throughput at sites, Vans were (and continue to be) restricted to 3 days per weeks and electronic only payment was introduced for non-household waste in order to reduce contact between residents and site staff. Lead Member is asked to consider these two aspects of HWRS usage and consider if they would like to revert to the pre-Covid-19 shutdown policies or adopt the new policies.			Report, other documents may also be submitted	Anthony Pope 01273 481657
21 Nov 2022	Lead Member for Transport and Environment	East Sussex Enhanced Partnership Plan and Scheme In July 2021, Lead Member for Transport and Environment approved the draft	KD	There is a statutory 28-day bus operator	Report, other documents may also be submitted	Craig Lamberton 01273 337 525

Page 142		Enhanced Partnership (EP) Plan and Schemes. After further development of the EP Plan and Scheme the EP Plan and Scheme will enter into the statutory process on 22 September to allow them to be made. The paper will seek approval of the Lead Member of the final version of the EP.		objection period for the EP plan and scheme, followed by a 28 day consultation with key stakeholders. Key stakeholders include operators of local services, users of local services, other local authorities, the traffic commissioner, the chief officer of police, the Passengers' Council, and the Competition and Markets Authority.		
21 Nov 2022	Lead Member for Transport and Environment	Community Match Schemes 2022/23 To authorise expenditure (£50,000 maximum match funding per scheme) on a programme of Community Match schemes in 2022/23 as a contribution towards schemes across East Sussex with community groups contributing the remaining half of the cost of scheme design & construction.	KD		Report, other documents may also be submitted	Nicholas Mitchell 01273 336627
21 Nov 2022	Lead Member for Transport and Environment	Bexhill-on-Sea Cycling and Pedestrian Route (A) Collington to Worsham To consider the results of the public	KD		Report, other documents may also be submitted	Andrew Keer 01273 336682

		consultation on the proposed Cycle Route between Collington and Worsham in Bexhill-on-Sea, and to recommend how the scheme will be taken forward				
21 Nov 2022	Lead Member for Transport and Environment	Notice of Motion: No to Fracking To consider the Notice of Motion submitted by Cllrs Georgia Taylor and Chris Collier that calls on the Council to oppose, as a matter of policy, any initiatives to develop fracking, or other methods, for the extraction of shale oil or gas in East Sussex.			Report, other documents may also be submitted	Ed Sheath 01273 481632
28 Nov 2022 Page 143	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Retender of the Youth Employability Service contract (Advice and Guidance) Seeking Lead Member approval to commence re-tendering the Youth Employability Service contract (Advice and Guidance) which provides support to vulnerable young people who are Not in Education, Employment or Training (NEET) or at risk for becoming NEET. Current contract end date 31.08.23, procurement work to commence November 2022.	KD		Report, other documents may also be submitted	Caroline McKiddie 01323 463729
28 Nov 2022	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Mental Health and Wellbeing Offer for Ukranian Children and Young People To consider the use of Homes for Ukraine funding to provide a social prescribing programme to support mental health and emotional wellbeing of Ukrainian children and young people in East Sussex.	KD		Report, other documents may also be submitted	Ben Baker 01273 481471

29 Nov 2022	Lead Member for Strategic Management and Economic Development	LEP Funded Capital Programme Financial Statement - Confirmed Spend for 2021/22 and Forecast for 2022/23 Lead Member will be asked to: Note the final spend for 2021/22 for the Local Growth Fund, Getting Building Fund and Growing Places programmes and the amount of funds re-profiled into the East Sussex County Council Capital Programme. Agree the confirmed scheme spend profiles for the Local Growth Fund, Getting Building Fund and Growing Places programmes for the 2022/23 financial year.			Report, other documents may also be submitted	Alex Colbran 07729 108123
29 Nov 2022	Lead Member for Strategic Management and Economic Development	Getting Building Fund - Grant Agreements Lead Member will be asked to: Approve East Sussex County Council entering into grant agreements to transfer funding secured from SELEP to East Sussex projects, subject to SELEP's prioritisation of East Sussex schemes within its Getting Building Fund reserve pipeline programme at its meeting on 21 October 2022.			Report, other documents may also be submitted	Alex Colbran 07729 108123
29 Nov 2022	Lead Member for Strategic Management and Economic Development	Sussex ICS Integrated Care Strategy To enable consideration of the key elements of the draft joint Sussex Integrated Care Strategy as they relate to East Sussex, and the suggested emerging shared priorities to be taken forward on a partnership basis through the statutory Sussex Health and Care Assembly.	KD		Report, other documents may also be submitted	Vicky Smith 01273 482036

