



## **PEOPLE SCRUTINY COMMITTEE**

**THURSDAY, 20 NOVEMBER 2025**

**10.30 am COUNCIL CHAMBER, COUNTY HALL, LEWES**

MEMBERSHIP - Councillor Johanna Howell (Chair)  
Councillors Kathryn Field (Vice Chair), Colin Belsey, Charles Clark,  
Anne Cross, Nuala Geary, Stephen Shing, Colin Swansborough, John Ungar  
and Trevor Webb

Maria Cowler, Roman Catholic Diocese Representative  
John Hayling, Parent Governor Representative  
Lesley Hurst, Diocese of Chichester Representative

### **A G E N D A**

1. Minutes of the meeting held on 22 September 2025 *(Pages 3 - 8)*
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. Reconciling Policy Performance and Resources (RPPR) *(Pages 9 - 74)*
6. East Sussex Safeguarding Children Partnership (ESSCP) Annual Report *(Pages 75 - 136)*
7. Ofsted Focussed Visit of Children's Services Department *(Pages 137 - 144)*
8. Work programme *(Pages 145 - 166)*
9. Care Quality Commission assessment of Adult Social Care *(Pages 167 - 216)*
10. Review of ASCH savings proposals *(Pages 217 - 248)*
11. Any other items previously notified under agenda item 4

PHILIP BAKER

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12 November 2025

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NOTE: As part of the County Council's drive to increase accessibility to its public meetings, this meeting will be broadcast live on its website. The live broadcast is accessible at:

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## PEOPLE SCRUTINY COMMITTEE

MINUTES of a meeting of the People Scrutiny Committee held at Council Chamber, County Hall, Lewes on 22 September 2025.

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PRESENT Councillors Johanna Howell (Chair), Kathryn Field (Vice Chair), Colin Belsey, Charles Clark, Anne Cross, Nuala Geary, Stephen Shing, Colin Swansborough and Matthew Beaver and Lesley Hurst Diocese of Chichester Representative

LEAD MEMBERS Councillor Maynard, Lead Member for Adult Social Care and Health (attended online)

ALSO PRESENT Seona Douglas, Independent Chair of the Safeguarding Adults Board  
Carolyn Fair, Director of Children's Services  
Ian Gutsell, Chief Finance Officer  
Michaela Richards, Head of Safer Communities  
Mark Stainton, Director of Adult Social Care and Health  
Rachel Sweeney, Senior Policy and Scrutiny Adviser

### 10. MINUTES OF THE PREVIOUS MEETING

10.1 The Committee RESOLVED to agree the minutes of the meeting held on 14 July 2025 as a correct record.

### 11. APOLOGIES FOR ABSENCE

11.1 Apologies for absence were received from Councillor Webb and John Hayling Parent Governor Representative. Councillor Beaver was in attendance as a substitute for the current vacancy on the Committee.

### 12. DISCLOSURES OF INTERESTS

12.1 There were no disclosures of interest.

### 13. URGENT ITEMS

13.1 There were no urgent items.

### 14. WORK PROGRAMME

14.1 The Chair introduced the work programme report which outlined the Committee's latest work programme, including its ongoing input into the Reconciling Policy, Performance and Resources (RPPR process), noting that the Committee was meeting in October to discuss this in more detail.

14.2 Councillor Cross commented on the upcoming Home to School Transport scoping board meeting and that it would be helpful to see the recent audit report on Home to School Transport. The Director of Children's Services noted that this was a public report and could be circulated to the Committee, the headlines of the report would also be reported at the scoping board.

14.3 The Committee discussed the agenda for the November meeting and agreed to prioritise receiving reports on the recent Ofsted Focussed Visit of Children's Services Department (CSD) and Care Quality Commission assessment of Adult Social Care. The Committee noted that equality and inclusion were embedded in the work of ASCH, and therefore considered more

broadly by scrutiny, and that they had recently received a detailed briefing on the Climate Change Health Impact Assessment and agreed that scheduled reports on these items could be removed from the work programme at this time.

14.4 The Committee therefore RESOLVED to add the following reports to the work programme: Ofsted Focussed Visit of Children's Services Department (CSD) and Care Quality Commission assessment of Adult Social Care; and remove the following reports: Equality and Inclusion in Adult Social Care and Health (ASCH) and the Climate Change Health Impact Assessment.

#### Forward plan

14.5 The Committee reviewed the Council's Forward Plan of executive decisions.

#### Work Programme

14.6 The Committee RESOLVED to agree the updated work programme and to review the work programme in more detail at the upcoming awayday.

### 15. SAFEGUARDING ADULTS BOARD- ANNUAL REPORT

15.1 The Chair of the Safeguarding Adults Board (SAB) introduced the report which outlined the work of the SAB for 2024-25 including progress on the strategic priorities of self-neglect; prevention and early intervention; and safeguarding and homelessness. The Chair praised the positive engagement from members of the SAB, as well as wider partners, noting a commitment to ensure safeguarding is person centred, collaborative, timely and proportionate.

15.2 The Director of ASCH thanked the Chair for her work on the SAB and commented on the Board's approach to collate resources and knowledge to protect vulnerable adults. He also welcomed the current priorities which reflected the local population, noting the high number of single households who were at higher risk of self-neglect and current challenges with homelessness, and which built upon multi agency work to prevent abuse. The SAB allowed for system partners to continue to challenge each other to improve safeguarding.

15.3 The Committee welcomed the report and asked questions and made comments on the following areas:

- **Safeguarding Adult Review (SAR) referrals** – The Committee enquired about the reasons for fewer SAR referrals than in previous years and asked if this was reflecting fewer incidents, or a change in criteria. The SAB Chair commented that it was difficult to attribute progress to the number of referrals as this could reflect either fewer incidents, or fewer incidents being reported and it was therefore important to interrogate this data, particularly in light of staff turnover to ensure partners had good knowledge of safeguarding.
- **Self-neglect** – The Committee welcomed the priority to support adults who self-neglect and enquired if loneliness and mental health issues were contributing factors to this. The Committee also commented that adults may not actively seek support and asked what approach was being taken to identify and support adults. In response the Chair of SAB emphasised the role of partners and the wider community, including councillors, to report concerns and share information, noting the need to be professionally curious and for a multi-agency approach. Targeted campaigns helped to raise awareness of self-neglect in communities and share the message that safeguarding is everyone's business, however noted that most referrals came from services. The Chair agreed that loneliness and mental health issues could be contributing factors to self-neglect. The Director for ASCH reiterated the need for professionals to consider the wider context when in contact with individuals and raise any concerns of self-neglect.



- **Self neglect podcast**– The Committee welcomed the use of podcasts to raise awareness of self neglect and asked how many people had listened to these. The Chair of the SAB confirmed that these were publicly available and that data could be shared after the meeting.
- **Dementia** – The Committee asked how the Board was responding to people at risk of self-neglect due to dementia and a lack of contact with services. The Chair commented that there were national examples of people with dementia that were not known to services due to a lack of contact with outside agencies or family and friends and that this was a challenge as support could only be provided if adults were known about, and noted other signs, such as property neglect, which could help identify adults at risk. The Chair also commented that older couples, where one adult has dementia, could also be at increased risk of domestic abuse in cases where more traditional gender roles were challenged and couples were unable to cope. There were increasing challenges where there was still mental capacity but a lack of willing to engage with services. Recent research with Durham University on dementia and safeguarding had produced learning for all partners in identifying risk of abuse.
- **Domestic abuse** – The Committee recognised the challenges of supporting people with domestic abuse who refuse support. The Chair responded that there were multi agency processes in place to intervene and record concerns and commented that there would be a point where people would accept help so ensuring safe mechanisms and mitigations at the point people do contact services was vital. The Director of ASCH added that multi-agency persistence aimed to ensure adults at risk are monitored and support was available when they seek support. He also noted the importance of ensuring unpaid carers were aware of the support available to them.
- **Family carers** – the Committee raised concerns about older carers (often parents) who are struggling to cope and the impact on the people they are caring for when they die. The Director acknowledged there was an increasing number of older parent carers and noted the need in these cases for a gradual increase in people accessing external support. The death of a carer could also leave people very isolated and in challenging circumstances but support from services could help to ease that transition.
- **Community cohesion** – The Committee enquired about the impact of community tensions and hate speech on vulnerable people. The Chair of SAB noted that inclusion was a key focus and the SAB worked closely with Safer Communities to respond to these issues, develop awareness across the partnership and identify any health and social care needs.
- **Data recording** – The Committee commented that it would be helpful to see a longer-term trajectory of safeguarding concerns detailed in the report to compare the data. It was noted that some of the data could be misleading, as the high proportion of white males recorded as perpetrators of aggression likely reflects the demographic makeup of East Sussex. The Chair of the SAB recognised the difficulties with some of the data and although this was regularly challenged at the SAB, it was hoped that development of the dashboard would improve on regular reporting. In response to a question about data in the report on partially achieved enquiries and if this related to levels of funding, the Director of ASCH clarified that safeguarding was a duty under the Care Act and priority of the Council and therefore not dependent on funding. The outcome data represented what the department was able to put in place, and the number of partially achieved mainly reflected adults with capacity making choices against the advice of ASCH and therefore only partial mitigations were put in place.
- **Cuckooing** – The Committee asked if ‘cuckooing’ would continue to be reported on now it had been incorporated into the Violence Reduction Partnership and commented on the wide ranging impacts ‘cuckooing’ had on individuals and the wider community. The Chair of SAB noted the joint working with health and social

care and the police and the need for a long term strategy to support people who have been 'cuckooed' and to prevent future incidents.

- **Unknown deaths** – Councillor Geary noted recent examples, in her work as a celebrant, of deaths in the community that had been unknown for some time and asked what was being done to prevent this. The Chair of the SAB commented that this could be due to a number of factors including more dispersed families or those not in regular contact, a lack of mobility, and in some cases older people whose children have passed away before them. Preventing this was part of a broader health and wellbeing agenda to ensure people live healthier lives for longer and to tackle loneliness.
- **Homelessness** – The Committee asked for clarification on which agencies provided safeguarding data around homelessness. The Chair of SAB clarified that the Board focussed on 'street homelessness', based on a national picture of SARs where this was a critical factor, and that data was shared with partners on the high level dashboard. This was a new responsibility of SAB and work would continue with partners, including district and borough councils, to progress this.
- **Identification of vulnerable households** – In response to a question about identifying vulnerable households in emergencies, the Chair of SAB noted that for adults living in supported living accommodation there was a clearer picture of occupants, however this was more challenging in other residential settings, particularly where residents were not known to services. The Director of ASCH commented that the creation of any kind of list was challenging as it would not reflect real time information and therefore would not be accurate. He noted that in major incidents the Council worked as part of a response to draw data from a range of partners to identify households with vulnerable people, however this was still dependent on people updating their records.
- **Hoarding** – The Committee asked about rising hoarding and related health risks. The Director of ASCH confirmed an increase and outlined joint work with East Sussex Fire and Rescue and local councils to identify and support at-risk individuals, including action under environmental health legislation where there is risk of disease or infection.

15.4 The Committee thanked the Chair for their work and RESOLVED to note the report.

## 16. ANNUAL REVIEW OF SAFER COMMUNITIES

16.1 The Head of Safer Communities introduced the report which outlined the performance across the Safer Communities Partnership during 2024/25. The Head of Safer Communities confirmed that East Sussex remains a safe place to live with crime rates below national average, despite some challenges in coastal areas of the county.

16.2 The Partnership's key objectives of protecting vulnerable people, identifying people at risk or harm, and keeping communities safe remained the same and business plan objectives overall were progressing well.

16.3 The Committee was informed of updated data since the publication of the report regarding deaths that had met the criteria for a domestic abuse review and heard that there had been notifications of four in the last week. The Head of Safer Communities commented that the criteria had recently broadened to include death by suicide in the context of domestic abuse.

16.4 Committee thanked officers for the report asked questions in the following areas:

- **Drug related offences** – The Committee welcomed and sought clarification on reasons for the reduction in drug related offences, particularly in the Hastings area. In response they heard that there had been significant investment in treatment and recovery through the Drug and Alcohol Treatment, Recovery and Improvement Grant which had resulted in more people entering treatment as well

as targeted work with young people. The Head of Safer Communities commented that heroin and other opiates was being used less widely amongst young people, but alcohol was becoming an increasing concern.

- **Temporary accommodation** – The Committee asked if people being housed in East Sussex from other areas, including Brighton, was having an impact on drug and alcohol related deaths in the county, including Eastbourne, and commented that issues could arise if people were housed without adequate support. The Director of ASCH informed the Committee that currently there were approximately 200 Brighton and Hove residents housed in the Eastbourne area and there had been a small number of issues as well as the recent deaths of two adults. However, relationships with colleagues at Brighton and Hove Council were positive and processes were in place to raise issues and repatriate individuals for them to access the appropriate support. In response to a request for information regarding these deaths, the Director confirmed that there had not been Safeguarding Adults Review referrals in relation to these deaths, however the department would investigate access to support services if this was a contributing factor and noted that coroners' reports would be published when available.
- **Multi-Agency Risk Assessment Conferences referrals** – The Committee questioned the high number of Multi-Agency Risk Assessment Conferences (MARC) referrals involving disabled individuals and comments in the report that this likely reflected both a higher local rate of self-identified disability and broader interpretations of disability by referral agencies, and asked what criteria was currently in place. The Head of Safer Communities noted that this was being looked at through the audit process but commented that agencies were likely to note individuals were emotionally distressed despite this not necessarily indicating a mental health issue.
- **Drug and alcohol deaths** – The Committee enquired about the change in criteria for recording drug and alcohol deaths and commented that if deaths were only recorded for people accessing services, any change or reduction to services would impact this data and asked if deaths related to drugs and alcohol should be recorded separately. In response the Committee heard there was separate data for deaths relating to drug and alcohol and that alcohol related deaths were often more prolonged compared to fatal overdoses. The most recent data for these was from 2023, due to coronary processes, so additional real time data focussed on people in contact with services allowed for greater understanding of the current picture. The provision of services would impact on this data, however there was significant investment in drug and alcohol services. National statistics also included drug toxicity deaths, such as paracetamol overdoses, which may reflect suicide rather than substance misuse. The Committee asked about how Safer Communities tracks drug and alcohol misuse among those not in contact with services. The Head of Safer Communities noted academic research had estimated this figure, which had consequently informed national investment in treatment, but commented that some individuals will choose not to engage with services. There had however, been local successes in reaching opiate users.
- **Community safety survey**– The Committee discussed the high number of responses to the community safety survey from Wealden residents. The Head of Safer Communities commented that this was possibly due to the Safer in East Sussex newsletter having a broader readership in Wealden. There was an effort to ensure this was circulated widely across the county and welcomed any suggestions to improve this.
- **Community cohesion** – the Committee enquired about work to support community cohesion in response to recent tensions. The Head of Safer Communities clarified that there had been very few recent incidents of far right /counter protests in East Sussex, possibly due to no hotels housing asylum seekers in the county, but noted work on monitoring community sentiments

through sharing information across statutory agencies; a community engagement strategy had been drafted for PREVENT to support conversations around community tension, particularly where there was risk of violence.

- **Domestic abuse related deaths** – A question was asked about deaths caused by domestic abuse and if there were any links to far-right violence. The Head of Safer Communities confirmed that there was evidence linking extremist behaviours to domestic abuse but there was no evidence of this locally in domestic abuse related deaths reviews, although this would remain under comprehensive review. She also noted that the recent increase in domestic abuse related deaths was due to a change in criteria which now included suicide and drug overdose in the context of domestic abuse.
- **Vaping** – A question was asked about the role of Safer Communities in tackling vaping amongst children. The Head of Safer Communities clarified the role of Public Health in encouraging smokers to vape (whilst not encouraging vaping amongst non-smokers) and Trading Standards in ensuring vapes are not sold to children. More information could be provided by Trading Standards on this issue after the meeting.
- **Local housing and crime** – The Committee asked if there was a correlation between the number of new housing estates and crime figures in East Sussex. The Head of Safer Communities informed the Committee that hot spots were monitored and that to date these were not linked to new housing estates, although noted that data could be skewed by a particular household moving into an area.
- **Shoplifting** – The Committee discussed the increase in shoplifting and commented that this data was inaccurate due to a high number of incidents that were unreported due to a lack of trust in the system. Councillor Swansborough noted discussions amongst the Town Centre Crime Panel including incidents of shoplifting by people from outside the local area. Councillor Beaver noted there was frustration amongst retail staff about the inability to stop perpetrators. The Head of Safer Communities recognised that shoplifting was under reported but that police did target prolific offenders so urged people to report any incidents.
- **Funding** – The Committee asked if funding from the Home Office to support activity in high crime and anti-social behaviour areas would continue. The Head of Safer Communities confirmed funding for this year would continue but next year was dependent on the next Spending Review. In response to a question on how local government reorganisation and devolution would impact on funding, the Director of ASCH commented that this was not yet clear but noted that the intended move of responsibility for policing and crime commissioning to the Mayoral authority would likely have an impact.

16.5 The Committee RESOLVED to note the report.

Meeting ended at 12.30pm.

Councillor Johanna Howell (Chair)

**Report to:** People Scrutiny Committee

**Date of meeting:** 20 November 2025

**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.

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## **RECOMMENDATIONS:**

**The Scrutiny Committee is recommended to:**

- (1) consider the information in the attached RPPR Cabinet report of 11 November 2025 (appendix A) with a focus on services within this committee's remit; and**
  - (2) identify any further work or information needed to aid 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.**
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## **1. Background**

1.1 On 11 November Cabinet considered a Reconciling Policy, Performance and Resources (RPPR) update report. Following on from the State of the County report in June, this report outlined the latest financial and service planning outlook for the Council. It also highlighted significant ongoing uncertainties, particularly around future funding, national policy reforms, and changes to local government structures, with key details still awaited that will be essential to inform our planning. A further update on the planning position will be reported to Cabinet in December.

1.2 The RPPR Cabinet report (attached at Appendix A) includes:

- an updated overall assessment of the planning position and financial outlook;
- updates on key policy context developments since the State of the County report;
- the CIPFA Assurance Review report and the proposed response to recommendations;
- an updated Medium Term Financial Plan (MTFP) and reserves position; and
- an update on the capital programme.

1.3 The key specific pressures and policy developments set out in the report which relate to services within this committee's remit are summarised below.

### Adult Social Care and Health (ASCH)

- Local demographic pressures and increasingly complex needs driving demand and high costs;
- Plans to establish a Fair Pay Agreement for care workers;
- Funding reforms, including changes to the Better Care Fund;
- National health service reforms, including the NHS 10 Year Plan, which includes a greater focus on neighbourhood health and structural changes to Integrated Care Boards

### Children's Services

- Increased demand and more complex needs among children and families, combined with high costs for services;
- High demand in Special Educational Needs and Disabilities (SEND), including rising numbers of Education, Health and Care Plans (EHCPs), and pressure on home to school transport
- National policy reforms, including the Children's Wellbeing and Schools Bill, Giving Every Child the Best Start in Life strategy and Youth Employment Guarantee.
- A delay to the awaited Schools White Paper, which is expected to set out reforms to the SEND system.

1.4 Further detail on the above areas is set out in the Cabinet report and the committee is invited to consider and comment on the implications of these developments for service planning and delivery.

### 3. Scrutiny engagement in RPPR planning

3.1 Scrutiny's engagement in RPPR planning is ongoing throughout the year, through specific RPPR reports and topics included in the wider scrutiny work programme. At the **July** meeting the People Scrutiny Committee discussed relevant parts of the 2024/25 year end monitoring report and the State of the County 2025 report, which enabled the committee to review both the current context and future pressures for the areas within the remit of the committee.

3.2 At its **September** meeting the committee reviewed its work programme to ensure it best supported scrutiny's role in the ongoing RPPR process. The committee considered key risks in relation to pressures and costs in ASCH and Children's Services and agreed to scrutinise home to school transport and review the care quality commission (CQC) assessment of adult social care.

3.3 The scrutiny work planning **awayday** held in October provided an opportunity to further consider current and forthcoming challenges for the services within the committee's remit and how these should be reflected in the work programme. The People Scrutiny Committee agreed to continue its input into shaping local responses to the challenges and high costs in the SEND system, including responding to anticipated national reforms. The committee also agreed to consider how ASCH supports carers, in light of growing demand for care.

3.4 As well as the specific policy context developments set out above, the **November** meeting provides an opportunity to consider the wider current planning and financial outlook, as set out in the attached Cabinet report. Members are invited to:

- consider and comment on the latest planning position;
- review the updated Medium Term Financial Plan (appendix 1 to the Cabinet report);
- consider the proposed next steps to work towards a balanced budget for 2026/27; and
- review the capital programme update (appendix 4 to the Cabinet report); and
- identify any further work or information needed to aid 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.