November 2022	Chief Operating Officer	Award of Contract for internal refurbishment of office accommodation at Muriel Matters House and Cavendish House, Hastings ESCC need to vacate Ocean House, Hastings. An office search was concluded and at a meeting for Lead Member for Resources and Climate Change it was agreed in July 2022 to taking leases at Cavendish House and Muriel Matters House, Hastings. The leases are about to be completed but refurbished works will be needed. As the contract for the building refurbishment is over £500,000 a key decision is required. The capital investment will be paid for from the non-schools planned maintenance programme and there is the budget to pay for this.	KD	The local Member was advised of the proposed lettings and received the report that advised the Lead Member for Resources and Climate Change meeting in July 2022. A programme of staff consultation to those involved in the move will commence in mid October 2022.	Report, other documents may also be submitted	Nigel Brown 07394 410630
November 2022	Director of Adult Social Care and Health	Contract Award - online sexual health services To approve the Director of Adult Social Care and Health award of contract to the Provider for the Online Sexual Health Service for East Sussex residents in November 2022.	KD		Report, other documents may also be submitted	Tony Proom 01273 335252
12 Dec 2022	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Proposal to lower school age range at Wivelsfield Community Primary School To consider whether to lower the age range at Wivelsfield Community Primary School to enable the governing body to provide early years provision on the school site.			Report, other documents may also be submitted	Jane Spice 01323 747425

13 Dec 2022	Cabinet	Gatwick Airport Development Consent Order for the Northern Runway Proposal To consider the County Council's approach for responding to Gatwick Airport Limited's Development Consent Order for their Northern Runway Project'	KD		Report, other documents may also be submitted	Jon Wheeler 01273 482212
13 Dec 2022	Cabinet	Treasury Management Annual Report 2021/22 and mid-year report 2022/23 To consider a report on the review of Treasury Management performance for 2021/22 and the outturn for the first six months of 2022/23, including the economic factors affecting performance, the Prudential Indicators and compliance with the limits set within the Treasury Management Strategy.	KD		Report, other documents may also be submitted	Ian Gutsell 01273 481399
13 Dec 2022	Cabinet	Treasury Management Stewardship 2021/22 To consider a review of the Council's performance on treasury management for the year 2021/22 and the mid year review for 2022/23			Report, other documents may also be submitted	Ian Gutsell 01273 481399
13 Dec 2022	Cabinet	Conservators of Ashdown Forest - Development Strategy and MTFP, 2022/23 budget and Q2 report To consider the Conservators of Ashdown Forest Strategy and Medium Term Financial Plan	KD		Report, other documents may also be submitted	Ian Gutsell 01273 481399
13 Dec 2022	Cabinet	Annual Report of Looked After Children's Services			Report, other documents may	Sally Carnie 01323 747194

		To consider the annual report of the Looked After Children's Service			also be submitted	
13 Dec 2022	Lead Member for Resources and Climate Change	<p>Declare surplus and dispose of freehold land and buildings at former Etchingham Primary School, Etchingham</p> <p>The Council hold the freehold of land and buildings at the former Etchingham Primary School. The Council seeks to declare the property surplus to Council requirements and dispose for a capital receipt by public auction with a reserve price to be set before the auction date.</p>	P		Report, other documents may also be submitted	Nigel Brown 07394 410630
19 Dec 2022 Page 147	Lead Member for Transport and Environment	<p>London Road, Bexhill - Town Hall Square Public Realm Proposals</p> <p>To consider responses to the stakeholder and public consultations on the proposed Town Hall Square Public Realm Improvements as part of the wider London Road pedestrian improvement scheme and seek approval to progress the scheme to detailed design and construction.</p>	KD		Report, other documents may also be submitted	Andrew Keer 01273 336682
19 Dec 2022	Lead Member for Transport and Environment	<p>East Sussex County Council's Alternative Weed Maintenance Techniques Trials 2022</p> <p>Information presented on the outcome of the alternative techniques to using Glyphosate weed killer for weed control on the highway including opt-out volunteer service, reactive service and Foam spray. Decision to be taken on future weed maintenance techniques and whether the trials should be rolled on for 2023.</p>	KD		Report, other documents may also be submitted	Dale Poore 01273 335506

19 Dec 2022	Lead Member for Transport and Environment	<p>Rural Verges as Wildlife Corridors - Trial of Early Season Reduction in Rural Grass Cutting</p> <p>Decision to be taken on any permanent amendments to the rural grass cutting policy, following this year's trial. The trial reduced the grass cutting service of rural verges in 12 areas to only one full cut in the Autumn. This change meant that Highways would not cut rural verges (except for visibility) at a time when flowering is often at its peak and it is the most beneficial time for pollinators.</p>	KD		Report, other documents may also be submitted	Dale Poore 01273 335506
19 Dec 2022	Lead Member for Transport and Environment	<p>Highway Network Resilience Plan</p> <p>The report seeks approval for a new Highway Network Resilience Plan. The Plan supports our asset management approach and the management of highway assets and will help us to prioritise maintenance services during situations such as extreme weather so that we can minimise disruption on the most important routes around the county.</p>		<p>The Plan applies to all wards.</p> <p>Internal Stakeholders Highway Maintenance Contractor, Public Transport Team, Flood Risk Management Team, Traffic and Safety Team, Emergency Planning Team, Infrastructure, Planning and Place Team, Major Projects</p>	Report, other documents may also be submitted	Rosslyn Mills 01273 336337

				<p>and Growth Team</p> <p>External Stakeholders Neighbouring highway authorities that share a border (Emergency Planning Officers and Highway Service), Sussex Resilience Forum members: Police, Fire, Ambulance, NHS, Coastguards, Transport for the South East, Network rail, Bus operators, National Highways, Logistics UK, District and Borough Councils Emergency Planning Officers</p>		
19 Dec 2022	Lead Member for Transport and Environment	<p>Highway Policies Review To seek agreement for amendments to the following Highways Policies.</p> <ul style="list-style-type: none"> Highway Asset Management Strategy, including Network 			Report, other documents may also be submitted	Rosslyn Mills 01273 336337

		<p>Hierarchy Review</p> <ul style="list-style-type: none"> Highway Asset Management Policy <p>The Highway Asset Management Strategy and the Highway Asset Management Policy set out the council's long-term strategic approach from which we develop our Asset Management Plans for each highway asset group (structures, drainage, lighting etc.) Amendments reflect current best practice guidance, including a review of the Network Hierarchy, which details the process used to define each road, ranging from Strategic Route down to Minor Road.</p>				
16 Jan 2023 Page 150	Lead Member for Transport and Environment	<p>Petition: Traffic calming in the Northampton Way/Norfolk Drive/Kent Road and Lincoln Close area of St Leonards on Sea</p> <p>Petition for traffic calming in the Northampton Way/Norfolk Drive/Kent Road and Lincoln Close area of St Leonards on Sea. A petition was submitted to the County Council on 11 October 2022 and needs to be considered by Lead Member for Transport & Environment.</p>			Report, other documents may also be submitted	<p>Victoria Bartholomew 01424 724284</p>
16 Jan 2023	Lead Member for Transport and Environment	<p>Petition: Piltdown Village Speed Limits</p> <p>To decide on the response to the petition to create a 30mph zone on the roads between the village gateways at Piltdown.</p>			Report, other documents may also be submitted	<p>Michael Higgs 01273 482106</p>
24 Jan 2023	Cabinet	Reconciling Policy, Performance and Resources (RPPR) 2023/24 Draft Council Plan	KD		Report, other documents may also be submitted	<p>Claire Lee 07523 930526</p>