3.5 The People Scrutiny Committee's **RPPR Board** will meet on 11 December 2025 to consider the further RPPR planning update to Cabinet in December and to agree detailed comments and any recommendations on the budget and emerging portfolio plans to be put to Cabinet on behalf of the committee in January 2026. The Chairs of the People and Place Scrutiny Committees are invited to attend the RPPR boards of both committees.

3.6 In **March 2026** the committee will review the process and its input into the RPPR process. Any issues arising can be reflected in the future committee work programme.

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

**BECKY SHAW**  
Chief Executive

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<b>Report to:</b>	<b>Cabinet</b>
<b>Date:</b>	<b>11 November 2025</b>
<b>By:</b>	<b>Chief Executive</b>
<b>Title of report:</b>	<b>Reconciling Policy, Performance and Resources (RPPR) – update on planning for 2026/27 and beyond</b>
<b>Purpose of report:</b>	<b>To update Members on the latest policy context, Medium Term Financial Plan and capital programme.</b>

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## **RECOMMENDATIONS:**

**Cabinet is recommended to:**

- i. note the updated policy context as set out in paragraph 2;**
  - ii. note the updated Medium Term Financial Plan as set out in paragraph 3 and appendix 1;**
  - iii. note the reserves summary set out in paragraph 3;**
  - iv. note the CIPFA Assurance Review report and recommendations at appendix 2 and the proposed response to recommendations at appendix 3;**
  - v. note the capital programme update as set out in paragraph 6 and appendix 4;**
  - vi. agree that officers bring forward further savings proposals as part of work towards a balanced budget for 2026/27;**
  - vii. agree to receive a further update on the planning position, including proposed savings, in December; and**
  - viii. note recent lobbying activity and agree to continue pressing Government for sustainable funding to meet the needs of the residents of East Sussex.**
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## **1. Background**

1.1 The State of the County report considered by Cabinet in June laid out the complex and challenging context in which we are planning for 2026/27 and beyond, including the considerable uncertainty on a number of fronts – funding, policy reform and changes to the structure of local government itself. As we move through the autumn, much of that uncertainty remains and key information we need to inform our planning, particularly on future funding arrangements, is still awaited. Despite these missing pieces of the planning jigsaw, we continue to work proactively and in partnership to deliver our local priorities, respond to ongoing high levels of demand for support from local people and make best use of the limited resources we have, including shaping the future direction for local government in the county. This report sets out what we know at this point about the outlook for the coming year and beyond, the detail still awaited and the next steps in our planning.

1.2 June's report to Cabinet highlighted the wide range of national and local challenges impacting on the Council's services and the vital support they provide to East Sussex

residents, businesses and communities. The County Council's annual budget of almost £580m net (over £1.1bn gross) is spent on services and support which have a big impact on quality of life and prosperity in the county and deliver both local and national priorities. However, the State of the County report also set out the stark reality that, despite our track record of efficient and effective services and partnerships, there remains a fundamental mismatch between the needs of East Sussex residents for essential statutory support, the cost of delivering these services and the funding we currently expect to have.

1.3 Like other councils nationally, we have seen the enduring impacts of Covid and cost of living increases, alongside wider demographic changes, translate into sustained higher demand for services and more complex needs amongst those seeking support. In addition, factors beyond local control have significantly increased our costs, notably higher levels of inflation and market conditions, particularly in children's services and adult social care. Our projections for the current year show demand for support and the costs of providing it continuing to outstrip our best estimates in these areas as pressures continue and urgently needed national reforms are awaited.

1.4 The particular profile of the population and economy in East Sussex, and the actions the County Council has been required to take over the past decade or more to sustain statutory services within increasingly stretched resources, mean that national pressures are felt especially sharply here. East Sussex is ahead of the national ageing population trend, with amongst the highest proportion of over 85s in the country, and has pockets of significant deprivation which also impact on demand. The county is notably different from the wider south east region in this respect. The protected landscapes in large parts of East Sussex represent a major environmental asset but also constrain economic growth, infrastructure and the related generation of business rates to help fund services.

1.5 East Sussex County Council (ESCC) is also more restricted in the resources available to us than many others. Our funding gap has already required the use of substantial reserves as a temporary solution to make ends meet in recent years, meaning remaining balances have significantly reduced and our resilience to risks compromised. We also have very limited assets and the county's residents already experience relatively high Council Tax levels as there has been ongoing reliance on this route by successive Governments to generate funding for social care. Most significantly, the national formula used to allocate funding to individual councils does not reflect current local needs, particularly in places like East Sussex, with high demand for social care. It is vital that Government reforms to funding formulas properly recognise the true levels of need, costs and local resource-raising ability in East Sussex when final plans are confirmed imminently.

1.6 In light of these challenges, over the past year we have had to take further unavoidable but difficult decisions to reduce services, with significant impacts on residents, staff, our partners and communities. Even as these previously identified savings continue to be implemented, the growing funding gap means we need to consider additional steps from the very limited options remaining. Without substantial additional national funding, of which there is currently no indication, there will continue to be a large shortfall in the money available to the Council to meet escalating needs and costs now and in the future. Whilst we recognise the potential benefits from local government reorganisation, devolution and new technologies, and we are pursuing these with determination and pace, the impacts are not immediate or of a scale which will fully bridge the gap. These developments also require additional capacity to implement in the short term at the same time we are taking every step possible to minimise day to day spend and maintain service delivery in a difficult and evolving context. These concurrent challenges will place considerable demands on the organisation over the next two years.

1.7 The Reconciling Policy, Performance and Resources (RPPR) process enables us to approach our policy, business and financial planning and risk management in an integrated way to support the Council in navigating the challenges ahead. As part of our ongoing RPPR planning, we are updating our Council Plan for 2026/27 and beyond to reflect the latest policy and financial context as it develops. The updated Council Plan will ensure we direct the resources we have as effectively as possible on delivery of our evidence-based priorities for the county:

- Driving sustainable economic growth;
- Keeping vulnerable people safe;
- Helping people help themselves; and
- Making best use of resources, now and for the future - the test applied to all activities to ensure sustainability of our resources, both in terms of money and the environment.

1.8 This report provides our latest assessment of the financial position at this point, as well as the significant additional information awaited from final funding reform plans, the national Budget later this month and the provisional finance settlement, all of which are expected to have material impacts on our financial outlook. It also provides an overview of key national developments since the State of the County report which we need to take account of in our planning.

1.9 The report also sets out the actions we need to set in motion now as we work towards meeting the Council's legal duty to set a balanced budget in February and to safeguard the provision of our essential services for the coming year. As always, we will take a prudent and responsible approach, ensuring that all avenues are explored to inform Members' final decisions in the new year. We will work with the county's MPs and partners locally, regionally and nationally to amplify the voice of the Council in our vigorous lobbying for the interests of East Sussex. We will also continue to be open and honest with local people, our staff and partners about the scale of the challenge, the limited options open to us and the impact of the tough choices we must necessarily make.

## **2. Policy context update**

2.1 The key areas in which there have been developments since the State of the County report, or in which further developments are expected, are detailed below.

2.2 **Government changes** – The September 2025 Government reshuffle brought significant changes at the Ministry of Housing, Communities and Local Government (MHCLG) and the Department for Education (DfE), with implications for local government policy and delivery. Steve Reed MP was appointed the new Secretary of State for MHCLG, along with new ministers for local government (Alison McGovern MP) and devolution (Miatta Fahnbulleh MP). Following his appointment the Secretary of State signalled continued focus on progressing devolution and local government reorganisation, funding reform, empowering communities and accelerating housing delivery. At DfE, Bridget Phillipson MP retained her role as Secretary of State, while a new ministerial team was appointed, including Georgia Gould MP as Minister for School Standards, which incorporates responsibility for Special Educational Needs and Disability (SEND) reform, and Josh MacAlister MP, who led the Independent Review of Children's Social Care under the last Government, as Minister for Children and Families. These changes come at a critical time, with major reforms underway in education and children's social care.

2.3 **National economic context** – Inflation, as measured by the Consumer Prices Index (CPI), remains above the Bank of England's 2% target, standing at 3.8% in the 12 months to September 2025, unchanged from the previous two months, following increases earlier in

the year. The latest Bank of England forecasts expect CPI to gradually fall to its 2% target next year. Reflecting the above target rate of inflation, the Bank has held interest rates steady at 4% since August 2025. Although there remains a possibility of a further cut this year, analysts have predicted that any further reduction may be delayed to next year. The economy is expected to grow by just over 1.0% this year, a similar rate to 2024, rising to 1.9% in 2026, before falling to around 1.8% over the remainder of the Office for Budget Responsibility's current five year forecast, which will be refreshed for the autumn Budget.

2.4 Persistently higher levels of inflation and the associated cost of living pressures have continued to impact on households, with ongoing implications for the support required from services. The Government confirmed earlier in the year that the Household Support Fund (HSF) which runs until March 2026, will be replaced by a new Crisis and Resilience Fund running for three years from 2026/27. More recently, Government funding for the Holiday Activities and Food (HAF) programme which provides targeted support with food and activities for children eligible for free school meals, has also been extended for three years to March 2029, allowing the ongoing commissioning of this support by Children's Services.

2.5 **Local government funding** – A report on the financial sustainability of local government, published by the Communities and Local Government Select Committee in July, highlighted that local government finance is in a precarious state, with funding failing to keep pace with rising demand, population growth, and service delivery costs. Over the summer MHCLG consulted on the detail of proposed reforms to the formulae used to allocate national funding to individual councils through its Fair Funding Review 2.0. These reforms could see significant shifts in how resources are allocated to different areas based on updated assessments of need and local resources. A Government response to the consultation, setting out final intentions which will underpin a multi-year settlement from 2026/27, is expected imminently within a finance policy statement due later in November.

2.6 Further significant information is expected from the autumn Budget on 26 November including any changes to taxation, and we await an update to the level of the National Living Wage from April 2026 which will impact on our providers and potentially the costs of commissioning services, particularly in the care sector. Higher than expected inflation will further affect costs across a range of services. We will assess the impact for ESCC as we receive detail from Government in all these areas in the coming weeks. Further analysis of the potential impact of awaited announcements is set out in section 3.

2.7 The Government has committed to simplifying funding arrangements by moving away from fragmented, ringfenced grants and burdensome reporting requirements towards increased local flexibility in the use of resources. To support this, it is introducing the Local Government Outcomes Framework (LGOF), which will apply from April 2026. The framework sets out 15 priority outcomes that local authorities are expected to deliver which cover areas such as social care, health, education, environment and highways and transport. These outcomes are supported by metrics drawn from existing data sources which will be used to track councils' progress. Performance against LGOF will form part of the assessment of councils' compliance with the Best Value Duty. Details of these arrangements and the final framework will be published alongside the provisional local government finance settlement later this year.

2.8 Throughout 2025, Government has continued to position artificial intelligence (AI) as a central pillar of its strategy to modernise public services. Through the AI Playbook and the AI Opportunities Action Plan, central government departments and public sector bodies are being encouraged to adopt AI technologies to streamline operations, reduce costs, and enhance service delivery across both support functions and frontline services. There is an emphasis on responsible deployment, with clear expectations around transparency, data protection, bias mitigation, and robust governance. Nationally, councils are at varying stages

of adoption, and barriers such as limited funding, staff capacity, and technical expertise are significant. However, the Government and Local Government Association anticipate that AI will play a transformative role and are working to ensure councils have the tools and support needed to deploy AI safely and effectively. Locally, we have been piloting and researching the use of AI applications to maximise efficiency in recent months, particularly in areas of high demand, and we are working to scale up adoption across the council with associated safeguards in place and within the resources available.

**2.9 Devolution and local government reorganisation** – In July, the Government introduced the English Devolution and Community Empowerment Bill to parliament which legislates for the policy intentions set out in the December 2024 English Devolution White Paper. Further detail on the content of the Bill, and implications for devolution and local government in Sussex was reported to Cabinet in October. Government intends for the Bill to have received Royal Assent by April 2026, in order to ensure the relevant powers can be conferred ahead of the inaugural elections for Devolution Priority Programme (DPP) areas, including Sussex, in May 2026.

**2.10** While the Bill's core focus is on expanding devolution, it also introduces a range of other reforms related to local authority governance and community empowerment. These include a streamlined process for transitioning to single-tier local government structures, mandating the leader and cabinet governance model and a requirement on councils to establish effective neighbourhood governance arrangements to strengthen local voice and accountability. A new statutory Community Right to Buy will give local groups first refusal on assets of community value. The Bill also establishes a Local Audit Office to oversee public audit. Taken together, these measures aim to modernise governance, improve transparency and accountability, and empower communities alongside the broader devolution agenda.

**2.11** DPP areas were required to submit proposals for local government reorganisation by 26 September. Ahead of this deadline Cabinet agreed to submit the One East Sussex proposal for a new single unitary council on the current County Council footprint and we await the Government response to this and other proposals submitted across Sussex. A Government-led consultation on proposals considered viable is expected to start before the end of the year ahead of a final decision on future structures in the spring of 2026. In the meantime we continue to progress, with district and borough council partners, our local planning for reorganisation and the challenges and opportunities it presents.

**2.12 Children's services** – Significant pressures arising from demand and complexity of need, alongside wide-ranging service reforms, continue to impact children's services nationally and locally. The Children's Wellbeing and Schools Bill, which introduces 39 new policies to reform children's social care and education, is nearing the final stages in parliament and will have significant implications for local services. Children's Services continues to work towards implementing these reforms, including through our Transformation Programme focused on integrating targeted early help with social work teams and strengthening our partnerships to improve outcomes for children.

**2.13** In July the Government published its Giving Every Child the Best Start in Life strategy and announced funding to support the roll out of Family Hubs across every local authority, improvements to health services, increased government funded childcare and the promotion of inclusion. The Government also announced a new Better Futures Fund - a £500m 10-year fund aimed at providing opportunities for vulnerable children and young people and addressing issues such as school attendance, mental health and youth employment. For young people not in education or employment (NEET) a Youth Guarantee has been confirmed whereby every eligible unemployed young person on Universal Credit for 18 months without earning or learning will be provided guaranteed paid work. It is also expected that the autumn Budget will respond to recommendations from the Child Poverty

Taskforce to lift the two-child limit for universal credit and tax credit and will coincide with the publication of a Child Poverty Strategy.

2.14 High demand and complexity in SEND also continues, along with related pressure on home to school transport. National reports, including from the Education Select Committee in September, have continued to warn of an unsustainable system with increasing demand for education health and care plans (EHCPs) and a need for greater inclusion in mainstream schools. In October it was announced that promised reforms to the system which are due to be set out in a Schools White Paper have been delayed from this autumn to early 2026, to allow a further period of co-production and testing with stakeholders. SEND reforms are urgently needed and without sufficient steps being taken to address the sustainability of the system nationally, councils will continue to face significant pressure on resources for SEND at local level for the foreseeable future.

2.15 In response to wider educational challenges, the Government has announced a new support package for schools and the roll out of RISE (Regional Improvement for Standards and Excellence) Attendance and Behaviour Hubs which aim to tackle poor attendance and behaviour in schools. The forthcoming Schools White Paper is also expected to build on these aims. In inspection and regulation, Ofsted, as part of wider reforms, has set out its new approach based on 'report cards' that include a 5-point grading scale and additional information for parents and carers.

2.16 **Adult social care and health** - Given rising demographic and demand pressures, there remains an urgent need for a comprehensive plan for the funding and reform of adult social care which will ensure that those in need of care services can receive appropriate and timely care. The Government-commissioned Casey review has started work, including holding cross party discussions on potential reforms; however, it is not expected to report on phase 1 until 2026 and charging reform will not be addressed until phase 2 which will report in 2028. Locally, we have received the report of our Care Quality Commission assessment of how the Council meets its duties under the Care Act. The significant strengths of our adult social care services were recognised in the overall 'good' rating, along with the challenges faced and areas for development which we will continue to progress.

2.17 The Government's 10 Year Health Plan, Fit for the Future, published in July 2025, included further detail on plans to implement the 'three shifts' of analogue to digital, hospitals to communities and sickness to prevention. Key impacts for Adult Social Care include a greater emphasis on neighbourhood health and closer working between social care and health services, with neighbourhood health plans to be drawn up by local government, the NHS and local partners; development of the NHS App to support unpaid carers; and changes to statutory organisations including the proposal to abolish Healthwatch (the independent voice of people with lived experience of health and care services) and Integrated Care Partnerships. The Better Care Fund is also set to be reformed from 2026/27 with a focus on providing consistent, joint funding to services which are essential to deliver in a fully integrated way, such as discharge, intermediate care, rehabilitation and reablement.

2.18 Hastings and Rother have been confirmed as pilot areas for Neighbourhood Health Services which will draw together a range of professionals from health, care and the voluntary sector to develop a neighbourhood health team and aim to provide people with the right care and support in their area. The 10 Year Plan also confirmed further NHS structural change including changes to how local services are planned and commissioned, with a more focussed role for Integrated Care Boards (ICBs), reforms to health care providers, and a streamlined national oversight. The Government has confirmed a single joint executive team will be established at the Department of Health and Social Care and NHS England as part of the transition to one organisation. Locally, the merger of NHS Sussex and NHS Surrey ICBs

has been confirmed, with the two ICBs working more closely together from autumn 2025 ahead of the creation of the new, larger ICB from April 2026.

2.19 In September, the Government launched a public consultation to gather views on the design of a social care Fair Pay Agreement (FPA) process, as set out in its roadmap for implementing the Employment Rights Bill. We will work with our providers to form a response to the consultation which sets out our local needs and any risks related to the introduction of the FPA. Following the consultation, the Adult Social Care Negotiating Body will be established through regulations in 2026 to negotiate changes to pay and terms and conditions for care workers, with the first FPA coming into effect in 2028. The Negotiating Body will aim to improve recruitment and retention and an initial £500m funding has been committed with an expectation that by 2028, care workers will see an increase in their yearly wages.

2.20 **Economy, transport and environment** – The Government's Modern Industrial Strategy, announced in June 2025, has been expanded through sector-specific plans published from August onwards. The strategy is explicitly place-based, recognising that regional growth is essential to national competitiveness and councils are expected align economic and spatial planning with the strategy's sectoral goals. Locally, we continue to focus on implementation of our evidence-based East Sussex Prosperity Strategy, including the development of a strategic investment plan. In September, the Prime Minister announced a new Pride in Place Strategy focused on directing funding to deprived areas and empowering local communities to drive change. The Pride in Place programme builds on the 75 areas, including Hastings and Eastbourne, already identified through the Plan for Neighbourhoods and each allocated a £20m 10-year fund. Hastings has been allocated a further £1.5m investment over two years from the new Pride in Place Impact Fund, intended to support the development of shared spaces, revitalise local high streets and improve public spaces.

2.21 The Government published a 10-year National Infrastructure Strategy in June in support of its economic growth mission. The strategy brings together economic, social and housing infrastructure under one strategy and aims to speed up the development of infrastructure and provide longer-term certainty for investors. In September the Secretary of State for Transport confirmed approval for the use of a second runway at Gatwick airport, with potential to increase the airport's capacity from around 45 million passengers per year to up to 80 million. The approval came with conditions, including additional noise controls and increased use of public transport to access the airport.

2.22 The creation of a Mayoral Strategic Authority (MSA) in Sussex will reshape the role of councils by transferring strategic powers such as transport, skills, and economic development, to the mayoral level. While responsibility for day-to-day service delivery in some areas will remain with local councils, funding streams are consolidated under the MSA. While we await details of the funding arrangements, including transfers, an assessment is being undertaken of the implications of devolution on funding streams, staffing and policy which will be factored into our planning.

2.23 **Migration** – Since the publication of the Restoring Control Over the Immigration System White Paper in May 2025, the Government has implemented its reduced list of jobs eligible for Skilled Worker visa sponsorship and ended the recruitment of overseas social care workers. The standard qualifying period for permanent residence will be increased from five years to ten years under new proposals, and changes to English language standards, as well as a new framework for family visas, are expected to be implemented by the end of the year. A public consultation is also due to take place this year on the use of digital ID cards as part of measures to combat illegal working and check Right to Work.

2.24 We expect detail on the Government's approach on these and other key areas, and the resulting implications for the County Council, to become clearer in the coming months and will continue to factor this information into planning for 2026/27 and beyond.

### 3. Medium Term Financial Plan

3.1 Planning for 2026/27 and beyond remains highly challenging. With demand for services, and the cost of providing them, continuing to rise within the current year, the total level of expenditure required to deliver our services continues to grow. The level of Government funding that ESCC will receive between 2026/27 and 2028/29 is yet to be confirmed. Following consultation over the summer, the outcome of the Fair Funding Review 2.0 is expected later in November. The Autumn Budget Statement at the end of November may also contain measures which materially impact the Council's position. Detailed allocations will not be clear until we receive the provisional Local Government Settlement for 2026/27 in mid-December.