		To ask Cabinet to approve the draft Council Plan, Council Tax levels, Revenue Budget, and Capital Programme for 2023/24 for recommendation to the County Council (including Savings Proposals, Equality Impact Assessment, Engagement and Scrutiny feedback).				
24 Jan 2023	Cabinet	Treasury Management Strategy 2023/24 To consider the Treasury Management Strategy for 2023/24. This includes setting the Prudential Indicators as set out in the Prudential Code and approving the Minimum Revenue Provision Policy Statement and Annual Investment Strategy for 2022/23	KD		Report, other documents may also be submitted	Ian Gutsell 01273 481399
24 Jan 2023	Cabinet	Corporate Climate Emergency Plan To consider an updated Corporate Emergency Plan	KD		Report, other documents may also be submitted	Andy Arnold 01273 481606
27 Feb 2023	Lead Member for Education and Inclusion, Special Educational Needs and Disability	East Sussex Childcare Sufficiency Duty 2023 - 2024 To approve the publication of the East Sussex Childcare Sufficiency Duty for 2023 to 2024			Report, other documents may also be submitted	Jane Spice 01323 747425

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Report to: People Scrutiny Committee

Date of meeting: 17 November 2022

By: Director of Children's Services

Title: Elective Home Education (EHE) in East Sussex

Purpose: The Committee has expressed an interest in undertaking a scrutiny review of Elective Home Education (EHE). This report will update the Committee on work the Department undertakes in this area and recent national developments impacting the response to EHE to support consideration of how and whether to progress with a scrutiny review.

RECOMMENDATIONS: The Committee is recommended to:

1) note the work of the EHE team in meeting statutory requirements of the Local Authority (LA) in respect to children who are Electively Home Educated.

2) note the outcome of the recent Audit into the work of this team.

3) determine whether to progress to scoping a scrutiny review of this area.

1 Background

1.1 The responsibility for a child's education rests with their parents and parents have a right to educate their children at home if they so choose.

1.2 The legal framework expects that parents must '*ensure that their child receives an efficient, full-time education suitable to their age, ability and aptitude, to any special educational needs, either by regular attendance at school or otherwise*'. The law also states that '*Parents are not required to engage with a member of the local authority, teach the National Curriculum, provide a broad and balanced education or give formal lessons or mark work*'. Thus, the framework within which the local authority can work with families around Elective Home Education (EHE) is limited. The framework governing schools around EHE is clear and states, "*Schools must not advocate elective home education*".

1.3 The number of children who are EHE has risen consistently over the last 5 years, both nationally and locally, across all year groups and school type. During the academic year 2017/18, there were 1233 open cases within East Sussex; for 2021/2022 this number grew to 1936 (an overall increase of 57%). The October 2022 data shows there were 1349 open EHE cases which is a 9% increase from the previous year. In September, at the start of the new academic year there were 1338 open EHE cases which was an increase of 6.5% from the previous year.

1.4 Currently 49% of EHE families are considered vulnerable and the reasons for this long-term growth are complex and involve factors such as dissatisfaction with the school system including lack of curriculum choice and testing at Key Stage 4. Parents also cite mental health, unmet special educational needs (SEN), and school preference as a reason for choosing EHE. We have not encountered an example of a school putting pressure on a family to opt for EHE as an alternative to exclusion; it is possible that poor relationships with a school may have led to a decision by a family of course but we are not seeing evidence of this.

1.5 During 2021/2022, 11 EHE families with a child protection plan (CP plan) and 13 families with a child in need plan (CIN plan) were supported by the EHE team whose role it was to ensure robust processes and procedures were in place to determine suitability of education. Due to the

historic work in this area by the team, there has been a reduction from the previous academic year where there were 15 CP plans and 32 CIN plans across the total EHE population.

1.6 The average length of time EHE cases are open with CIN and CP plans has reduced from 26 months to 6 months in the past 2 years. In total there were 78 children with Education, Health and Care Plans (EHCP's) within this time period. The team have created robust systems with social care to ensure good joint working for children with CP and CIN plans. This includes:

- quarterly meetings with all key leads in social care to update and address issues and case specific issues;
- production of a training video for new social workers;
- offering training to schools to set out expectations that they explore and try to address reasons for parents looking at EHE. This has reduced the number of children becoming EHE with plans at the point of off-rolling; and
- meetings with all Area Group Secondary Heads to share EHE data and discuss actions and next steps that can be taken by schools and with support of the local authority to reduce EHE numbers.

All these factors combined have resulted in more children and young people returning to school. The net number of children educated at home continues to rise, however.

1.7 A significant aspect of the team's work is in supporting the reintegration of children who are EHE back to school. During the last academic year 2021-2022, 271 EHE children were reintegrated to their mainstream school following a period of EHE either voluntary or through a school attendance order; this represents an increase of 87% on the previous year.

1.8 In December 2021, case law change was the subject of the High Court's consideration in *Goodred v Portsmouth City Council*. The law now gives local authorities the legal basis to request evidence from parents of a suitable home education without a cause for concern.

1.9 On the 3 February 2022 the Department for Education (DFE) published results for its 'Children Not in School' consultation, within which Government stipulated its intention to legislate the following four duties:

- *A duty on LAs to maintain a register of children of compulsory school age who are not registered at school, including flexi-schooling arrangements.*
- *A legal duty on parents to provide information to a register. It will also include securing resources to implement this.*
- *Place a duty on unregistered settings to register children access settings for the majority of a child's week.*
- *A duty on local authorities to provide support to EHE families where this has been requested.*

1.10 These duties were expected to be legislated for in the Schools Bill. In October 2022, the above legal change was postponed whilst the Government sought to include the expansion of grammar schools to the Bill proposal. Following recent changes in Government, we understand that the Schools Bill has been dropped for want of Parliamentary time/priority.

2 Supporting Information

Compliance Activities

2.1 In June 2022, an internal audit was undertaken of EHE systems and processes by Orbis. The audit's final opinion was that '*substantial assurance*' is provided in respect to Elective Home Education. The report concluded that robust, structured approaches to systems and processes in all areas of the service are applied and that regular reviews take place.

2.2 In May 2022, a Pan Sussex EHE Safeguarding Audit with West and East Sussex and Brighton and Hove Council was conducted by the East Sussex Safeguarding Children's Partnership (ESSPP). The audit concluded that the East Sussex EHE team provided good management oversight, timely intervention, meticulous record keeping and clear multi-agency involvement including joint visits with other agencies including social care, schools, Police, Sussex Partnership Foundation Trust (SPFT) and SWIFT Specialist Services.

Use of Data

2.3 The team are developing the use of data sets through the Children's Services Department central database (EYES) which will identify trend data and patterns as to the reasons for the increased numbers. These new data sets will provide the team with targeted information to affect change moving forward.

2.4 The team have identified high numbers of EHE children in Year 1 and Year 7 which is linked to families not securing a school placement of choice at transition. This trend has been repeated from previous years.

2.5 Data is also used to identify schools with disproportionately high levels of requests for EHE which are followed up with a strategic discussion with the school by service managers.

Training for Schools

2.6 The EHE service have developed and offered EHE training to all secondary schools as a follow up to meetings with senior school leaders to discuss school specific EHE trend data. The training has currently been delivered to four schools and is effective in developing a shared understanding of the vulnerabilities of EHE.

2.7 The five schools with higher levels of EHE have been targeted in the next phase of training. This information and bespoke offer has also been shared with the Secondary Board held in June 2022 and the Area Group meetings in term 6.

2.8 As part of a task and finish group across last academic year, a revised EHE school off-rolling process has also been agreed by schools. This aims to further reduce the number of families choosing to off-roll their children. Through this process, strong links have been established with schools and there is a shared ambition across East Sussex to reduce the number of children who are EHE where parents are not able to provide a suitable education.