3.2 At this point the Medium Term Financial Plan (MTFP) has been updated for the best estimated available information, including developments since State of the County in June. The MTFP does not currently account for the effects of funding reform, the financial impacts of which will be worked through as final proposals are set out and detailed council allocations are published. However, our modelling suggests that ESCC could lose £18m of annual settlement funding by the end of the MTFP period. Transitional protections limit any loss of grant funding to one third of the total loss over each of the next three years, so the estimated loss in 2026/27 is £6m.

3.3 The MTFP presented within the State of the County report estimated a deficit budget position by 2028/29 of £70.8m. Since then, the MTFP has been updated to include our latest assessment of departmental service pressures and updated financial modelling. The impact of the updates is summarised in the table below and provides a deficit budget position by 2028/29 of £88.3m.

<b>Medium Term Financial Plan</b>	<b>2026/27 £m</b>	<b>2027/28 £m</b>	<b>2028/29* £m</b>
<b>Council 11 February 2025 DEFICIT</b>	<b>25.916</b>	<b>18.731</b>	<b>0.000</b>
Carry Forward of 2025/26 Deficit	11.449	-	-
<b>Annual Budget Deficit after Carry Forward</b>	<b>37.365</b>	<b>18.731</b>	<b>0.000</b>
<b>Annual Budget Deficit after Updates</b>	<b>55.844</b>	<b>9.809</b>	<b>22.659</b>
<b>Cumulative Budget Deficit after Updates</b>	<b>55.844</b>	<b>65.653</b>	<b>88.312</b>

\*Notional due to LGR

3.4 A detailed MTFP after normal updates is shown at appendix 1. It shows that ESCC will face a deficit of £55.8m for 2026/27, and £88.3m at the end of the MTFP period, subject to any impacts from funding announcements yet to come.

3.5 The Council reported a projected overspend for 2025/26 of £14.9m at Quarter 1, which will require a further draw on strategic reserves. The updated projected revenue outturn at Quarter 2, which will be available in December, will provide a further indication of the likely impact. The latest projected reserve balances as at 1 April 2029 are set out in the table below. This position reflects the additional draw to balance 2025/26, based on the



Quarter 1 forecast, but is prior to any draw on balances required to set a balanced budget for 2026/27.

<b>Reserves Balances</b>	<b>Balance 1 Apr 25 £m</b>	<b>Estimated 1 Apr 2026 £m</b>	<b>Estimated 1 Apr 2029 £m</b>
<b>Earmarked Reserves:</b>			
<b>Held on behalf of others or statutorily ringfenced</b>	<b>25.5</b>	<b>21.2</b>	<b>19.9</b>
<b>Named Service Reserves</b>			
Waste Reserve	19.8	14.7	7.4
Capital Programme Reserve	9.1	0.0	0.0
Insurance Reserve	7.7	3.7	3.5
Local Government Reorganisation Reserve	0.0	0.0	0.0
<b>Subtotal named service reserves</b>	<b>36.6</b>	<b>18.4</b>	<b>10.9</b>
<b>Strategic Reserves</b>			
Priority Outcomes and Transformation	5.2	5.1	4.4
Financial Management	11.3	6.0	5.0
<b>Subtotal strategic reserves</b>	<b>16.5</b>	<b>11.1</b>	<b>9.4</b>
<b>Total Earmarked Reserves</b>	<b>78.6</b>	<b>50.7</b>	<b>40.2</b>
<b>General Fund Balance</b>	<b>10.0</b>	<b>10.0</b>	<b>10.0</b>
<b>TOTAL RESERVES</b>	<b>88.6</b>	<b>60.7</b>	<b>50.2</b>

3.6 The projected level of strategic reserves of £11.1m as of 1 April 2026 means that the Council will have insufficient scope to use reserves to address the budget deficit or any emergent pressure, without further action over and above current steps. We continue to take a range of robust measures to contain costs in-year, including the ongoing application of stringent spending and recruitment controls on top of our existing robust governance and financial management systems. Whilst important in maintaining discipline, these measures will have limited impact in the context of the overall deficit and ongoing pressures on services.

3.7 In addition to the measures already in place, further opportunities for savings will continue to be explored across all departments. This work will focus on identifying any remaining areas where efficiencies can be achieved, while recognising the limited potential for further savings and the potential impacts on service delivery. Officers will assess the feasibility and implications of additional reductions, with a view to informing future budget planning and supporting efforts to close the funding gap. Further detail is at section 5.

3.8 Given the scale of the projected deficit and the limited scope for further savings, there is no realistic path to setting a balanced budget. As a result, the Council needs to prepare for requesting Exceptional Financial Support (EFS) from Government. EFS is not 'free' money to the Council as it would involve either borrowing to fund revenue (day to day service) costs and/or increasing Council Tax by an additional amount above the referendum limit which is already factored into the MTFP.

## **4. CIPFA Financial Assurance Review**

4.1 The Ministry of Housing, Communities and Local Government (MHCLG) look to the Chartered Institute of Public Finance and Accountancy (CIPFA) to provide assurance for any EFS requests. In anticipation of having to approach MHCLG for EFS, CIPFA was commissioned to undertake the required financial assurance review of ESCC. The review, undertaken over the summer, focused on the Council's financial management and sustainability, capital programme (including investments assets and debt levels), and internal governance.

4.2 CIPFA's report, attached at appendix 2, presents a positive assessment of the Council's financial management, with no major failing identified. In summary, whilst acknowledging that the Council faces a serious shortfall in funding, it finds that the Council benefits from strong governance, respected financial leadership, and prudent treasury management, which provide a solid platform to address the significant financial challenge.

4.3 The report makes 10 recommendations. These are welcomed and reflect an endorsement and continuation of the ongoing work we have been undertaking in response to the financial challenge, with additional areas of focus on data and analytic capability and risk management. Our response to the individual recommendations is set out in appendix 3.

4.4 CIPFA's assessment will be shared with MHCLG as part of the evidence base for any EFS request. In light of the current financial outlook formal discussions will be held with MHCLG in the coming weeks to explore the options for Exceptional Financial Support available to the Council to enable a balanced budget to be set for 2026/27.

## **5. Savings**

5.1 The 2025/26 balanced budget and MTFP agreed by Council in February already includes planned savings of £16.2m. Coming on top of over £140m already delivered since 2010, the impacts on our residents, staff and partners are significant. The scope to find more savings and efficiencies is very small given the high proportion of our budget directed to delivering or supporting statutory services and duties. Most discretionary areas of work have already been reduced or removed in earlier rounds of savings. However, in light of the serious financial position the Council faces, and the very limited options remaining, Cabinet requested in June that officers explore areas of search for further savings and service reductions across all departments to help reduce the financial gap.

5.2 In this context, all departments are undertaking work to identify any scope for further reductions and to understand the impacts. At this point, any further savings proposals are expected to have significant impacts on residents, partners and staff, as well as the organisation's capacity to respond to new demands and transform services. Despite this, given the current financial outlook, it is recommended that officers bring forward specific savings proposals for consideration to support the budget position.

5.3 We are doing what we can to mitigate the impacts of the savings we are having to make out of necessity rather than choice. There is some scope from the rapid development of artificial intelligence (AI) and other digital tools to increase efficiency in frontline services, helping to absorb some of the increases in demand with our current workforce. In support services, new technology can help offset the reductions in staffing capacity arising from savings to some extent. In addition, we continue to take forward our transformation programme in Children's Services and investment in prevention where we have good evidence that it is having an impact on managing demand and reducing pressures on statutory services. We will also work with partners to ensure we make best use of resources and seek any further ways to mitigate the impact of savings.

5.4 Income generating assets and planned capital receipts are routinely incorporated into the core budget and the capital programme. We will continue to maximise returns from surplus assets and minimise the costs of office and other accommodation.

5.5 Ahead of further detailed funding announcements we will continue to take all opportunities to impress on Government the position faced by ESCC, the impacts on the people, businesses and communities of the county, and we will seek the ongoing support of local MPs in making this case.

## **6. Capital programme**

6.1 The capital programme has been updated in accordance with Capital Strategy principles and ongoing review of the programme and profiled expenditure. Appendix 4 presents a revised programme of £672.5m, of which £288.7m is planned for delivery in the period to 2028/29. The programme will be updated further to reflect the impact of the Budget once detailed allocations are known.

6.2 The capital programme is funded from several sources and can be split into the elements that are funded from identified specific sources (such as grants, developer contributions and earmarked specific reserves), and elements considered to be Core Council Funded. Core Council Funded relates to those projects funded from Council resources that ultimately increases the Council's need to borrow.

6.3 During budget setting 2025/26, in order to reduce the cost of borrowing, the Council approved changes to the capital programme outside of normal Capital Strategy updates, to reduce the level of investment in Core Council Funded programmes. The projected impact of this review was an annual reduction in borrowing costs of £3.9m by the end of the MTFP period. Since this review was undertaken, the Council is now projecting that the capital reserve will be used to offset the revenue overspend in 2025/26. This will increase the level of borrowing required to fund the ongoing programme and increase borrowing costs in future years.

## **7. Engagement, lobbying and communications**

7.1 Over the summer we have been actively making the case for East Sussex in meetings with national and local politicians and officials. In August we responded to the Fair Funding Review 2.0 consultation, clearly articulating the potentially negative overall impact on our funding, despite recognition of increased need. Whilst we welcomed the principles of the review, we made four key asks of Government in order to avoid worsening the Council's funding gap and to ensure the reforms more closely reflect need, costs and resources in East Sussex. These were:

- to review the shift in focus of adult social care funding towards working age adults, which does not reflect the costs of supporting the county's older than average population;
- to use a more detailed assessment of the costs of delivering services in different parts of the country, to reflect the true labour costs in the care sector in East Sussex - a key area which impacts ESCC's expenditure;
- to reduce the extent to which funding allocations are altered for assumed local ability to raise Council Tax – the proposed 100% Council Tax 'equalisation' is unfair, does not reflect the reality of ESCC's ability to raise income locally and is a key reason the Council is projected to lose funding despite an assessed increase in need; and
- to recognise that there remains a fundamental need for increased overall funding for local government, a review of the statutory requirements councils are expected to

deliver and an urgent need for sustainable reforms in key areas of increasing demand such as Adult Social Care and SEND.

7.2 As a Council we have been clear we need Government to act on these crucial points if we are to sustain essential services and we await its response. We shared our concerns with local MPs and received welcome support in raising these issues with Ministers. We continue to work through our networks and with our partners locally, regionally and nationally to articulate our position, and to influence national policy decisions on funding and service reform.

7.3 The outcome of funding reform consultation, when received, will provide a clearer picture of the financial outlook to inform the focus for further lobbying. Given the size of the projected financial gap we expect it to be essential that we continue to press Government as strongly as possible for additional funding and support to be provided to East Sussex ahead of the provisional financial settlement in December and the final settlement in February.

7.4 We will also continue to call for national action on unavoidable costs and market conditions over which we have very limited control locally and highlight the lack of funding to invest in the preventative approaches which are the only way to mitigate increasing need, as well as to achieve the best outcomes for our residents.

7.5 Alongside this, we will maintain open and honest communication with our residents, partners and staff on our approach to the financial position and the impacts of specific savings proposals.

## **8. Looking ahead**

8.1 This report outlines the substantial challenges we face, including a projected funding gap which means we must seek further savings and service reductions, as well as preparing to request Exceptional Financial Support from Government in order to be in a position to set a balanced budget for the year ahead.

8.2 However, there are some key gaps in our knowledge at this point and crucial further information expected in the coming weeks. We will re-assess our position in light of the additional detail we expect to have soon, which should enable us to model the funding outlook for 2026/27 onwards with more accuracy, alongside refining our own understanding of future levels of demand and the associated costs.

8.3 This analysis will feed into our ongoing business and financial planning, and we expect to update Cabinet again in December, ahead of bringing forward final proposals for the 2026/27 budget and Council Plan to Cabinet in January for consideration, and Council in February for decision.

8.4 Members will continue to be involved in developing plans through Cabinet, County Council, Scrutiny Committees, and specific engagement sessions throughout the 2025/26 RPPR process.

**BECKY SHAW**  
**Chief Executive**

**Medium Term Financial Plan (MTFP) Update**

	Ref	Estimate (£m)			
		2026/27 Annual	2027/28 Annual	2028/29 (LGR) Annual	Total Cumulative
<b>Council 11 February 2025 DEFICIT</b>		<b>25.916</b>	<b>18.731</b>	<b>0.000</b>	<b>44.647</b>
CARRY FORWARD OF 2025/26 DEFICIT		11.449			11.449
<b>Total After Carry Forward</b>		<b>37.365</b>	<b>18.731</b>	<b>0.000</b>	<b>56.096</b>
<b>Normal Updates:</b>					
Council Tax	A	(14.078)	(14.311)	(29.425)	(57.814)
Business Rates	B	(2.240)	0.138	(2.302)	(4.404)
Children's Social Care Prevention Grant	C	(0.123)			(0.123)
Revenue Support Grant		(1.111)	(0.013)	(0.115)	(1.239)
Movement in Reserves	D	1.107			1.107
CSD Home to School Transport - grant rolled into RSG 2025/26		0.992			0.992
Inflation	E	0.817	(1.466)	18.625	17.976
General Contingency	F	0.686	0.221	0.540	1.447
Pay Awards and National Insurance	G	2.000	0.050	5.745	7.795
Levies and grants	H	0.028		0.014	0.042
Treasury Management	I	tbc	tbc	tbc	tbc
<b>Pressures added to / (removed from) the MTFP:</b>					
ASC Growth and Demography	J	14.217	3.106	22.479	39.802
CSD Growth and Demography	K	16.409	3.276	6.693	26.378
CET Waste Housing Growth	L	(0.225)	0.077	0.405	0.257
Pressures Protocol: including CoPilot and other AI applications	M	tbc	tbc	tbc	tbc
<b>DEFICIT AFTER UPDATES</b>		<b>55.844</b>	<b>9.809</b>	<b>22.659</b>	<b>88.312</b>

## Updates:

### A Council Tax

The Government has provided local authorities in England additional flexibility in setting Council Tax by increasing the referendum limit for increases in Council Tax to 3% and the ability to increase the Adult Social Care Precept by up to 2%. Council Tax inflation is therefore assumed at 4.99% for all years.

Council Tax base growth is being estimated at 1.5% for all years. The impact of additional collection fund deficit/surpluses will be managed through the collection fund reserve.

### B Business Rates

Business rates have been updated for the additional year reflecting the latest inflation estimates by the Office of Budget Responsibility (OBR) published in March 2025. Business rates will continue to be monitored along with the collection fund and reviewed alongside the District / Borough Councils latest collection forecasts to understand any further impacts.

### C Children's Social Care Prevention Grant

The final allocation of grant for 2025/26 was £0.123m higher than original notified.

### D Revenue Support Grant (RSG)

A number of grants have been rolled into RSG for 2025/26 including: Election Integrity Programme New Burdens, Extended Rights for Home to School Transport, Island Funding, Tenant Satisfaction Measures and Transparency Code. The estimates have been updated for OBR forecast inflation, and there is a technical adjustment relating to a one-off transfer to reserve in previous years.

### E Inflation

The inflation model as per the approved pressures protocol allows for contracts to be uplifted annually per the contract conditions but does not provide inflation for utilities and other running costs e.g. building maintenance, communications and software. Contractual negotiations, e.g. Foster Care and Concessionary Bus Fares are considered for inclusion within the MTFP by Corporate Management Team (CMT).

The OBR published its updated forecast inflation rates as part of its latest outlook for the economy and public finances in March 2025. It is usual practice to use this forecast to update inflation; however given the current high inflation rates it is considered prudent to use the rates at July 2025 for the 2026/27 financial year, and OBR forecast rates thereafter.

The table below shows the changes in OBR inflation estimates from its previous publication plus the actual rates for July 2025:

	OBR Forecast October 2024*			OBR Forecast March 2025*			Actual Rates July 2025
	2026/27	2027/28	2028/29	2026/27	2027/28	2028/29	
CPI	2.68%	2.16%	2.11%	1.81%	2.00%	2.00%	3.80%
RPI	3.47%	3.17%	3.08%	2.99%	3.03%	2.82%	6.50%
RPIX	3.13%	2.89%	2.90%	2.57%	2.77%	2.76%	4.70%

*\*Inflation estimates are as of September of each calendar year to provide the best mid-point within each financial year.*

The inflation estimates also includes updates from the Highways and Waste Models based on industry-specific inflation rates.

The MTFP normal update includes inflation increases from 2026/27 onwards. Normal practice is that, in-year, services would be expected to manage movement in actual inflation through contract/budget management and the pressures protocol.

### F General Contingency

This is calculated at 1% of net budget less treasury management. The figures reflect the addition of 2028/29 and impacts of other changes.

#### **G Pay Award Added Year and Uplift**

Provision has been made for the addition of 2028/29 and award of 2.5% in all years of the MTFP. Adjustment has also been made to reflect the late pay award for 2024/25, the 3.2% pay award agreed for 2025/26, plus allocation of the National Insurance Grant.

We await the increase in National Living Wage for 2026/27 to be confirmed in the Autumn Budget Statement; if it is greater than 2.5% it will add a pressure to the MTFP.

#### **H Levies Increase**

The figures are reflective of the latest estimates of the Flood & Coastal Protection Levy and Sussex Inshore Fisheries Levy.

#### **I Treasury Management (TM)**

The TM Model is being updated for latest estimates including the impact on borrowing costs of using £7.2m from the Capital Programme Reserve to balance the budget for 2025/26, as reported at quarter 1 monitoring.

#### **J Adult Social Care (ASC): Growth and Demography**

Figures for ASC Growth and Demography have been updated following the overspend projected at Quarter 1 (Q1). Whole year equivalent clients have been increasing by around 5.5% per year since 22/23. ESCC now supports 1,000 clients more than the client base prior to the Covid pandemic of around 7,000. Growth projections have been based at the annual trend from 23/24 to 25/26. Note that this increase excludes inflation on provider fees, which is included in E.

#### **K Children's Services Department (CSD): Growth and Demography**

Figures for CSD Growth and Demography have been updated following the overspend projected at Q1. For Looked After Children (LAC), numbers are projected to remain stable, but there will be a 15.56% increase in high cost agency children's homes placements. Home to School Transport figures have increased to reflect current demand plus an additional calculated increase in numbers of SEND clients.

#### **L Communities, Economy and Transport (CET): Waste Housing Growth**

The forecast pressure for 2028/29 has been added to the current plan and estimates have been updated for the latest available housing numbers.

#### **M Pressures Protocol**

Departments are able to submit pressures bids during the Reconciling Policy, Performance and Resources (RPPR) process to be considered for funding, this will include CoPilot and other Artificial Intelligence (AI) applications.

## Annex 1

<b>Medium Term Financial Plan</b>	<b>2025/26</b>	<b>2026/27</b>	<b>2027/28</b>	<b>2028/29</b>
	<b>Approved Budget</b>	<b>Estimate</b>	<b>Estimate</b>	<b>Estimate (LGR)</b>
	<b>£million</b>	<b>£million</b>	<b>£million</b>	<b>£million</b>
<b>TAXATION &amp; GOVERNMENT FUNDING</b>		(579.615)	(608.118)	(637.889)
Council Tax	(370.172)	(13.142)	(19.074)	(20.326)
Adult Social Care Precept	(29.050)	(8.247)	(8.538)	(9.099)
Business Rates	(102.987)	(1.855)	(2.057)	(2.302)
Social Care Grant	(59.640)			
ASC Market Sustainability and Improvement Grant	(11.312)			
Children's Social Care Prevention Grant	(1.485)	(0.123)		
National Insurance Grant		(4.470)		
Revenue Support Grant	(4.452)	(1.183)	(0.102)	(0.115)
New Homes Bonus	(0.517)	0.517		
<b>TOTAL TAXATION &amp; GOVERNMENT FUNDING</b>	<b>(579.615)</b>	<b>(608.118)</b>	<b>(637.889)</b>	<b>(669.731)</b>
<b>SERVICE PLAN</b>				
Service Expenditure	515.467	548.095	622.145	653.653
<b>Inflation</b>				
Non-pay Inflation	17.011	19.519	17.863	18.602
Allocation of pay award and NI increase to services	1.948	17.032		
<b>Adult Social Care &amp; Health</b>				
Better Care Fund - Discharge Funding	5.088			
Discharge Funding - New Burdens	(5.088)			
Growth & Demography	3.917	18.134	7.023	22.479
Transfer PH savings grant to CHB	1.444			
Pressures approved via protocol: ASC Fees	0.737	0.580		
Pressures approved via protocol: ASC Strategy	0.330			
Pressures approved via protocol: ASC Growth and Demography	3.574			
Service Demand	5.709			
<b>Children's Services</b>				
Looked After Children Growth & Demography	0.808	16.374	3.046	3.449
Home to School Transport Growth & Demography	5.908	2.769	2.896	3.244
Looked After Children Placements Covid-related	(0.519)			
Covid Grant Funding for Looked After Children Placements	0.519			
Family Safeguarding	(2.075)	(3.533)		
Net Operational Pressures incl. Careleavers and Locality	0.475	2.929		
Pressures approved via protocol: CSD Revenue Digital	0.039	0.144		
Pressures approved via protocol: CSD Staffing Capacity for Change Programme	(0.105)			
Pressures approved via protocol: CSD Care Inflation	1.654	1.754		
Pressures approved via protocol: CSD LAC Volume - Demand	5.763	0.672	0.680	



<b>Medium Term Financial Plan</b>	<b>2025/26 Approved Budget £million</b>	<b>2026/27 Estimate £million</b>	<b>2027/28 Estimate £million</b>	<b>2028/29 Estimate (LGR) £million</b>
Pressures approved via protocol: CSD LAC Volume - Savings	(1.907)	(0.630)		
Reprofile of Public Health Investment	0.459	(0.586)		
Home to School Transport - grant rolled into RSG 2025/26		0.992		
<b>Communities, Environment &amp; Transport</b>				
Waste Housing Growth	0.307	0.189	0.419	0.405
Waste PFI Additional Income	1.450	(0.100)	0.800	
Pressures approved via protocol in previous years	0.100	(0.505)		
Pressures approved via protocol 2024/25	0.345	1.250		
<b>Business Services</b>				
Pressures approved via protocol 2024/25	0.779	(0.064)		
Pressures pending approval 26/27: CoPilot & other AI applications		tbc	tbc	tbc
<b>Governance Services</b>				
Pressures approved via protocol	0.148			
Elections		0.409		
<b>Savings</b>				
Savings 2024/25	(2.685)			
Savings 2025/26-2027/28 - approved Feb 2025	(13.505)	(3.279)	(1.219)	
<b>NET SERVICE EXPENDITURE</b>	<b>548.095</b>	<b>622.145</b>	<b>653.653</b>	<b>701.832</b>
Corporate Expenditure		42.969	41.817	49.889
Treasury Management	14.780	2.068	2.068	
General Contingency	5.650	0.726	0.361	0.540
Contingency for Potential Pay Award, Recruitment and Retention	12.353	(5.143)	5.605	5.745
Inflation Risk Provision	6.242	0.048	0.024	0.023
Pensions	4.874			
Apprenticeship Levy	0.600			
Movement in Reserves	(1.107)	1.107		
Levies & Grants	1.021	0.042	0.014	0.014
Transfer PH savings grant to CHB	(1.444)			
<b>TOTAL CORPORATE EXPENDITURE</b>	<b>42.969</b>	<b>41.817</b>	<b>49.889</b>	<b>56.211</b>
<b>TOTAL PLANNED EXPENDITURE</b>	<b>591.064</b>	<b>663.962</b>	<b>703.542</b>	<b>758.043</b>
<b>CUMULATIVE DEFICIT/(SURPLUS)</b>	<b>11.449</b>	<b>55.844</b>	<b>65.653</b>	<b>88.312</b>
<b>ANNUAL DEFICIT/(SURPLUS)</b>	<b>(2.895)</b>	<b>44.395</b>	<b>9.809</b>	<b>22.659</b>
One-off use of Financial Management Reserve	14.344			
One-off use of Waste Reserve	(9.449)	9.449		
One-off use of Insurance Reserve	(2.000)	2.000		
<b>ANNUAL DEFICIT/(SURPLUS) AFTER USE OF RESERVES</b>	<b>0.000</b>	<b>55.844</b>	<b>9.809</b>	<b>22.659</b>

# East Sussex County Council

## A Financial Resilience Review

### August 2025

A Report by:

The Chartered Institute of Public Finance and Accountancy

**CIPFA, the Chartered Institute of Public Finance and Accountancy**, is the professional body for people in public finance. CIPFA shows the way in public finance globally, standing up for sound public financial management and good governance around the world as the leading commentator on managing and accounting for public money.

Further information about CIPFA can be obtained at [www.cipfa.org](http://www.cipfa.org)

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# 1 Executive Summary

## 1.1 Summary of Findings, Issues, Evidence and Analysis

This review assesses whether East Sussex County Council (the council) has appropriate arrangements in place for financial management and governance. It also considers the actions being taken to address the significant financial challenges it faces. This review provides assurance on the financial position and governance arrangements of and to deliver a balanced budget and a sustainable financial position.

### *A challenging position*

The council has delivered over £140m of savings since 2010, demonstrating sustained financial discipline and the willingness to take some tough and politically unattractive decisions. However, the council is now falling below its 'Core Offer' and with a projected deficit of £36m in 2026/27 and £54.6m in 2027/28 which risk exhaustion of the remaining unallocated reserves.

This has meant the council is lean and has low costs services and functions. However, the continued use of reserves and challenges in delivering savings to meet increasing budget deficits mean the council has to give urgent consideration to the action it needs to take and give serious consideration to applying for Exceptional Financial Support.

### *Inherent demographic and infrastructure challenges*

East Sussex has inherent demographic and infrastructure challenges. 26% of its population is aged over 65 compared to the national average of 17% and in the over 85 cohort the council has highest number as a percentage of the population when compared to other authorities. This is accompanied by high levels of mental health need, benefit dependency and multi-morbidity. Relatively poor infrastructure and links to London coupled with over 75% of the landscape designated as a protected cause workforce and growth challenges, with the lack of large employers and subsequent business rate growth.

### *Sound and established financial management arrangements and understanding*

Its Reconciling Policy, Performance and Resources (RPPR) framework for decision making is embedded and well understood, while vacancy and purchase order panels provide further discipline. Internal Audit has determined "Substantial Assurance," through its Internal Audit opinion and there is an experienced and established leadership team who are respected by both Members and Officers. Member maturity and constructive officer–member engagement are clear strengths, with evidence of regular and informed consideration of key financial issues.

Financial management arrangements remain prudent. The targeted capital programme focuses on core priorities such as schools and infrastructure. The council has maintained very low levels of external borrowing since 2016, supported by a conservative approach to investment and a clear Minimum Revenue Provision (MRP) policy to provide for future financing. This demonstrates a culture of prudent treasury management that has reduced risk exposure in recent years.

### *Structural funding and demand challenges*

Despite this, the council faces significant structural funding challenges, particularly within demand-led services including Adults, Children's, Home to School Transport (HTST), and High Needs block. Market volatility in placement costs remains a material financial risk, with

potential £1m+ swings in individual cases. The Dedicated Schools Grant (DSG) High Needs deficit presents a serious medium-term threat to the General Fund if the statutory override is removed in 2027/28, while overall reserves are projected to fall by 42% by March 2026 with further significant in year overspends likely. The current forecast also indicates a renewed need for external borrowing by 2025.

#### *Capacity and data constraints*

Capacity and data constraints add to these risks. In Children's Services, fragmented systems and reliance on spreadsheets limit predictive modelling and strategic planning. Investment in data and analytics, supported by structured tools such as the CIPFA Data Management Model, would improve forecasting, integration, and governance. While data quality itself is not weak, it is not always being used to its full potential. Piloting improvements in Children's Services would provide the clearest and most significant benefit.

Workforce capacity is a further challenge. Recruitment and retention pressures persist across finance, property, and IT, with below-market pay reducing competitiveness. The council also relies on shared procurement arrangements through Orbis, where there are ongoing concerns around value for money and contract management capability. Looking ahead, Local Government Reorganisation (LGR) in Surrey may affect the resilience of these shared services, underlining the need for a review of the arrangements.

#### *Opportunities to strengthen*

There are opportunities to strengthen resilience in some areas. Better use of data, analytics and technology would support evidence-based decision making. The council has looked at ways to address workforce challenges including internships and more trainee programmes but recognises more can be done. Stronger partnership working with the NHS, through joint commissioning and cost-sharing with districts, boroughs and West Sussex, also offers further potential to manage demand and financial pressures.

#### *Member focus*

Members are experienced and supportive and bring learning back to the council, many through their peer roles. It might be appropriate to consider a re- focussing on members scrutiny responsibilities to ensure the council gets real value through the process could further enhance the robustness of challenge, particularly ahead of any future LGR.

#### *A solid platform but critical decisions to make*

Overall, the council benefits from strong governance, respected financial leadership, and prudent treasury management. These provide a solid platform to address the significant financial risks. However, the scale of structural underfunding in demand-led services, coupled with declining reserves, rising placement costs, and future borrowing needs, places the council under mounting pressure. There are also operational risks in delivering new core systems such as Oracle Payroll and HR where benefits realisation will require close monitoring.

To maintain sustainability, East Sussex will need to maintain its focus on the tough decisions and consider the need for EFS as part of its budget development for 2026/27. This includes early preparation for different scenarios, assessing partnerships with a focus on cost share and priorities and strengthening procurement and workforce capacity. Ultimately, this may require further consideration of what a minimum future operating model could look like.

## 1.2 Key Recommendations/Improvement Plan

This table provides the improvement plan and roadmap that we recommend the council follows with priority actions indicated and the recommended timeline included with the recommendations. There are some observations that haven't been stated as recommendations as action is already being taken or there is an awareness of the issue raised

Recommendation
1. The council should continue its discussions on the potential need for EFS given the reintroduction of external borrowing from 2025 and continued service pressures.
2. The council needs to look at what further early action it can take on savings to reduce reliance on reserves.
3. The council should continually re-assess its risk appetite and triggers for decision making on divestment, business cases and further savings plans.
4. The council should maintain its focus on the minimum operating model and potentially reassess its core offer to set out sustainable service levels within available resources.
5. The council should strengthen its data and analytics capability in Children's Services, moving away from fragmented systems and spreadsheets towards integrated forecasting tools.
6. The council should consider applying the CIPFA Data Management Model to assess data governance, quality and accessibility in Children's Services.
7. The council should reaffirm the focus of members through scrutiny to ensure appropriate challenge of and support for key financial and service decisions.
8. The council should address procurement and contract management capacity through the review of the Orbis arrangements, ensuring value for money and stronger in-house oversight over service contracts.
9. The council should increase its focus on workforce recruitment and retention exploring market supplements or targeted career pathways to address competitiveness.
10. The council should develop a refreshed partnership position with the NHS, districts and borough councils to reflect the significant challenge it is facing and the consideration of EFS.

## 2 Introduction

### 1.3 The Requirement

East Sussex County Council (the council) commissioned CIPFA to undertake an external assurance review of its financial resilience, management arrangements, and service pressures. The review aligns with the work undertaken by CIPFA for the Ministry for Housing, Communities and Local Government (MHCLG) when assessing the need for Exceptional Financial Support (EFS).

The council is navigating significant challenges, particularly:

- A projected budget gap of £36m by 2026/27, including planned expenditure growth from £536.99m in 2024/25 to £579.62m in 2025/26.
- Sharp depletion of reserves, forecast to fall from £119m (Mar-24) to £69m (Mar-26) a 42% reduction in two years.
- Structural cost pressures in Adult and Children's Social Care, Home to School Transport (HTST), and High Needs Dedicated Schools Grant (DSG),
- A prudent but tightening treasury position, with new borrowing expected to resume from late 2025.
- Workforce pressures, including recruitment/retention challenges, pay competitiveness, and succession risks at senior leadership level.

The council has embedded governance and control frameworks and is widely regarded as well-led. However, sustained demand pressures, financial volatility, and reducing reserves raise immediate and medium-term financial sustainability concerns.

The review focused on four key areas:

- Financial Management and Sustainability
- Capital Programme and Companies
- Commercial Investments, Assets, and Debt
- Governance

### 1.4 Methodology

In our approach, we were mindful of the context set out above and our work comprised the following elements:

#### *Desktop analysis*

The council provided appropriate background. We reviewed the material and made supplementary document requests to the council. The team has analysed key documents together with other records that have been shared by the council as being relevant for the review. We also examined relevant comparator material. We would like to record our thanks to officers for their ready compliance with our request for reports and data.

#### *Specialised inputs*

Some comparative data analyses were conducted on issues such as revenue spend, and indebtedness these are based on analysis undertaken by CIPFA using published data such as the RA and RO forms. Service performance data has been extracted from a wider range of sources including: inspection reports and the council's own surveys of residents and staff.

#### *Interviews*



The bulk of the fieldwork comprised of interviews. These provided the invaluable 'triangulation' of our analysis. Council officers, members, auditors, and other experts were invited to give views and respond to queries provoked by documentary evidence. Council officers at senior and junior levels, members, auditors, and other experts were invited to give views and respond to queries provoked by documentary evidence. We would like to thank everyone involved for their courtesy and constructiveness.

#### *Report drafting, feedback and fact-checking*

The above inputs were then analysed and subjected to our professional and expert judgement. The result is this report.

This report was fact checked as far as possible and is based on the fieldwork completed within the time frame for the review from June through to August 2025. It is not a comprehensive audit of the council's finances or its governance arrangements. Consequently, the conclusions do not constitute an opinion on the status of the council's financial accounts. Our review of the council's Minimum Revenue Provision (MRP) considers the reasonableness of the council's MRP policy and does not constitute an audit of the full application of the policy.

CIPFA's review team consisted of an experienced finance consultant and support from other consultants with relevant backgrounds in Social Care and Children's Services as appropriate.

CIPFA would like to take this opportunity to thank the council for being so amenable and open to meeting with the review team and for the considerable effort that has been expended in collating and sharing key documents with CIPFA. We also thank everyone involved for the openness, tact, and honesty in what is a sensitive issue for the council.

#### *Report Structure*

The key findings and analysis, together with supporting evidence, are set out under each of the review areas requested (as detailed in the commission). Risks and recommendations are detailed under each of the review areas.

## 2 Areas Reviewed

### 2.1 Review Area 1: FINANCIAL MANAGEMENT / SUSTAINABILITY

***An assessment of the council's financial management and management of risk to reach a view on the council's overall financial resilience and sustainability.***

***An assessment of steps the council is undertaking to ensure the council remains within its spending envelope, including deliverability and appropriateness of current savings / transformation plans***

***The council's financial management and governance as well as compliance with Local Government accounting codes and international finance reporting standards***

#### *Key findings and analysis*

*With a projected deficit of £45m for 2025/26 highlighted in the council's budget report, the challenge in securing financial resilience and sustainability should not be underestimated.*

*The council should model the implications of its latest savings forecasts in determining its need for Exceptional Financial Support (EFS). It is modelling risks, has established planning frameworks and is developing plans. It has focussed financial governance arrangements and invites challenge and support. The council has established and well understood financial management and reporting arrangements but professional resources are stretched.*

*There are no significant concerns expressed by the auditors in respect of compliance with local government accounting codes and international financial reporting standards and the auditors issued an unqualified audit opinion for 2023/24. The council has published its draft financial statements for 2024/25.*

#### ***The scale of the financial challenge is serious but understood and clearly reported***

The council's budget report published in February 2025 forecast a projected deficit of £45.3m in 2025/26 with a planned draw on reserves of £15m. This is considered later in the report. Addressing this gap with a sustainable set of deliverable savings alone is a real challenge. The S151 Officers Section 25 Statement, which forms part of the 2025/26 Budget setting report, states:

*Whilst it is welcome to note the government's commitment to a fair funding review, business rates reform and multiyear settlements from 2026/27, unless the Council receives a significant and permanent increase in funding, the deficit, which is currently projected to be £37.4m in 2026/27 will continue to prove difficult to mitigate locally, and require an approach to the Ministry for Housing Communities and Local Government (MHCLG) for Exceptional Financial Support.*

The quarter 1 budget monitoring report for 2025/26 shows a further deteriorating position with an overspend of £25.8m against the original 2025/26 budget, despite an expectation that £13.2m of the £14.2m savings will be delivered. Almost all of the further overspend relates to Children's and Adults Social Care. These in year deficits are not currently factored into the Medium Term Financial Strategy (MTFS) forecasts and will need to be met from

ever decreasing reserves in the short term. Future borrowing needs are also a key consideration.

Reports are comprehensive and Members appreciated the support they receive from Officers both formally and informally through decision making and briefings including: whole council forums, monthly meetings with group leaders and finance leads and regular briefing papers. Members meet with the S151 Officer on a regular basis to build understanding and also discuss alternative budget planning. They felt they could ask the pertinent questions and get appropriate feedback responses. There was an awareness of the underlying drivers behind the financial challenges, for example, demand and requirements governing home to school transport and demographical profiles in East Sussex creating pressures on Adult Social Care. The Finance Portfolio Lead was fully aware of the risks and responsibilities.

Savings targets are set and delivery is reviewed by Corporate Management Team and then approved through Cabinet and Full Council. The council has identified a set of priority areas to address in line with other councils who are experiencing significant financial challenges.

### ***Unsustainable use of reserves to balance the budget***

The council has been using its reserves to manage its financial position in the short term. The council regularly reviews its reserves in line with the CIPFA Financial Management Code guidance and has historically mainly used reserves to address specific priorities and schemes. The use of reserves should only be used for a limited time to manage the financial position and as part of a wider plan to deliver a sustainable balanced financial position. The CIPFA Financial Management code makes the point that reserves should be used to mitigate the impact of financial shocks and to manage implementation of sustainable change savings. They should not be used to plug recurring deficits.

The council is currently drawing down reserves to balance in-year pressures. Reserves are forecast to fall from £119m in March 2024 to £69m by March 2026 — a 42% reduction in just two years. Whilst this is necessary in the short-term, it is not sustainable.

Scenario modelling reinforces this point: even with 100% delivery of planned savings and no increased demand, all reserves (including earmarked reserves) would be exhausted by 2027/28 as annual deficits rise to £56m. With lower savings delivery (75% or 50%), reserves fall below minimum levels earlier and the council becomes financially unsustainable earlier in 2027/28. It is clear that the council cannot continue to rely on reserves when setting its budget for 2026/27 as many of these reserves are earmarked. Accelerating savings plans will be extremely difficult given the savings the council has already made and capacity challenges and lead times associated with most savings proposals.

The latest published reserves position from the 2024/25 year-end report is shown below in Table 1. It shows the council plans to continue to use its reserves to balance its budget despite limited uncommitted reserves (strategic reserves) to cover any under delivery against planned savings or deal with any unexpected shocks. Later benchmarking shows that the council continues to have lower than average levels of reserves as a proportion of net revenue expenditure when compared with its CIPFA nearest neighbours..

**Table 1: 2024/25 published reserves position**

<b>Reserves Balances</b>	<b>1 Apr 2025 £m</b>	<b>Estimated 1 Apr 2026 £m</b>	<b>Estimated 1 Apr 2029 £m</b>
<b>Earmarked Reserves:</b>			
<b>Held on behalf of others or statutorily ringfenced</b>	<b>25.5</b>	<b>22.5</b>	<b>21.4</b>
<b>Named Service Reserves</b>			
Waste Reserve	19.8	14.7	7.4
Capital Programme Reserve	9.1	5.2	0.0
Insurance Reserve	7.7	5.7	5.5
Local Government Reorganisation Reserve	0.0	4.2	0.0
<b>Subtotal named service reserves</b>	<b>36.6</b>	<b>29.8</b>	<b>12.9</b>
<b>Strategic Reserves</b>			
Priority Outcomes and Transformation	5.2	4.6	2.0
Financial Management	11.3	4.6	2.5
<b>Subtotal strategic reserves</b>	<b>16.5</b>	<b>9.1</b>	<b>4.5</b>
<b>Total Earmarked Reserves</b>	<b>78.6</b>	<b>61.5</b>	<b>38.8</b>
<b>General Fund Balance</b>	<b>10.0</b>	<b>10.0</b>	<b>10.0</b>
<b>TOTAL RESERVES</b>	<b>88.6</b>	<b>71.5</b>	<b>48.8</b>

### ***Challenges in the Medium Term Financial Plan (MTFP)***

Based on current planned levels of savings, the council is vulnerable to shocks and demand pressures. There are particular challenges highlighted in the later years of the MTFP. This is shown in Table 2 below. The council is, however, in a more favourable position than most when it comes to its Dedicated Schools Grant (DSG) position which currently shows a cumulative surplus of £2.8m if the statutory override was to end.

**Table 2: Medium Term Financial Plan 2026/27 to 2028/29**

<b>Medium Term Financial Plan</b>	<b>2026/27 £m</b>	<b>2027/28 £m</b>	<b>2028/29* £m</b>
<b>Annual Budget Deficit / (Surplus)</b>	<b>25.089</b>	<b>18.084</b>	<b>16.175</b>
Carry Forward of 2025/26 Deficit	11.449	-	-
<b>Annual Budget Deficit / (Surplus) after Carry Forward</b>	<b>36.538</b>	<b>18.084</b>	<b>16.175</b>
<b>Total Budget Deficit / (Surplus)</b>	<b>36.538</b>	<b>54.622</b>	<b>70.797</b>

\*Notional due to LGR

If the council reaches the point where it needed to apply for EFS or serve a S114 notice, it would have to be confident that all options to address the short term MTFS position had been explored. The council is aware of this and CIPFA are supporting them.