Service Development

2.9 A total of 8 staff oversee the work around EHE within East Sussex. As a result, in the increase in demand on the service, an additional Senior EHE Support and Advice officer were employed in December 2021. In November 2022, further resources were agreed to support the service; this includes funding for an additional EHE Officer post, which will reduce caseloads and increase the number of home visits available to vulnerable families. Given high levels of demand, pressures remain on the service and Children's Services senior management team will continue to monitor. The priority to is to ensure that children are safe from harm.

2.10 In addition to the statutory offer, further funding was agreed to employ a full-time early engagement EHE officer. This role will triage county-wide families considering EHE enquires, offer advice and guidance to families, schools and professionals, and attend any in-school meetings with schools and parents to support school resolution, where appropriate. The role will also be instrumental for developing a pilot project to target families considering EHE within the Eastbourne and Hailsham area and will focus on children who have identified SEND and or attendance needs. The role will be able to facilitate time-limited school based additional support from the LA.

Engagement Activities

2.11 Whilst the law places significant limitations on the LA, the service undertake a range of activities to engage with EHE families so that we can maintain some contact with families who are otherwise out of the education system. These activities include:

- A monthly drop-in service in Heathfield and St Leonards (and from January this will also be available in Eastbourne and Peacehaven). This gives families an opportunity to bring evidence of a suitable education to be assessed, and to give advice and guidance to families considering EHE so that these can be picked up early and potential issues with schools resolved before children are removed from roll.

- The team produce a quarterly EHE newsletter which includes signposting to various services, including those such as CLASS+ who may be able to improve engagement with families with a view to securing a return to school.
- A full time Youth Employability Service EHE Advisor is now in place to work proactively with all Year 11 EHE CYP (where parental consent is provided) to reduce levels of young people Not in Education, Employment or Training (NEET) Post 16.

Keeping Children Safe

2.12 Ensuring that CYP who are EHE are safe from harm is a significant priority for the service. To do this, we assess the level of vulnerability against a criteria of red and green, using information from the off rolling form, EYES (our internal database) and also including any social care updates. The following cases listed will be ragged as red:

- Children with an EHCP;
- current CIN or CP plan;
- Education Support, Behaviour and Attendance Services (ESBAS) involvement at the point of off rolling;
- at risk of exploitation;
- where schools have raised a concern on the off-rolling form.

2.13 These cases are offered an initial home visit and a follow up visit at 3 months. Currently 49% of cases are considered red ragged. 'Green' cases can be changed at any point with additional information and families can request a home visit or can meet the team at a monthly drop in at 4 locations or through a virtual meeting.

2.14 Additionally, quarterly meetings are held with key leads in each social care team (Single Point of Access, Multi Agency Safeguarding Hub, Youth Support Team, Duty Assessment Team and Under 19s) to share intelligence and raise concerns where appropriate. This has improved communication, information sharing and knowledge of EHE through training and there is now specific EHE training for professionals within social care (including a training video and presentation). Services within social care have a link EHE individual that our service can directly share information and communicate with.

3. Conclusion and reasons for recommendations

3.1 This report highlights the current restrictions of EHE law, the expansion in numbers of EHE families within East Sussex who are choosing to EHE and how East Sussex meets its statutory responsibilities through the EHE team. The report also recognises the increasing levels of demand and the additional resources that have been required to maintain service delivery.

3.2 In addition to that set out above, the EHE Service has set out some priorities for the next twelve months to further improve service delivery:

- To create a service level agreement with East Sussex further education colleges offering EHE children part-time 14yrs-16yrs courses to safeguard children, considering recent rapid case reviews recommendations.
- Create pathways to inform wider teams and professionals of their responsibilities to EHE.
- Following the recommendations of the Orbis Internal Audit, to write a separate EHE safeguarding policy.
- Explore additional methods of gaining child voice, as a forum or during visits.
- Review the success of the early intervention officer pilot.
- Update the EHE policy and parent pack considering national legal changes.

Alison Jeffery

Director of Children's Services

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