It is important that the council plans a course of action to deliver sufficient ongoing proposals and consider all options to balance the budget including EFS.

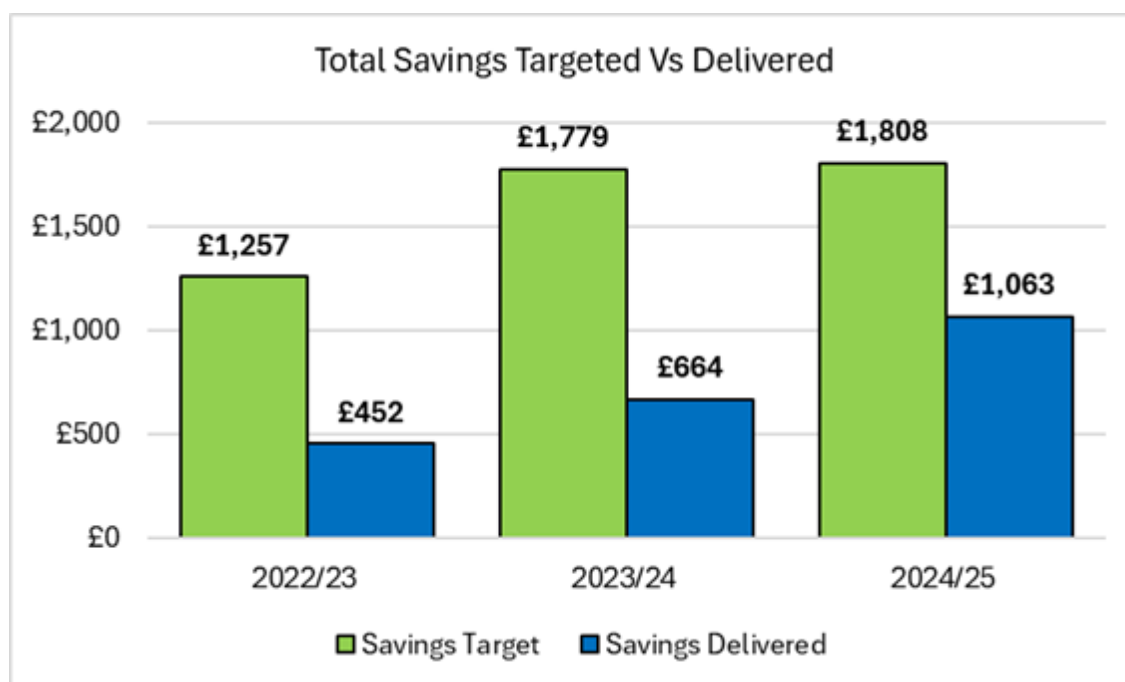
### **Significant delivery of savings but challenges in meeting previous savings targets**

Looking across the past three years, the council has struggled to fully deliver its planned savings, with the highest level of underperformance in Communities, Economy and Transport (CET) when looking to deliver increased income from parking charges.

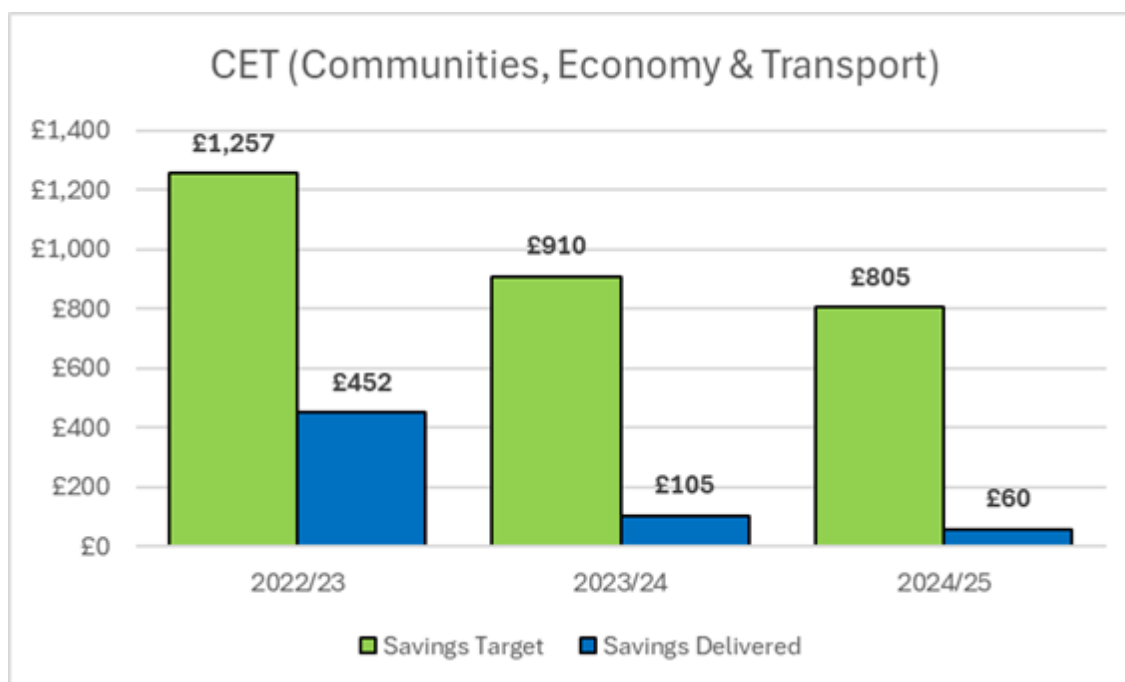
In 2022/23, £1.257m of savings were targeted but only £0.452m was achieved, leaving £805k undelivered and carried forward, all within Communities, Economy & Transport (CET). CET's long term contracts do limit some opportunity and flexibility in savings delivery although the pattern repeated in 2023/24, where just 37% of the £1.779m target was delivered, again with the majority of the gap again sitting in CET. Business Services (Orbis) delivered part of its requirement, but still fell short. By 2024/25 there was a noticeable improvement, with £1.063m delivered against a £1.808m target (59%). This was driven by BSD/Orbis meeting its savings in full, but CET continued to slip £0.745m into future years. The consistent picture is that CET's undelivered savings continue to roll forward, creating pressure on the wider programme, while other areas have either had no savings requirement or have performed strongly when targets were set. This is shown in Figure 1 below and the accompanying charts (Figures 2 and 3).

<b>Figure 1: Past savings projections and performance (£m)</b>			
	2022/23	2023/24	2024/25
Actual	£452	£664	£1,063
Plan	£1,257	£1,779	£1,808
Shortfall	(£805)	(£1115)	(£745)
% Achieved	35%	37%	59%
Source: End of year Council Monitoring Report			

**Figure 2:**



**Figure 3:**



The council is currently reviewing its savings proposals against CIPFA's savings database and is identifying where it has either taken action or is considering action in the areas. The council should also consider what a minimum operating model could look like as part of this work, building on the previous good work on determining the 'core offer' in the context of achieving an immediate and medium term balanced budget position. This is challenging and might involve increasingly difficult policy decisions, but also realistic assessments of the capacity and capabilities needed and available to ensure a resilient council. The understanding of the current RPPR framework should provide the council with a good base to consider this.

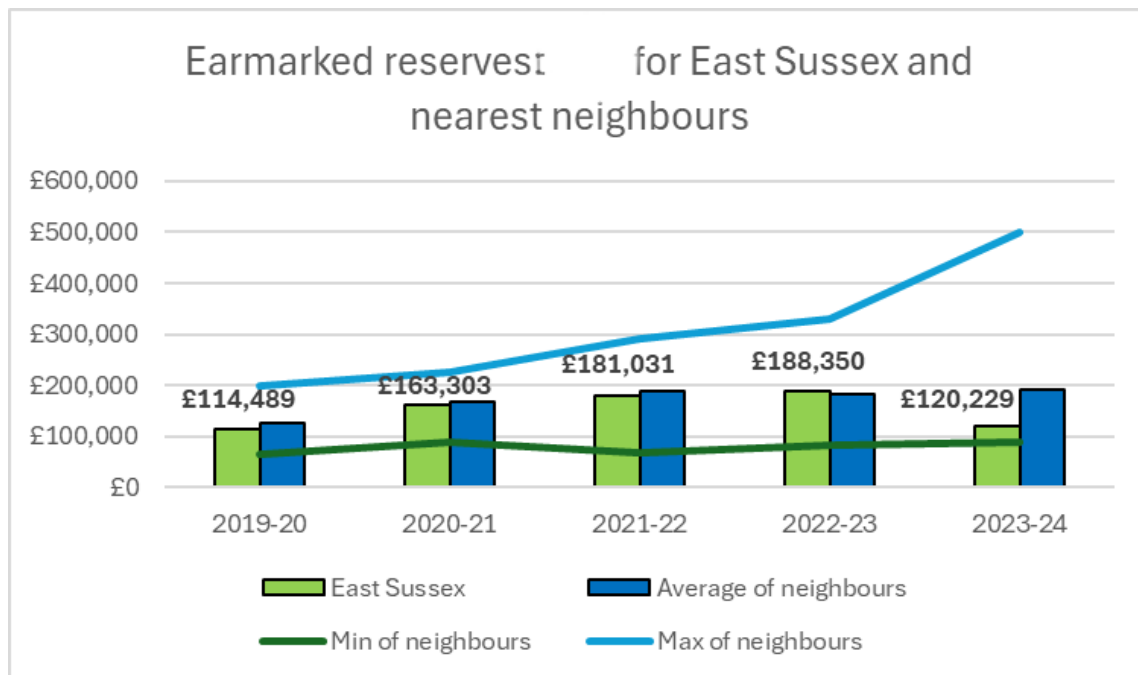
***East Sussex's relative financial position is challenging and the use of reserves higher than its nearest neighbours***

A comparison of the council against its nearest neighbours using the financial resilience index and CIPFA statistics is considered below:

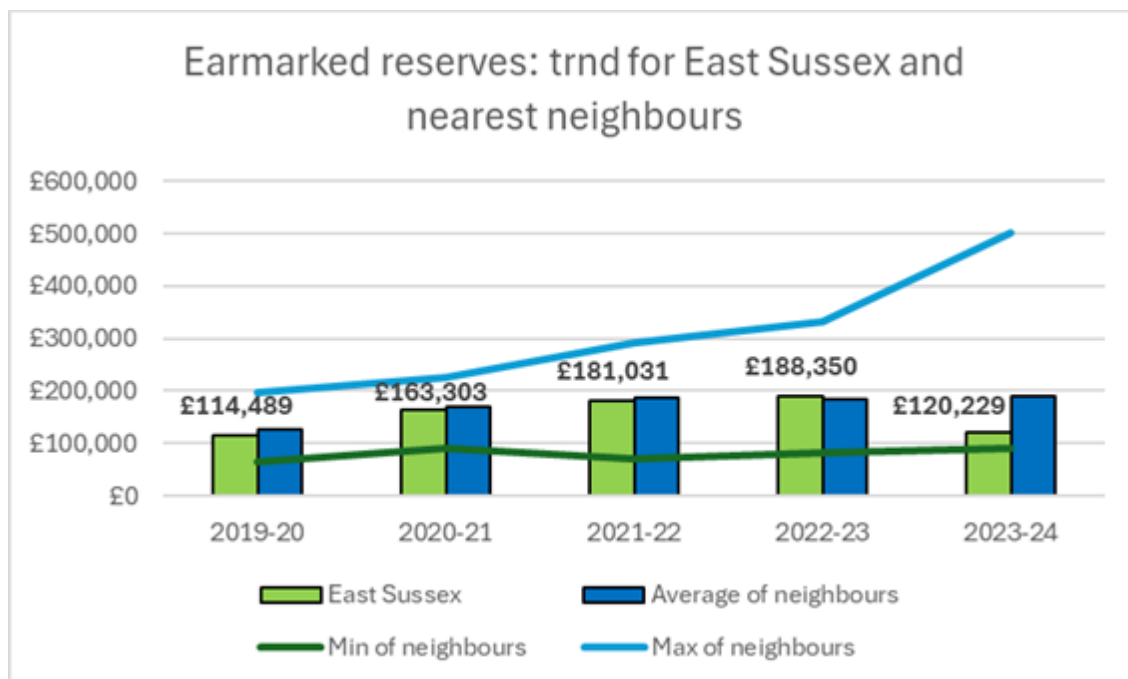
CIPFA's Financial Resilience Index for 2023/24 is a comparative analytical tool intended for use by Chief Financial Officers to support good financial management. The index shows a council's position on a range of measures associated with financial risk highlighting where additional scrutiny may be required.

Change in reserves reflecting the use of reserves to support the budget shows it compares unfavourably to its nearest neighbours which means it is using more of its reserves. This is a concern. The graphs for general and earmarked reserves are shown in Figures 4 and 5 below:

**Figure 4:**



**Figure 5**



East Sussex holds one of the lowest levels of unallocated financial reserves across its comparator group. It has maintained £10m for its General Fund balances for the past five years. The average for its statistical neighbours has ranged between £27m and £33m during the same period. Even in 2023–24, when some neighbours saw reductions in their reserves, East Sussex remained well below both the average (£31m) and the lowest point of several individual comparators (£16m). This suggests that the council has limited flexibility in responding to unexpected pressures compared with others in its group.



The picture looks different when turning to earmarked reserves. East Sussex has consistently held levels broadly in line with the average of its comparators, and in some years slightly above. In 2020–21, for example, it carried £163m against an average of £169m, and in 2021–22 £181m against £188m. This points to a potentially more prudent approach to setting aside resources for specific pressures and future risks. However, the latest figures for 2023–24 show a marked shift: East Sussex reported £120m compared with a neighbour average of £191m, and substantially lower than the maximum of £501m within the group. This reduction suggests either significant planned drawdown or a reclassification of reserves.

Taken together, East Sussex appears to be operating with a very narrow level of unallocated reserves flexibility, relying more heavily on earmarked reserves to manage risk. However, the recent decline in earmarked balances highlights a potential vulnerability, especially at a time when many comparators have maintained or increased their positions. A fuller breakdown of reserves has been provided as part of our data pack, which should assist in understanding the underlying drivers.

Other benchmarking insights show the following:

- **Reserves position:** East Sussex has significantly lower reserves than its peers, with unallocated reserves at only 1.89% compared to the group average of 6.94%, and total reserves at 24.60% versus the average of 45.76%, indicating a limited financial safety net.
- **Service spending profile:** Compared with neighbours, East Sussex devotes a **higher share of expenditure to Adults' and Children's Social Care**, reflecting demographic pressures and demand. This highlights a lack of flexibility in the base budget, with resources already concentrated on statutory services.
- **Income generation:** Sales, fees and charges per capita are below the average of comparator authorities, suggesting opportunities to explore additional charging or cost recovery measures.
- **Social Care ratio:** The data pack shows East Sussex's ratio of social care spend to total service budget is among the highest in its comparator group. This reinforces the challenges in managing demand and the potential transformation or difficult decisions needed in these service areas if financial sustainability is to be achieved.

### ***The need to maximise income and funding***

Benchmarking from 2023/24 suggests that per person East Sussex has lower Sales, Fees and charges compared to its nearest neighbour comparators. Fees and charges were increased above CPI last year and the responsibility is delegated to the Director of Finance for all increases at CPI or below. Changes to fees and charges are also considered quarterly through the council's corporate summary reports. There may, however, be merit in a more fundamental review of fees and charges through benchmarking with nearest neighbours. Such benchmarking might warrant consideration as part of future budget setting reports.

Evidence suggests that maximising the use of ring fenced funding and any historic unspent funds has been considered as part of the council's savings plans. However, this should be kept under continual review to ensure it is carefully prioritised and any further opportunities to redirect or repurpose funds are properly considered. Whilst this is unlikely to be significant in the context of the scale of savings required, it will further enhance the importance of cross functional and indeed cross partnership thinking required in the areas of regulatory, public health services and care healthcare placements.



### ***Established financial management arrangements***

From our meetings we have encountered officers and members who are committed to the council success and ensuring the council is on a sustainable financial footing, Analysis of key documents shows detailed and comprehensive reporting and analysis of the financial position. The council undertakes an annual assessment of its position against the CIPFA Financial Management Code which shows a high level of compliance which is supported by our review findings. The RPPR framework is a longstanding, well understood approach that brings finance, policy and performance together which reinforces the interdependencies and trade-offs that need to be considered. These meetings are weekly with the Director of Finance and all Heads of Finance and consider budget setting, in year monitoring and year end processes. There is also regular engagement with Directors of Adults and Children's Services to discuss recovery plans, demand management and overspending in high risk areas.

Feedback on the finance business partner support from Directorates is generally positive but there is an awareness that more work needs to be done to address the gap in the areas between finance and service departments in some areas and align finance officers to the departments they support, ensuring a pro-active and embedded approach. This is considered later under the assessment of capacity and capability.

There is clear messaging on the importance of spend being controlled responsibly and income being maximised with an annual review of income and charging as part of the RPPR process. The introduction of the Purchase Order Panel has instilled further discipline and influenced behavioural changes in spending. This was accepted and understood across the council and is considered alongside a weekly Corporate Management Team review of vacancies. This has encouraged consideration of alternative staffing models and Purchasing Card monitoring is in place through Directors.

The Annual Governance Statement and the risk register set out the financial challenges and action being taken to address them.

### ***Compliance with the CIPFA Accounting Codes and Standards***

As mentioned earlier, the council assesses themselves against the financial management code. The accounting policies applied by the council in preparing and presenting its financial statements confirm that the authority complies with the Accounting Code and relevant statutory reporting requirements.

There have been no significant issues raised by the external auditors in previous years audit reports. At the time of our work, we were not aware of any significant issues with regard to the ongoing audit.

### **Recommendations**

1. The council should continue its discussions on the potential need for EFS given the reintroduction of external borrowing from 2025 and continued service pressures.
2. The council needs to look at what further early and decisive action it can take on savings to reduce reliance on reserves.

3. The council should determine its risk appetite and triggers for decision making on divestment, business cases and further savings plans.
4. The council should develop a clear minimum operating model to set out sustainable service levels within available resources.

***The capacity and capability of the council to deliver an effective finance function to the council commensurate with the complexity of its particular circumstances***

*Key findings and analysis*

***An experienced team but continuing difficulties in recruiting and retaining staff***

The Finance team is relatively stable and experienced with particular strength through the current S151 Officer who has significant corporate knowledge, understanding and respect across the council. The council has, however, recognised the poor value for money provided through agency staff and the challenges of high turnover and recruitment difficulties, particularly in more senior finance roles.

The council is actively recruiting CIPFA trainees to look to develop its own staff given these challenges. There is a focus on internal development given lack of a formal training budget and lunch and learn sessions and a broad area of focus framework is in place to cascade learning.

Day to day relationships with service departments appear strong and a confidence was expressed in the finance team's ability to model, analyse and support services and undertake scenario modelling, although there are weaknesses in Childrens Services which require spreadsheet analysis due to system limitations in the current Liquid logic system. The team has been bolstered in some areas with a focus on Looked After Children in through a new Finance Manager. Despite this, there are risks with significant knowledge held by key individuals

The market remains challenging for recruiting and retaining finance and other specialist professionals. There are difficulties providing the capacity to support all activities across the council but feedback on the level of support members and directorates receive was positive. There was regular access both informally and formally to financial management advice and briefings.

***Ensuring the benefits are realised from the implementation of Oracle***

The phasing out of SAP and the introduction of Oracle is being managed in phases with the final phase implementation in 2027. The implementation of Oracle has been led by Finance with support from a dedicated specialist developer and finance super users trained to lead on Oracle 'guided learning' and development. Business partners provide support to Oracle developers.

The first finance, procurement and recruitment modules went live in April 2025 and there is currently work ongoing to overlay the reporting module, EPM. Payroll, which is considered to be one of the most complex modules and is expected to go live in 2026. The risks are being managed and the challenges of implementation acknowledged. The system is functioning and refinement is continuing. It appears staff have adapted to the changes and the team are making iterative improvements. Discussions are taking place with West Sussex on opportunities to collaborate on the use of and training on the system.

***The council's approach to financial risk management including identification, management and treatment of risk.***

*Key findings and analysis*

***Regular and comprehensive risk reporting is in place including specific reporting on financial risks and their likely impact.***

The council has a comprehensive and structured approach to risk management, embedded across its governance and operational frameworks. The Council uses a formal Risk Management Framework that outlines its policy and strategy for identifying, assessing, and managing risks. The framework supports the Council's four priority outcomes:

- Driving sustainable economic growth
- Keeping vulnerable people safe
- Helping people help themselves
- Making best use of resources

The Council maintains a Strategic Risk Register, which is reviewed quarterly. Key risks include: Uncertainty in future funding, Inflation and cost-of-living impacts, Demand pressures in adult and children's social care and Capital programme delivery risks.

Risk management is integrated into the Council's Annual Governance Statement, which aligns with the CIPFA/SOLACE framework for good governance. The Local Code of Corporate Governance ensures that risk management is part of decision-making, resource allocation, and performance monitoring and the RPPR process ensures strategic alignment of risk with planning and budgeting. Audit and Scrutiny Committees monitor risk registers and internal controls. The strategies to manage risk include the use of reserves to act as a buffer for financial shocks, a focus on commissioning and partnerships working to manage demands and share risk. The Capital Strategic Asset Board is used to oversee capital investment risk and scenario planning and forecasting to anticipate future pressures. There is no formal risk appetite statement but the process is understood and embedded. However, there is an earlier recommendation on this in the report.

***The underlying drivers of any financial fragility and risk and the council's ability to successfully manage those drivers so that issues do not materialise. This should include an assessment of the council's approach to managing increased demand in adult social care and children's services.***

***Key findings and analysis***

***Drivers of financial fragility are understood and monitored but continue to grow, particularly in Adults and Children's Social Care***

The drivers of financial fragility in the council relate primarily to adults and children's services and whilst not untypical of other county councils, are more acute and accelerating. 75% of the council's budget is spent on supporting social care and provision covers around 10% of the population which creates a real strain on other services. This is felt in the public focus on highways which has significantly lower overall spending. The two biggest areas of financial pressures are considered below:

***Adult Social Care (ASC)***

There are real pressures in ASC provision which are reflected in the significant overspends in recent budget and monitoring reports. However, the council has a good understanding of these and strong data capabilities which allows it to easily analyse caseload and client costs.

The overspend for Adult Social Care was £10.0m at the end of 2024/25 which largely related to the Independent Sector, where the overspend is £12.4m. This is due to a combination of

factors, primarily being increasing complexity of need and pressures arising from demand and demographic growth returning to pre-pandemic levels. There is an underspend in Directly Provided Services of £2.4m due to staffing vacancies which reflects the impact of savings consultations and underlying difficulties in recruitment.

### *Context and Local Pressures*

The council faces a number of key challenges affecting the resilience of the ASC system:

- A high number of support requests from older adults compared to statistical and geographical neighbours.
- Persistent and growing cost pressures associated with supporting complex needs, provider market demands and discharge pathways.
- A requirement to sustain or improve outcomes while keeping costs and unit prices low.
- Significant levels of unpaid care and rising complexity in care needs.
- Transformation and reform demands in the context of constrained capital and workforce resources.

Despite proactive management and interventions, rising demand, inflationary care costs, and increased acuity of need continue to place unsustainable pressure on revenue budgets. The council has been forced to make difficult prioritisation decisions and is actively seeking savings options to deliver medium-term financial stability.

In response to these pressures, CIPFA undertook a structured review of innovation and demand management within adult social care. This involved assessing the council's activity against a matrix of nationally recognised best practice across seven innovation areas:

1. Prevention & Early Intervention
2. Asset-Based Community Development
3. Digital Transformation
4. Alternative Housing Models
5. Strengthening Front-Door Triage
6. Commissioning Reform
7. System-Wide Integration

Each area reflects methods or service changes that can contribute to improved outcomes and financial sustainability through early intervention, better targeting, and more efficient use of resources.

#### *1. Prevention & Early Intervention*

Prevention and early intervention reduce long-term care costs by delaying or avoiding escalation of need, reducing hospital admissions, and empowering people to maintain independence for longer. The council has a mature and embedded approach to early intervention. The Joint Community Rehabilitation Service forms the basis of a reablement-first offer. Social prescribing is fully integrated through VCSE partners and wellbeing coaches. The council supports around 70,000 unpaid carers and has developed a nationally notable transitions app. Financial inclusion work, through the Money Guiders programme, has secured over £1m of additional income for residents and relieved over £2.7m in debt annually.

#### *2. Asset-Based Community Development*

Asset-based approaches use community strengths to prevent dependency on formal services, improve wellbeing, and reduce demand through informal support and local resilience. Through the "Making It Happen" programme and the Community and VCSE

Development Programme, the council has embedded asset-based working at neighbourhood level. Though not a pure Local Area Coordination model, the approach supports community leadership, peer networks and co-designed delivery. Community governance is maturing through the Integrated Community Team (ICT) strategy.

### *3. Digital Transformation*

Digital tools and assistive technology enable self-management, automate low-risk tasks, and support earlier interventions—cutting back-office costs and managing rising demand more efficiently. The council has digitised its telecare offer and now supports over 8,000 users with digital solutions. Assistive technology is being enhanced through machine learning pilots, and the council is developing business cases in collaboration with major tech providers. The adult social care portals now include self-assessment tools, financial eligibility checkers, and safeguarding referrals. Predictive analytics is still emerging but the council has commenced scoping work, including the development of an Appearance of Need Tool.

### *4. Alternative Housing Models*

Housing models like Extra Care and Shared Lives offer cost-effective alternatives to residential care and can delay or replace the need for intensive services, supporting independence and community living. The council commissions six extra care housing schemes, providing 285 flats in total, and is undertaking a strategic review to meet future demand. Shared Lives is a registered service in East Sussex and is set to expand further through a pan-Sussex initiative funded by the Accelerating Reform Fund.

### *5. Strengthening Front-Door Triage*

Effective triage at the point of first contact ensures appropriate, proportionate responses and reduces unnecessary assessments, packages, and crisis admissions. The council has dedicated Hospital Discharge Teams co-located in all acute hospital sites and works across care, housing and NHS teams. Discharge to Assess (D2A) pathways are fully embedded, with block-commissioned beds and a reduction in average length of stay from 60 to 31 days. The ICT model further supports joined-up triage and early intervention.

### *6. Commissioning Reform*

Commissioning models focused on outcomes, flexibility, and personalisation support better value for money, reduce duplication, and ensure resources align to people's actual goals and needs. Homecare commissioning has shifted towards strength-based support planning, outcome-based reviews, and an approved list of providers. The council is piloting Individual Service Funds (ISFs), with Independent Lives acting as the strategic partner. The council also supports the development of micro-providers and personal assistants through extensive guidance, training, accreditation, and promotional resources.

### *7. System-Wide Integration*

System integration enables more coordinated responses, faster discharge, shared planning, and fewer duplications across NHS and social care—unlocking capacity and reducing avoidable costs. The council participates in the East Sussex Discharge Executive Improvement Group and has established Integrated Community Team Management & Planning Groups. These structures support shared planning, escalation resolution, and local joint commissioning. The council makes good use of JSNA footprints, benchmarking, and performance dashboards to inform decisions.

### *Summary*

The council demonstrates an unusually wide and deep commitment to innovation in adult social care. It has moved from exploration to implementation in many areas and has embedded best practice models in ways that suit its local demography, geography and pressures. While some areas like predictive analytics are still in development, the system is building resilience through proactive leadership, VCSE partnerships, technology, and prevention-based commissioning.

### *Acknowledged Challenges and Areas for Development*

In addition to the areas of progress, the Director also acknowledged specific weaknesses and risks that continue to affect the long-term sustainability of adult social care in East Sussex:

- The county has been forced to reduce some preventative services, despite their known long-term value, in order to meet statutory Care Act duties. This creates a potential cycle of increased downstream demand.
- Budget constraints have led to cuts in housing-related support, which may drive future increases in mental health and respiratory conditions due to housing insecurity.
- There is growing concern over the impact of NHS funding reductions and cost shunting, with reduced investment in health services contributing directly to rising demand for social care.
- The local care market faces sustainability risks, with fee uplifts constrained to around 4% while actual cost pressures are significantly higher, creating tension with providers.
- Questions remain over the long-term sustainability of current funding models, particularly in the context of East Sussex's ageing population and growing complexity of need.

### *Children's Services*

Complex high cost placements, some over a £1m annually, and crisis driven entries into care with increasing Special Educational Needs (SEN) pressures and diagnosis with associated increased SEN Transport costs characterise the problems facing the council. Although these are not untypical, they are particularly acute in East Sussex.

Children's Services had an overspend of £13.6m at the end of 2024/25. A UASC grant funding error meant a larger overspend but this has been corrected and £1.3m received from the Home Office in 2025/26. The main areas of overspend were Early Help and Social Care and Home to School Transport. The Early Help and Social Care overspend of £12.4m was due in the main to staffing costs within Localities, pressures around agency placements and Children's Homes within Looked After Children, although there was a reduction in net costs at Lansdowne Secure Unit due to increased income from recharging other local authorities for placements.

Home to School Transport had an overspend of £3.8m due to growth in numbers of pupils and unit costs for transport that are significantly higher than estimated during the budget setting process. The final overspend has improved since quarter 3 due to legal advice confirming the possibility of charging personal transport budgets for children with Education and Health Care Plans to the High Needs Block of the Dedicated Schools Grant. This meant that £0.6m of transport expenditure could be recharged.

Fragmented systems and availability of data presents challenges in fully understanding the patterns and demands facing Children's Services. The use of work arounds and spreadsheet data alongside inconsistent versions of Liquid logic mean there are difficulties on consolidating child level costings across teams which is key when considering the number of high costs cases that the council is dealing with. This impacts on the confidence



in decision making and also business cases that are presented to the leadership team. Work is underway to improve systems integration and create a centralised approach to collecting and interpreting data but until this information is available and confidence grows in what is being presented, it will be difficult to plan and respond effectively to the continued pressures and overspends.

East Sussex's initiatives—such as integrated Family and Youth Hubs, kinship care promotion, and early help transformation—are well-aligned with the Children's Social Care National Framework. This framework emphasises:

- Multi-agency collaboration.
- Early intervention and family support.
- Stable, loving homes for children in care.
- Embedding the voices of children and families in service design.

East Sussex's governance structures and transformation board reflect best practice in implementing these principles. The council is benchmarking against other councils with a recent visit to Essex who have similar challenges with demography and coastal deprivation and rates of Looked After Children. Approaches are aimed at keeping children with families through intensive support programmes, but caseloads remain high. However, staff training is considered to be strong with a relatively stable and high number of senior social workers.

There has been a positive approach from the voluntary sector to the approaches the council is taking. An additional Director role has been created to provide capacity in Health and Social Care commissioning and there is a regional focus on fostering and placements budgets. High cost cases are often appearing from hospital discharge and adoption breakdown and 7 children are currently costing the council over £8m. The service has been successful in removing any reliance on agency staff and has delivered savings through restructures. The relationship with finance and finances understanding of the situation, in particular the focus and support from the S151 Officer is notable. Members are also considered supportive with some long standing members with a good understanding of the issues. However, risks were identified where members can interpret information and learning from other councils which may not be helpful in East Sussex's context.

The council also use in-house foster care and secure homes to reduce external placement costs and maintains strong early help services and investing in preventative mental health and parenting support where it can. However, like other councils, it is looking at further cuts in preventative services to meet statutory duties and there are growing challenges in fostering recruitment with a view that the southeast fostering hub is not ambitious enough in tackling the issue. Joint working is in place with East Sussex District Councils including Eastbourne, Hastings and Lewes.

## **Recommendations**

5. The council should strengthen its data and analytics capability in Children's Services, moving away from fragmented systems and spreadsheets towards integrated forecasting tools.

6. The council should consider applying the CIPFA Data Management Model to assess data governance, quality and accessibility in Children's Services.

***An overall view on the ability of the council to manage identified budget pressures through its own resources.***

*Key findings and analysis*

Members have demonstrated a strong understanding of the position the council is in and have shown a willingness to make some difficult decisions despite minority leadership. The council is currently managing the identified budget pressures through its own resources, but it is highly unlikely that will be enough if it is to maintain a minimum level of reserves. The council has reviewed the mitigations available and has engaged the Executive early, including members, in discussions on the importance of delivering savings and policies that need to be reviewed. This has extended to the S151 Officer clearly articulating through his Section 25 Statement as part of the budget report of the potential risk of a S114 notice due to pressure on reserves and the need to engage with MHCLG on the potential to seek EFS.

The inherent low business rates base, high demand on social care faced by the council creates a significant challenge which is in sharp focus with all those we met.

The existing position appears manageable for 2024-25 but this assumes the savings decisions are supported and delivered on time as currently anticipated. However, unless there are significant reductions in key service demand areas, higher business rate growth or increased funding, the position is very fragile for 2025/26.



## Review Area 2: CAPITAL PROGRAMME / DEBT / INVESTMENTS / ASSETS

**An assessment of the council's capital programme / overall debt position including short and long term borrowing, and approach to investment / asset management to reach a view on the suitability, VfM and risk exposure of the council in this space, and how this may impact on the overall financial resilience / sustainability of the council.**

***The council's management / governance of its capital programme, major projects (whether delivered in house or via companies) and investments including the adequacy of internal processes, scrutiny of investment decisions, use of external expertise where required, risk management and capacity and capability to deliver. This should include an assessment of the council's exposure to refinancing and any other risks identified because of its chosen borrowing strategy.***

### *Key findings and analysis*

*The council continually challenges its capital programme given the financial pressures but there is a legacy impact of underinvestment, particularly in Highways. Its PPRR framework helps to guide decision making along with its Capital Board and Asset Management Plan, business plans and an experienced but lean property team.*

*Its overall current debt and treasury management position is being managed and reported in line with the Prudential Code requirements with recent low levels of borrowing but there is now a need to borrow to address critical investment. This needs careful management to ensure it is sustainable given the potential challenges in realising savings targets and limited available capital receipts. Maximising the use of existing limited assets remains a priority.*

***The Capital Programme is constrained by available funding but does require further borrowing to fund priority schemes***

The most acute issue facing the council is the ability to meet the highways maintenance backlog given the limited capital funding available with funding only currently available through the Highways Grant. It is estimated that £300m is required to bring the road network up to standard with the current spend at around £21m a year. Previous capital planning included needs-based projects which have had to be revisited.

The revised capital programme is after a capital programme risk review and totals of £713.9m over 10 years, aligned to the 20 year strategy. The three year funded programme is aligned to the medium term financial plan. This is shown in Table 3 below:

**Table 3:**

Table 1 - Capital Programme Gross Expenditure Updates	Ref:	Current Year 2024/25 £m	MTFP Period			2028/29 to 2034/35 £m	Total £m
			2025/26 £m	2026/27 £m	2027/28 £m		
<b>Approved Capital Programme (State of the County 2024)</b>		<b>108.305</b>	<b>116.650</b>	<b>67.960</b>	<b>72.251</b>	<b>431.879</b>	<b>797.045</b>
Approved Variations	A	7.234	19.682	1.998	1.958	13.293	<b>44.165</b>
Capital Programme Reprofiles	B	(12.717)	11.578	(0.038)	0.000	0.000	<b>(1.177)</b>
Schools Basic Need / SEND	C	0.000	0.500	0.500	(4.981)	8.981	<b>5.000</b>
IT&D Programme	D	1.829	(1.467)	(1.827)	(6.433)	7.469	<b>(0.429)</b>
Capital Programme Extension	E	0.000	0.000	0.000	1.150	35.185	<b>36.335</b>
Capital Programme Risk Review	F	0.000	(16.185)	(14.547)	(19.418)	(116.871)	<b>(167.021)</b>
<b>Total Updates</b>		<b>(3.654)</b>	<b>14.108</b>	<b>(13.914)</b>	<b>(27.724)</b>	<b>(51.943)</b>	<b>(83.127)</b>
<b>Revised Capital Programme</b>		<b>104.651</b>	<b>130.758</b>	<b>54.046</b>	<b>44.527</b>	<b>379.936</b>	<b>713.918</b>
Capital Slippage Risk Factor	G	(20.068)	(18.278)	(7.337)	(3.924)	49.607	0.000
<b>Approved Capital Programme (after Capital Slippage Risk Factor)</b>		<b>84.583</b>	<b>112.480</b>	<b>46.709</b>	<b>40.603</b>	<b>429.543</b>	<b>713.918</b>

There are a number of high profile schemes in the pipeline with £87m earmarked for Communities, Economy and Transport (CET) in 2025/26 and £38m for Education, Youth and schools programmes amongst other IT and capital schemes. Previous reviews of borrowing have meant that areas such as Highways can now only be funded through grant. The council is looking at how it funds large projects collaboratively including with central government and bus companies.

Table 4 below shows the associated revised funding with a significant new borrowing requirement for 2025/26 but a reduced the level of borrowing to £34.4m up to 2027/28, producing a revenue budget saving of £4.2m compared to the original programme. Every £10m of borrowing costs the council approximately £0.75m over the full life of the asset (assuming a 30 year life).

**Table 4**

Table 4 – Capital Programme Funding Update	Ref:	Current Year 2024/25 £m	MTFP Period			2028/29 to 2034/35 £m	Total £m
			2025/26 £m	2026/27 £m	2027/28 £m		
<b>Gross Expenditure</b>		<b>84.583</b>	<b>112.480</b>	<b>46.709</b>	<b>40.603</b>	<b>429.543</b>	<b>713.918</b>
Specific Funding	H	(29.230)	(48.400)	(3.817)	(1.209)	0.000	(82.656)
Specific Developer Contributions	I	(4.621)	(2.646)	(1.998)	(1.674)	(1.002)	(11.941)
<b>Net Expenditure</b>		<b>50.732</b>	<b>61.434</b>	<b>40.894</b>	<b>37.720</b>	<b>428.541</b>	<b>619.321</b>
Formula Grants	J	(25.772)	(29.530)	(29.330)	(30.919)	(208.370)	(323.921)
Capital Receipts	K	(4.802)	(3.950)	(2.248)	(2.198)	(4.424)	(17.622)
Reserves and Revenue Set Aside	L	(11.213)	(9.536)	(0.385)	(0.452)	(6.383)	(27.969)
Capital Reserve	M	(3.458)	(2.605)	0.000	0.000	(7.804)	(13.867)
Developer Contribution Target	I	0.000	0.000	0.000	0.000	(17.601)	(17.601)
<b>Capital Programme Borrowing</b>	<b>N</b>	<b>5.487</b>	<b>15.813</b>	<b>8.931</b>	<b>4.151</b>	<b>183.959</b>	<b>218.341</b>

### ***Monitoring of the Capital Programme has improved***

The Capital Programme receives full council approval as part of the annual budget report. This is based on the 'State of the County' report in line with the financial regulations. All schemes are formally approved into the capital programme and strategic projects require a business case. The State of the County report guides the prioritisation of schemes with exceptions reported to Cabinet;

The Council's Capital Strategic Asset Board (CSAB) consists of each service department, finance, property and procurement and oversees the development and delivery of the Council's capital programme. Working Groups also report into the Board. In year, the Capital Programme is monitored and reported to the Corporate Management Team and then to Cabinet and Full Council, on a quarterly basis, as part of the Council's RPPR monitoring process. The CET and BSD directorates manage significant capital spend.

Re-profiling of the capital programme occurs twice a year and CET has its own capital sub-board; Strategic Capital Board includes all relevant directorates. There are, however, forecasting challenges with programme slippage caused by external influences including national highways and scope creep and some room for improvement in individual project management. Reprofiling does enable realignment of borrowing and funding impacts and this should be undertaken as necessary.

The Council's current Capital Strategy runs from 2024/25 to 2044/45 and was approved as part of RPPR 2023/24. It reflects emerging risks, principles and corporate priorities, and is informed by decisions made as part of the RPPR process. It also links to the Asset Management Plan and other key corporate documents including the Environmental and Climate Action Plans and the Treasury Management Strategy.

### **The debt position is manageable and is continually reviewed but further borrowing is required and further focus on debt recovery is needed in some areas**

The council's debt position compared to income and reserves is healthy when compared to other CIPFA peer authorities. The council's total debt of £200m is held as long term loans in PWLB which limits refinancing risks. The position is reported routinely to members as part of regular treasury management reports but given the risks associated with further borrowing, it may be appropriate to consider the frequency of reporting, linked to more regular revisions to the capital programme.

A review of outstanding debt also forms part of regular reporting to members and this has identified further action needs to be taken through a new project board to address growing Adult Social Care debt which is increasing compared to the previous financial year.

***The council's commercial investment portfolio (property, bonds etc.) and forward strategy, including dependence on commercial income, exposure to debt costs and whether, in CIPFA's view, it is prudent to reduce the council's exposure and over what timeframe.***

### **The council has a limited commercial investment portfolio with very limited income or debt exposure**

The Strategic Asset Plan (2020–2025) outlines the Council's approach to managing its property portfolio effectively, efficiently, and sustainably. A key objective is to maximise financial returns and commercial opportunities through the rationalisation and disposal of land and buildings. In line with this strategy, the Council aims to deliver value for residents and businesses while managing associated risks in a balanced and proportionate way.

As of **31 March 2023**, the Council's commercial property portfolio was valued at **£12.1 million**, generating an annual net income of **£0.3 million** in **2022/23**, which helps support council services.

Additionally, the Council may offer loans and financial guarantees to third parties to support external projects that align with its strategic priorities. Under the **Local Authorities (Capital Finance and Accounting) (England) Regulations 2003**, any loan to an external organisation that would qualify as capital expenditure if incurred by the Council must be treated as such. Therefore, all external loans are subject to the same governance and oversight as other capital expenditures under this Strategy.

The Council does not borrow funds for projects where the primary objective is commercial gain.

***The council has established Treasury Management arrangements but reducing cash balances***

The council has a comprehensive Treasury Management Strategy which is consistent with CIPFA's Code of Practice. This also requires the responsible officer (s151 officer) to ensure that all members tasked with treasury management responsibilities, including scrutiny of the treasury management function, receive appropriate training relevant to their needs and understand fully their roles and responsibilities.

The council achieved a reasonable return on its investments in 2024/25 with an average rate of 4.96% at the end of quarter 4 but cash balances are diminishing as significantly as the council uses its reserves to cover continuing budget deficits.

The council's external treasury management advisors, MUFG are responsible for supporting the council in its treasury management activities. Internal and external training is offered to members and this was confirmed through our meetings. There were also regular briefings from officers to members that cover the council's investment and borrowing activity.

There may be opportunities, however, to further develop members' understanding and involvement in Treasury Management to ensure there is the right level of oversight from members and newer members might benefit from further training in some areas. This may be pertinent given the current need for further borrowing to fund the capital programme.

***The council's approach to asset management and valuation, the appropriateness of its asset portfolio, and a view on a proposed asset disposal plan set against broader Value for Money considerations.***

***Key findings and analysis***

Significant asset rationalisation has already been achieved with a 40% reduction in the corporate estate footprint. Savings of £1m have been made from estate changes.

The ability to generate significant capital receipts, however, is limited due to the lack of surplus assets. Smaller asset disposals are delegated to the Chief Operating Officer under delegated authority from lead member. The major asset is County Hall which is significant but carries relatively little value and opportunity. County Hall now has two wings that are still empty although this is reduced from 5 empty wings. Decisions on the best use of County Hall have been protracted and have required significant engagement due to complex stakeholder involvement including residents and the national park. Existing planned disposals are factored into the programme but are in the low millions. In the absence of

significant disposal opportunities, it is even more important that the council focuses on potential underutilised land and assets. Members are appropriately engaged through briefings and working groups.

***Whether and to what extent the council is complying with statutory guidance / following best practice with regards its capital programme, wholly / part-owned companies and investments including but not limited to investment guidance, minimum revenue provision guidance and accounting codes.***

#### *Key findings and analysis*

The council is compliant with the CIPFA prudential code in terms of the reporting requirements and prudential indicators including liability benchmarking and borrowing limits and boundaries. The council is also compliant with the CIPFA treasury management code. The MRP Policy for 2024/25 was approved by the council in February 2025.

The council has no plans to make financial investments other than short term cash investments which are invested in line with the requirement of the CIPFA treasury management code.

The council is aware of the changes to the MRP legislation and the implications for any lending to third parties. MRP is charged on an annuity basis which was reflected as a change in this financial year. In applying this policy, the council undertakes an assessment of ability to repay and recognises any adverse charges through a provision to cover any future financial losses. The council is advised to continually monitor any changes to guidance to ensure it is compliant. Advice is received from MUFG as the council's treasury management advisors.

## 2.2 Review Area 3: GOVERNANCE

**An assessment of the council's approach to overall governance / management processes, leadership, operational culture, capacity and capability to reach a view on whether the council is operating in line with the Nolan Principles and in a way to secure continuous improvement.**

### *Key findings and analysis*

*The council is strategic and has established governance arrangements with a clear focus and understanding at leadership level. Decision making processes are understood. Capacity and capability remain an inherent issue and this is more acute than some councils, but it is balanced by continuity and corporate memory. This does, however, bring associated risks with reliance in key longstanding member of staff.*

*The Authority needs to remain focussed on making the necessary tough decisions and it will be important that officers and members maintain their strong relationships, understanding and confidence to support effective decision making as they have to balance ambition and risk with financial sustainability.*

### ***The council thinks strategically and challenges its core role***

There is a view from some that the council has a conservative approach to addressing the challenges it faces and could be more transformational in its thinking but this can be countered to some extent by a realism and sustainable approach to change which instils confidence, a values led focus and discipline. The council assessed its role and key services and developed a 'core offer' framework. This has been articulated further into what residents can reasonably expect from a council with budget constraints. Some key decisions were taken including a review of Libraries which led to closures and then community led provision going forward. Prevention work is constrained including in libraries, education and public health but services are well regarded and hold up well to external inspections and scrutiny.

East Sussex has established and embedded governance arrangements with a clear culture of financial discipline and risk awareness. The RPPR (Reconciling Policy, Performance and Resources) framework is strongly embedded across the council and provides a recognised mechanism for linking decision-making, policy and resources.

Capacity and capability challenges exist, particularly in corporate services such as Finance, Property and IT, where recruitment and retention pressures are compounded by pay differentials with neighbouring and London authorities. Despite this, governance processes are considered to be mature, with members and officers working closely together and demonstrating strong commitment to maintaining financial control increasingly difficult circumstances.

***The adequacy of the council's decision-making processes including presence / absence of clear schemes of delegation, audit and scrutiny arrangements, quality of council papers and whether there is a clear understanding of governance arrangements across all levels of the council.***

### *Established and appropriate governance arrangements are in place*

Decision-making is supported by established constitutional arrangements, with effective use of officer/member forums and regular briefings. There are regular meetings of the statutory officers, the 'golden triangle' (the Chief Executive, S151 Officer and the Monitoring



Officer). Member engagement is described as high quality, with intensive one-to-one and group sessions ensuring councillors are well-informed. There was a view that pre decision consensus what not always maintained when it came to full council decisions and this could affect the ability to deliver the full benefits of a proposed decision and create unintended or unforeseen consequences for the council. The recent decision in respect of closing Adult Day centres was one example that was cited. There was also a view that whilst members were prepared to consider significant changes or reductions in service delivery to meet the financial challenges, some lower value savings options might not be supported but may be equally important to deliver. This should be kept under review.

There were some questions about the independence of scrutiny (noting it is chaired by the administration) and the degree of access to underlying analysis. Others report scrutiny as thorough and independent. These differences reflect a wider tension between the strength of officer-led controls and the desire of some members for deeper political debate and earlier involvement in shaping proposals. This also extended to a potential lack of clarity on the process of public consultation and member duties in considering consultation and its role in decisions. These challenges are not unusual but may warrant consideration or clarification on the scope and expectations of scrutiny.

## **Recommendations**

7. The council should reaffirm the focus of members through scrutiny to ensure appropriate challenge of and support to key financial and service decisions.

## ***Established Audit Committee arrangements***

The Audit Committee regularly review the Council's exposure to strategic risks along with a focus on internal systems and processes. The Chair of the Audit Committee believes it has improved over time and the committee influences and reviews the annual Internal Audit programme. No weaknesses have been reported over the last two years in the Annual internal Audit Opinion and the service provided by Orbis is compliant with the Public Sector Internal Audit Standards. The Chair is also a member of the Scrutiny Committee which ensure an awareness of the scope of each committee's activity and there is an annual report on the activity of the Internal Audit Committee. Planned developments include the appointment of two independent members which may provide an opportunity to consider the committees role and scope further, potentially in the areas of external partnerships and treasury management given the increasing importance and pressures in these areas.

Committee members receive some training but uptake is limited due to availability and competing responsibilities. The Chair has not received any formal training for the Audit Chair role and it may be worth considering some further training and support.

***The presence / absence of a clear, outcome orientated, measurable and performance driven strategic direction for the council and whether this is clearly set out through alignment of the key strategy documents (Corporate / Strategic Plan, Annual Governance Statement and Medium Term Financial Plan). This should include an assessment of the extent to which the strategic direction of the council is present throughout operational implementation***

## ***Key findings and analysis***

The RPPR framework ensures that financial planning and policy priorities are aligned through the Medium Term Financial Plan. The approach is outcome-focused, linking available resources to service priorities in a transparent way. This provides members with clarity on the trade-offs required in a constrained financial environment.

The authority's current outlook stresses the need to balance service delivery with structural financial pressures, with reserves forecast to reduce materially by 2026. This has sharpened the focus on prioritisation and risk management.

***A view on the effectiveness of council leadership including their ability to work effectively together, set and communicate a clear vision and set of priorities for the local area, as well as their ability to lead the delivery of those priorities (as set out in key strategy documents) through the fostering of a cohesive organisation built on cooperation, trust and respect.***

*Key findings and analysis*

Council leadership is widely viewed as effective, with strong officer-member relationships that are mature and constructive. Members are considered to have a good grasp of the financial and service pressures, and there is evidence of mutual respect between officers and members in decision-making.

Leadership has fostered a culture of discipline and control, with vacancy panels and purchase order controls seen as embedding financial grip. At the same time, the leadership acknowledges the need to maintain member engagement and support in the context of challenging service decisions and potential Local Government Reorganisation.

***A view on the working culture and working relationships across all levels of the council including between political and officer leadership, and senior officers and junior staff.***

*Key findings and analysis*

Interviews highlight a culture of openness and respect in interactions between officers and members. Staff are aware of the major challenges and engaged in the RPPR process. The culture is described as disciplined, with recognition of the council's limits in terms of capacity and financial headroom.

***The council's capacity and capability to improve and transform at an operational level (i.e. sufficient expertise, staff etc.) and at a cultural level (i.e. acknowledgement of problems, openness to constructive criticism and change, delivery with local partners, and collaboration with sector support).***

*Key findings and analysis*

***Problems are acknowledged and understood but restricted capacity and pay challenges remain***

Benchmarking shows pay and reward challenges in key roles including Chief Officers and Heads of Service. There is some shared leadership in some service areas with other authorities which increases resilience, but the inherent risks remain. Despite this, retention remains high due to a commitment to the council and the area which was demonstrated through our interactions with the council staff. HR initiatives to attract interns, work with the universities and a strong values based culture. Capacity is a particular challenge in specialist corporate areas such as Finance, Property, Digital/IT and audit. The earlier comments on the maturity of data and systems management in some areas could hinder the councils capability to change service delivery.

The council's finance culture is well-established, stable, and operationally sound, but there is a risk that opportunities for rapid innovation or digital adoption aren't developing with sufficient speed to drive savings and improvements in ways of working and practices.



The council is understandably cautious when it comes to financial risks and business cases are essential for approving any new developments. There are limited plans for other technical investment beyond the Oracle implementation and many developments are driven by services. This may be understandable given the limited reserves and restrictions on funding to support new investments, but it may be appropriate as savings opportunities become more challenging to reassess the risk appetite of the council, as recommended earlier.

Aspirations remain around improved data accessibility and transparency and stronger use of assumptions in forecasting and scenario modelling. This would provide better real-time insight for service leads, but resource and some cultural barriers provide constraints.

A workforce planning toolkit recently launched to help managers assess succession, retirements, and future resourcing and a risk register is in place, reviewed quarterly through DMT and CMT, to inform decisions on vacancies and structures. Compassionate redundancy and workforce reductions have been guided by well-established policies and dashboard reporting on key workforce stats and corporate health indicators are in place. These indicate some signs of stress which might warrant further review, but the governance structures are in place to consider this further.

### ***Close working with partners but there is strain in the system***

The council has a strategic commissioning approach that evaluates outcomes and considers sustainability over a 3 to 4 year horizon. There is some tension between current budget decisions and future unitary ambitions, but the priority is, understandably, deliverability against budget. Partnership working is generally sound, with good operational relationships with NHS and district council although financial contributions from health partners remain limited. Shared services, (Finance, Procurement, Human Resources, Internal Audit, Insurance and IT) provided through Orbis has delivered mixed results.

Historic savings have been delivered which have been important in helping to sustain services but with pending local government reorganisation and divergence in ICT strategies including finance systems, the council is increasingly looking to collaborate with West Sussex and Brighton. Whilst Internal Audit and Insurance provision is seen as positive due to their small, but specialist teams, finance and IT are not considered to be delivering due to the specific organisational needs of the respective councils. The extent of value for money through procurement has also been questioned.

### ***An openness to challenge and engagement***

The council demonstrates an openness to challenge and external engagement, including internal audit assurance and peer review processes, and shows a strong commitment to maintaining financial grip while recognising areas where further insight and capacity need to be developed.

### **Recommendations**

8. The council should address procurement and contract management capacity through a review of the Orbis arrangements, ensuring value for money and stronger in-house oversight.

9. The council should increase its focus on workforce recruitment and retention in key support functions (finance, IT, property), exploring market supplements or targeted career pathways to address competitiveness.

10. The council should develop a refreshed partnership position with the NHS, districts and borough councils to focus on cost-sharing and joint commissioning.



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CIPFA Resilience Review – Response and Action Plan			
CIPFA Recommendation		CMT Response	Timescale
1	The Council should continue its discussions on the potential need for Exceptional Financial Support (EFS) given the reintroduction of external borrowing from 2025 and continued service pressures.	The need for EFS is under constant review through Reconciling Policy, Performance and Resources (RPPR). ESCC will be writing to the Ministry of Housing, Communities and Local Government to request to open formal discussions on an application for EFS.	Nov 2025 – Feb 2026
2	The Council needs to look at what further early action it can take on savings to reduce reliance on reserves.	Further savings proposals and opportunities to bring forward existing savings are being considered as part of the Council's RPPR process.	Nov 2025 – Feb 2026
3	The Council should continually re-assess its risk appetite and triggers for decision making on divestment, business cases and further savings plans.	The Council's approach to risk appetite is set out in the Risk Management Framework and is considered and applied at a level appropriate to the outcome of the service area. Department Management Teams and Corporate Management Team (CMT) will be reviewing the narrative in the Council's departmental and strategic risk registers during 2025/26 to ensure that reference to risk appetite is included. CMT will carefully consider the risk and implications of decisions on partners, client groups, reputation etc. and ensure this is included in business cases and plans.	Ongoing
4	The Council should maintain its focus on the minimum operating model and potentially reassess its core offer to set out sustainable service levels within available resources.	The Council has been clear that recent savings have taken us below the previously defined core offer and consideration will be given to reviewing its offer in light of the ongoing financial challenge.	Summer 2026
5	The Council should strengthen its data and analytics capability in Children's Services, moving away from fragmented systems and spreadsheets towards integrated forecasting tools.	The Council is currently investing in the Children's Services Essential Development Programme - a 4-year IT systems development programme from 2024 - 2028. The programme was designed to tackle the biggest risks in core systems, to help the Council safely respond to rising and more complex demand.	April 2024 to March 2028

6	The Council should consider applying the CIPFA Data Management Model to assess data governance, quality and accessibility in Children's Services.	CMT will consider the benefits of applying this model.	
7	The Council should reaffirm the focus of Members through scrutiny to ensure appropriate challenge of and support for key financial and service decisions.	Place and People Scrutiny Committee Members have been supported to review their work programme priorities, training needs and approach to utilising pre-meetings to develop questioning strategy at awaydays in September and October 2025. Further training and resources will be arranged by support officers in response to Members' identified needs and to share and adopt scrutiny best practice. Officers will continue to articulate the importance and focus of scrutiny's role in the RPPR process in reports to each committee meeting and to the annual RPPR Boards.	Ongoing
8	The Council should address procurement and contract management capacity through the review of the Orbis arrangements, ensuring value for money and stronger in-house oversight over service contracts.	The Orbis Joint Management Board is currently undertaking a review of Orbis shared services, including Procurement, IT&D (Information Technology & Digital) and Internal Audit. These services will each be subject to a detailed review of value for money, accountability and deliverability of outcomes to each partner. Recommendations will be made for the operating model of each service and completed in time for planned local government reorganisation.	March 2026
9	The Council should increase its focus on workforce recruitment and retention exploring market supplements or targeted career pathways to address competitiveness.	The corporate Recruitment and Retention group, established in 2024 with cross-departmental representation, meets regularly to address workforce planning. Departments also maintain local groups for tailored workforce strategies. We actively invest in staff development, having paid the Apprenticeship Levy (~£1m annually since 2017). Our strategy maximises levy use for new apprenticeships and staff training. In April 2025, the Levy transitioned to the Growth and Skills Levy, allowing broader use for shorter courses and upskilling, expected to boost retention.	Ongoing

		<p>We continue to build our employer brand, 'We Choose East Sussex', positioning the Council as an employer of choice. This includes refreshed recruitment materials, career pathways, and supportive workforce policies such as financial wellbeing, occupational health, and absence management services.</p> <p>The Workforce Planning Toolkit launched this year has received positive feedback from managers. We also maintain clear policies on market supplements and recruitment incentives ('golden hellos'), balancing competitiveness with affordability and fairness across pay structures. Regular market assessments ensure we remain competitive, particularly against neighbouring authorities.</p>	
10	<p>The Council should develop a refreshed partnership position with the NHS, district and borough councils to reflect the significant challenge it is facing and the consideration of EFS.</p>	<p>The Council is committed to ongoing engagement with NHS partners, including through the reforms to Integrated Care Boards, and with district and borough councils as we prepare for local government reorganisation. The conversations continue to focus on timely sharing of data and effective use of joint resources such as the Better Care Fund and developer contributions, across the East Sussex footprint.</p>	Ongoing

## 1 Background

- 1.1 Through the Reconciling Policy Performance and Resources (RPPR) process the Capital Strategy and programme are reviewed annually to ensure that they support the Council's responsibilities and departmental service strategies. To manage investment to a sustainable level, the Capital Strategy focuses on the delivery of targeted basic need for the council to continue to deliver services as efficiently as possible, rather than rationing through prioritisation. Basic need for the purpose of strategic capital planning is provided below:
- Place: ensuring we can deliver services by planning for future need.
  - Asset Condition: maintaining our assets to an agreed level.
  - ICT Strategy: ensure that our ICT is fit for purpose for delivering modern council services in a digital era and protecting data.
  - Climate Change: supporting the Council's aim of reaching carbon neutrality from our activities as soon as possible and in any event by 2050 within the grants and programme budgets in an appropriate and cost-efficient way.
- 1.2 At Full Council in February 2025 the target led basic need capital strategy of 20 years, supported by a 10-year planned capital programme was approved. The approved programme was further updated at State of the County in July 2025 to reflect the 2024/25 outturn, project and programme reprofiles and approved variations, revising the gross programme to £724.1m to 2034/35. For planning purposes, the first 3 years of the programme are considered approved, whilst the remaining years are indicative to represent the longer-term planning for capital investment.
- 1.3 The capital programme is funded from a number of sources and can be split into the elements that are funded from identified specific sources (such as grants, developer contributions and earmarked specific reserves), and elements considered to be Core Council Funded. Core Council Funded relates to those projects funded from council resources that ultimately increases the Council's need to borrow.
- 1.4 The financial outlook for local authorities is increasingly challenging, with uncertain funding allocations, inflationary pressure on contracts and wages, increasing service demands and the impact of national reforms leaving much uncertainty about the Council's future financial position, with a large financial deficit being forecast as part of the RPPR planning process. Capital investment decisions have a direct impact on the council's revenue budget, particularly relating to borrowing costs, and are therefore to be considered in the context of their impact on the MTFP.

## 2 Capital Programme Update

- 2.1 Table 1 below summarises the gross movements to the approved capital programme since State of the County in July 2025. The updates provide a revised capital programme of £672.5m, of which £288.7m is planned for delivery in the period to 2028/29. The first three years of the programme over the MTFP period to 2028/29 are to be presented for approval, whilst the remaining years to 2035/36 are indicative to represent the longer-term planning for capital investment. A detailed capital programme that reflects all the proposals outlined in this update is provided at **Annex A**.

Table 1 - Capital Programme Gross Expenditure Updates	Ref:	Current Year 2025/26 £'000	MTFP Period			2029/30 to 2035/36 £'000	Total £'000
			2026/27 £'000	2027/28 £'000	2028/29 £'000		
<b>Approved Capital Programme (State of the County 2025)</b>		<b>102.981</b>	<b>91.542</b>	<b>57.291</b>	<b>48.854</b>	<b>336.354</b>	<b>637.022</b>
Approved Variations	A	4.299	(0.112)	-	-	1.305	<b>5.492</b>
Capital Programme Extension	B	-	-	-	-	29.953	<b>29.953</b>
<b>Total Updates</b>		<b>4.299</b>	<b>(0.112)</b>	<b>-</b>	<b>-</b>	<b>31.258</b>	<b>35.445</b>
<b>Revised Capital Programme</b>		<b>107.280</b>	<b>91.430</b>	<b>57.291</b>	<b>48.854</b>	<b>367.612</b>	<b>672.467</b>
Capital Slippage Risk Factor	C	(18.890)	-	-	2.699	16.191	<b>0.000</b>
<b>Approved Capital Programme (after Capital Slippage Risk Factor)</b>		<b>88.390</b>	<b>91.430</b>	<b>57.291</b>	<b>51.553</b>	<b>383.803</b>	<b>672.467</b>

## Normal Capital Strategy Updates

### A Approved Variations

There is a gross increase to the programme of £5.5m relating to fully funded schemes having a net nil impact on the capital programme borrowing due to the identification of specific funding in accordance with the Capital Strategy, as detailed in Table 2 below:

Table 2 – Approved Variations since State of the County 2025	Gross Variation (£m)
Approved Variation: A22 North of Hailsham	0.030
Approved Variation: Alders Close Heating	0.188
Approved Variation: Eastbourne and South Wealden Walking and Cycling Package (ESWWCP) use formula ITB, reduce other ITB £11K	0.000
Approved Variation: Community Match Funding	0.054
Approved Variation: ITM Scheme S106 - Other Integrated Transport	0.088
Approved Variation: Hastings Town Centre Public Realm and Green Connections	0.052
Approved Variation: Rights of Way Surface Repairs and Bridge Replacement Programme	0.168
Approved Variation: Burfield - Hailsham new academy	0.006
Approved Variation: A22 Corridor	3.880
Approved Variation: Oracle (transfer of costs to revenue)	(1.090)
Approved Variation: Active Travel Fund 5 Capital (Eastbourne Liveable £100k, Schools streets £61k)	0.161
Approved Variation: Growing Places loan - Hastings Common + reuse	1.955
<b>Total Net Nil Approved Variations</b>	<b>5.492</b>

### B Capital Programme Extension

The capital programme has been updated to extend the programme by a further year to maintain a 10-year planning horizon. This extends annual envelopes of funding for ongoing programmes of work and those fully funded by formula grants by one year into 2035/36.

### C Capital Slippage Risk Factor

A capital slippage risk factor was applied to the capital programme from 2025/26 to reflect likely slippage based on a risk assessment of historic levels of actual expenditure and slippage at a project/programme level and has been updated to reflect the latest capital proposals. The risk factor is held at a corporate level to enable services / project managers to manage project budgets at a local level, whilst ensuring greater robustness to the planning and monitoring process at a corporate level.



### 3 Capital Programme Funding Update

- 3.1 Table 3 below provides an updated capital programme funding position to reflect the capital programme updates and their associated funding assumptions outlined above and other more specific updates.

Table 3 – Capital Programme Funding Update	Ref:	Current Year 2025/26 £'000	MTFP Period			2029/30 to 2035/36 £'000	Total £'000
			2026/27 £'000	2027/28 £'000	2028/29 £'000		
<b>Gross Expenditure</b>		<b>88.390</b>	<b>91.430</b>	<b>57.291</b>	<b>51.553</b>	<b>383.803</b>	<b>672.467</b>
Specific Funding	D	(24.794)	(18.647)	(12.214)	(1.700)	(7.200)	<b>(64.555)</b>
Specific Developer Contributions	E	(2.571)	(2.305)	(1.674)	(1.127)	(1.275)	<b>(8.952)</b>
<b>Net Expenditure</b>		<b>61.025</b>	<b>70.478</b>	<b>43.403</b>	<b>48.726</b>	<b>375.328</b>	<b>598.960</b>
Formula Grants	F	(36.599)	(29.953)	(29.953)	(30.248)	(213.836)	<b>(340.589)</b>
Capital Receipts	G	(1.288)	(4.910)	(2.198)	(3.592)	(0.832)	<b>(12.820)</b>
Reserves and Revenue Set Aside	H	(4.352)	(1.843)	(0.723)	(1.627)	(11.209)	<b>(19.754)</b>
Capital Reserve	I	-	-	-	-	(4.738)	<b>(4.738)</b>
Developer Contribution Target		-	-	-	(2.515)	(15.086)	<b>(17.601)</b>
<b>Capital Programme Borrowing</b>	<b>J</b>	<b>18.786</b>	<b>33.772</b>	<b>10.529</b>	<b>10.744</b>	<b>129.627</b>	<b>203.458</b>

#### D Specific Funding

The approved programme is supported by £64.6m of scheme specific grants and external funding which is sourced and managed by services at a project level, in the main comprising of DfT grants for Bus Service Improvement Plan, social care capital grants towards supported living improvements; Youth Investment Fund grant towards youth centre improvements; Levelling Up Fund & BSIP grant towards Exceat Bridge replacement; and Devolved Formula Capital grant toward schools delegated capital works.

#### E Developer Contributions

Developer contributions is a collective term used to refer to the Community Infrastructure Levy (CIL) and Section 106 planning obligations, being funding secured in support of the provision of infrastructure and to mitigate the impact of development, largely in respect of school places provision, transport and rights of way improvements, and libraries provision. The Council seeks to maximise the use of Developer Contributions to fund basic need requirements and unfunded infrastructure schemes (via net nil variation). For future planning purposes, capital programme includes a reasonable funding target for future years. An assessment of the current developer contribution position is in progress and may identify additional that can be utilised towards the current capital programme to fund basic need programmes and reduce the future years funding target.

#### F Formula Grants Update

The capital programme is supported by £340.6m of non-specific government formula grant towards capital expenditure. Formula grant assumptions reflect best estimates but noting that there continues to be risk in relation to these grants as values for future years are still yet to be announced. The level of assumed formula grants will continue to be reviewed to ensure that they represent prudent estimates and updated once the detailed implications of any announcements are known, noting that changes in funding formula could change the level of grants anticipated and impact on the level of borrowing. In accordance with Capital Strategy principles, formula grants are used to fund the approved Basic Need capital programme and reduce the Council's need to borrow.

#### G Capital Receipts

Property Services hold a schedule of capital receipts available to support the capital programme, which is reviewed regularly with estimates being based on Property Officers' professional

judgment on a site by site basis. In accordance with Capital Strategy principles, the profile of capital receipt funding has been updated to prioritise funding towards assets with the shortest useful life, such as IT equipment, to reduce the requirement to borrow for assets that attract a greater annual Minimum Revenue Provision cost on the revenue budget.

## **H Reserves and Revenue Set Aside**

The Council can use revenue resources to fund capital projects, where these have been approved as part of the budget setting process, an approved business case or approved variation. This includes specific reserves, payback from invest to save schemes and revenue contributions.

## **I Capital Programme Reserve**

The Council also holds a Capital Programme Reserve to support the capital programme to reduce the need to borrow, that has a consequential increase in pressure on revenue budgets. In accordance with Capital Strategy principles, the profile of capital reserve funding has been updated to prioritise funding towards assets with the shortest useful life, such as IT equipment, to reduce the requirement to borrow for assets that attract a greater annual Minimum Revenue Provision cost on the revenue budget.

## **J Capital Programme Borrowing**

The Capital Strategic Asset Board (CSAB) conducted a capital programme risk review in 2024/25, starting from an assumed base position of removing all core funded projects and providing the capital programme at funded levels only, to provide the maximum level of potential MTFP savings. This reduced the capital programme by £129.2m over the period 2025/26 to 2027/28, and related borrowing costs by £3.9m per annum. The remaining total borrowing requirement following this review and latest update is £203.4m, of which £73.8m is anticipated over the period to 2028/29.

## **4 Impact on the Revenue Medium Term Financial Plan and Treasury Management Capacity**

- 4.1 Decisions on future capital investment should be considered in the context of the impact on the Treasury Management (TM) capacity to fund the investment and the revenue budget position, whereby the cost of funding and Minimum Revenue Provision needs to be included within the MTFP. The proposed capital programme has been prepared to seek reductions in the Council's borrowing requirement to support the revenue budget position, whilst considering the level of risk associated to removing/reducing investment.
- 4.2 Current TM modelling for the direct costs of borrowing estimates that **for every £10m of additional borrowing, there would be an associated revenue cost of approximately £750,000 per year over the full life of the asset** (based on a 30 year asset life), although the value and profile of costs will vary dependent on a number of variables such as timing, internal balances and interest rates. As highlighted at budget setting in February 2024 the current planned programme borrowing requirement will need Treasury Management budget increases outside the current MTFP period.
- 4.3 Treasury Management modelling takes a holistic approach considering a number of variable factors including availability of cash balances and interest rates impacting borrowing costs and return on investments. Therefore, any updates to the MTFP will consider the overall impact on the TM budget.

## **5 Risk Provision Update**

- 5.1 A £7.5m ongoing risk provision was approved in February 2024 to mitigate against capital programme risks, representing more than 2% of the programme over the MTFP period. This risk provision is a permission to borrow for emerging risks and is managed through ensuring Treasury Management capacity rather than representing funds that are within the Council's accounts. Its

utilisation, if approved by CSAB would, therefore, require additional borrowing and be reported through the RPPR process and quarterly monitoring in the normal way.

5.2 There are several risks and uncertainties regarding the programme to 2028/29 and beyond which have necessitated holding a risk provision. These risks previously reported include:

- Uncertainty about delivery of projects in the programme, e.g. highways and infrastructure requirements
- Any as yet unquantifiable impact of supply issues and cost increases
- Any as yet unknown requirements
- Residual project provision (previously removed) if required; and
- Uncertainty regarding the level of government grants and the ability to meet developer contribution targets.

## **6 Capital Strategy**

6.1 The CIPFA (Chartered Institute of Public Finance and Accountancy) Prudential Code was includes the requirement for Local Authorities to produce a Capital Strategy. The Council's current Capital Strategy covers the period 2025/26 to 2045/46 and was approved as part of RPPR 2025/26. The Capital Strategy has been reviewed to ensure it continues to reflect emerging risks, principles and corporate priorities, and informed by decisions made as part of the RPPR process.

## Annex A – Detailed Capital Programme

Detailed Capital Programme (Gross Expenditure)	Current Year 2025/26 £'000	MTFP Period			2029/30 to 2035/36 £'000	Total £'000
		2026/27 £'000	2027/28 £'000	2028/29 £'0000		
Adult Social Care						
Learning Disability Support Living Scheme	1.829	0.043	-	-	-	1.872
Greenacres	0.140	-	-	-	-	0.140
Adult Social Care Total	1.969	0.043	-	-	-	2.012
Business Services						
Youth Investment Fund	1.745	-	-	-	-	1.745
Hollington Youth Centre	3.037	0.039	-	-	-	3.076
Disability Children's Home	0.014	-	-	-	-	0.014
Westfield Land	0.017	-	-	-	-	0.017
Special Educational Needs Provision	3.673	1.000	1.000	0.500	3.500	9.673
Special Educational Needs Provision - now Acre Wood (Grove Park)	3.350	11.272	1.430	0.000	-	16.052
Schools Basic Need Provision	0.664	0.400	0.460	6.138	54.511	62.173
Capital Building Improvement (Schools)	6.909	5.012	5.012	5.012	35.084	57.029
Capital Building Improvement (Corporate)	4.966	4.000	4.000	4.000	24.000	40.966
IT&Digital Strategy Implementation	5.094	4.281	2.880	3.592	49.750	65.597
IT & Digital Strategy Implementation – Oracle Implementation	7.710	2.622	-	-	-	10.332
IT&D – Utilising Automation	0.024	-	-	-	-	0.024
Business Services Total	37.203	28.626	14.782	19.242	166.845	266.698
Children's Services						
Childrens House Adaptations	-	-	-	-	-	0
Hastings and Rother Skills Capital	0.093	-	-	-	-	0.093
Youth Service Mobile Resource Bus	0.070	-	-	-	-	0.07
Schools Delegated Capital	1.150	1.150	1.150	-	-	3.45
Children's Services Essential System Developments	1.279	0.958	0.774	-	-	3.011
Children's Services Total	2.592	2.108	1.924	-	-	6.624
Communities, Economy and Transport						
Broadband	0.338	0.500	0.500	0.500	-	1.838
Bexhill and Hastings Link Road Complementary Measures	0.132	-	-	-	-	0.132
Economic Intervention Fund – Loans	0.022	0.300	0.300	0.300	0.755	1.677
Growing Places Fund Loan Scheme	0.650	-	-	-	6.263	6.913
Community Match Fund	0.451	-	-	-	-	0.451
Community Road Safety Interventions	0.422	-	-	-	-	0.422
Newhaven Port Access Road	0.028	-	-	-	-	0.028
Real Time Passenger Information	0.267	-	-	-	-	0.267
Passenger Services Software	0.005	-	-	-	-	0.005
Bus Service Improvement Plan - Bus Prioritisation	9.877	-	-	-	-	9.877
Bus Service Improvement Plan - Passenger Transport	0.738	-	-	-	-	0.738
Queensway Depot Development	0.001	-	-	-	-	0.001
Queensway Gateway Road	0.470	-	-	-	-	0.470
The Keep	0.212	0.085	0.152	0.628	-	1.077

Other Integrated Transport Schemes	4.14	4.818	3.523	2.941	20.587	<b>36.009</b>
A22 Corridor Package	4.992	-	-	-	-	<b>4.992</b>
A22 North of Hailsham	0.272	-	-	-	-	<b>0.272</b>
Exceat Bridge Replacement	2.587	5.323	9.282	-	-	<b>17.192</b>
Emergency Active Travel Fund - Tranche 2	0.403	-	-	-	-	<b>0.403</b>
Area-wide Traffic Management Scheme - Schools Streets	0.154	-	-	-	-	<b>0.154</b>
Schools Streets	0.061	-	-	-	-	<b>0.061</b>
Eastbourne Liveable Town Centre	0.217	-	-	-	-	<b>0.217</b>
Hastings Town Centre Public Realm and Green Connections	0.824	8.881	-	-	-	<b>9.705</b>
Libraries Basic Need	0.489	0.574	0.449	0.449	0.449	<b>2.410</b>
14A Alders Close Heating	0.188	-	-	-	-	<b>0.188</b>
Highways Structural Maintenance	16.667	21.000	21.000	21.000	147.000	<b>226.667</b>
Safer Roads Fund	0.864	-	-	-	-	<b>0.864</b>
Bridge Assessment and Strengthening	3.480	7.758	1.830	1.885	12.562	<b>27.515</b>
Street Lighting Replacement Programme	2.596	4.974	1.041	1.095	7.695	<b>17.401</b>
Rights of Way Programme	0.810	0.662	0.702	0.744	5.036	<b>7.954</b>
Gypsy and Traveller Site Refurbishment	0.137	0.070	0.070	0.070	0.420	<b>0.767</b>
Visibly Better Roads	0.248	-	-	-	-	<b>0.248</b>
Local Electric Vehicle Infrastructure	0.500	2.320	1.721	-	-	<b>4.541</b>
Flood & Coastal Resilience Innovation Programme	0.840	0.683	-	-	-	<b>1.523</b>
Urban Tree Challenge	0.015	0.015	0.015	-	-	<b>0.045</b>
Climate Emergency Works	0.242	-	-	-	-	<b>0.242</b>
Eastbourne Town Centre Phase 2a	2.290	1.161	-	-	-	<b>3.451</b>
Eastbourne Town Centre Phase 2b	4.328	-	-	-	-	<b>4.328</b>
Eastbourne / South Wealden Walking & Cycling Package	1.903	-	-	-	-	<b>1.903</b>
Hailsham / Polegate / Eastbourne Movement & Access Corridor	0.310	-	-	-	-	<b>0.310</b>
Hastings / Bexhill Movement and Access Package	2.346	1.529	-	-	-	<b>3.875</b>
<b>Communities, Economy and Transport Total</b>	<b>65.516</b>	<b>60.653</b>	<b>40.585</b>	<b>29.612</b>	<b>200.767</b>	<b>397.133</b>
<b>Capital Programme Total</b>	<b>107.280</b>	<b>91.430</b>	<b>57.291</b>	<b>48.854</b>	<b>367.612</b>	<b>672.467</b>

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<b>Report to:</b>	<b>People Scrutiny Committee</b>
<b>Date of meeting:</b>	<b>20 November 2025</b>
<b>By:</b>	<b>Carolyn Fair, Director of Children's Services and East Sussex Safeguarding Children Partnership Delegated Safeguarding Partner</b>
<b>Title:</b>	<b>East Sussex Safeguarding Children Partnership Annual Report 2024/25</b>
<b>Purpose:</b>	<b>To advise People Scrutiny Committee members of the multi-agency arrangements in place to safeguard children in East Sussex</b>

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## **RECOMMENDATIONS**

**The People Scrutiny Committee is recommended to receive and consider the East Sussex Safeguarding Children Partnership Annual Report for 2024-25.**

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### **1. Background**

- 1.1 [Working Together to Safeguard Children](#) sets out the arrangements for cooperation between organisations and agencies to improve the wellbeing of children. This places a duty on police, Integrated Care Boards and the local authority to make arrangements to work together, and with other partners locally, to safeguard and promote the welfare of all children in their area.
- 1.2 In response to Working Together 2023, the Lead Safeguarding Partners (LSPs), Delegated Safeguarding Partners (DSPs) and partnership members developed, and subsequently updated, the [ESSCP Multi Agency Safeguarding Arrangements \(MASA December 2024\)](#).
- 1.3 In order to bring transparency for children, families and professionals, Working Together 2023 sets out that the safeguarding partners must publish a report at least once in every 12-month period. The report must set out what they have done as a result of the arrangements, including child safeguarding practice reviews, and how effective these arrangements have been in practice.
- 1.4 The 2024/25 ESSCP Annual Report focuses on partnership leadership, learning, oversight and assurance.

### **2. Supporting information**

- 2.1 The ESSCP Annual Report 2024/25 outlines the work undertaken by the partnership, highlighting key learning and achievements in section 2, which includes:

- Two multi-agency Rapid Reviews conducted in response to serious incidents; two Rapid Review briefings published and 'Learning from Serious Safeguarding Incidents' sessions held. One Local Child Safeguarding Practice Review (LCSPR) published. Three completed LCSPRs awaiting publication due to pending family engagement and Home Office sign-off.
  - 694 multi-agency staff attended 49 training courses. 100% of evaluations returned rated courses as Excellent or Good. During Safeguarding Fortnight in November 2024, an additional 250 multi-agency staff members attended across 7 learning sessions.
  - Three multi-agency audits held, which focussed on the quality and robustness of response to children presenting at A&E due to deliberate self-harm; intra-familial child sexual abuse and a regular case file audit of recent safeguarding cases.
  - Significant development of multi-agency safeguarding arrangements with the education and voluntary sector.
  - Additional safeguarding projects covering topics such as information sharing, online safety, and social care transformation.
- 2.2 Section 5 of the annual report sets out how the partnership's collaborative leadership and clear accountability have enabled effective multi-agency safeguarding arrangements that:
- Ensure that there are arrangements in place for effective independent scrutiny.
  - Develop and deliver local business plan priorities.
  - Address and escalate strategic and operational multi-agency barriers.
  - Promote and embed a culture that supports critical thinking and professional challenge.
  - Ensure all relevant local agencies are engaged with the partnership and have a clear understanding of their roles and responsibilities in relation to safeguarding children.
- 2.3 The partnership's commitment to creating and strengthening a learning culture across all agencies in East Sussex who work with children and young people is highlighted in section 6. The partnership supports a culture which is open, able to challenge all partner agencies, able to identify learning, improve, and then evaluate effectiveness.
- 2.4 Section 7 of the report details the oversight and assurance of the ESSCP to ensure the effectiveness of safeguarding practice, which it does through evidence-based auditing, performance management, and self-analysis.
- 2.5 The ESSCP Annual Report 2024/25 and an Executive Summary has been published on the [ESSCP website](#), and a copy of the published report shared with the Child Safeguarding Practice Review Panel and the Multi-Agency Safeguarding Arrangements Unit (DfE) as per Working Together 2023. A young person's accessible version of the report will also be published on the ESSCP website.



### 3. Conclusion and reasons for recommendations

- 3.1 An effective Safeguarding Children Partnership is in place in East Sussex.
- 3.2 The People Scrutiny Committee is recommended to receive and consider the ESSCP Annual Report 2024/25 and to note the partnership arrangements in place and the continuing agreed priorities for 2023-2026:
- **Safeguarding in education** including safeguarding children who are electively home educated, excluded from school, and missing education.
  - **Safeguarding adolescents** including adolescents who are criminally exploited, self-harm and/or express suicidal thoughts, child to parent abuse, and transitional safeguarding.
  - **Embedding learning** and evidencing impact from case review and audit work, including ensuring that learning from the 2020-23 priority on safeguarding infants was embedded.

Carolyn Fair, Director of Children's Services and East Sussex Safeguarding Children Partnership Delegated Safeguarding Partner

#### Contact Officer

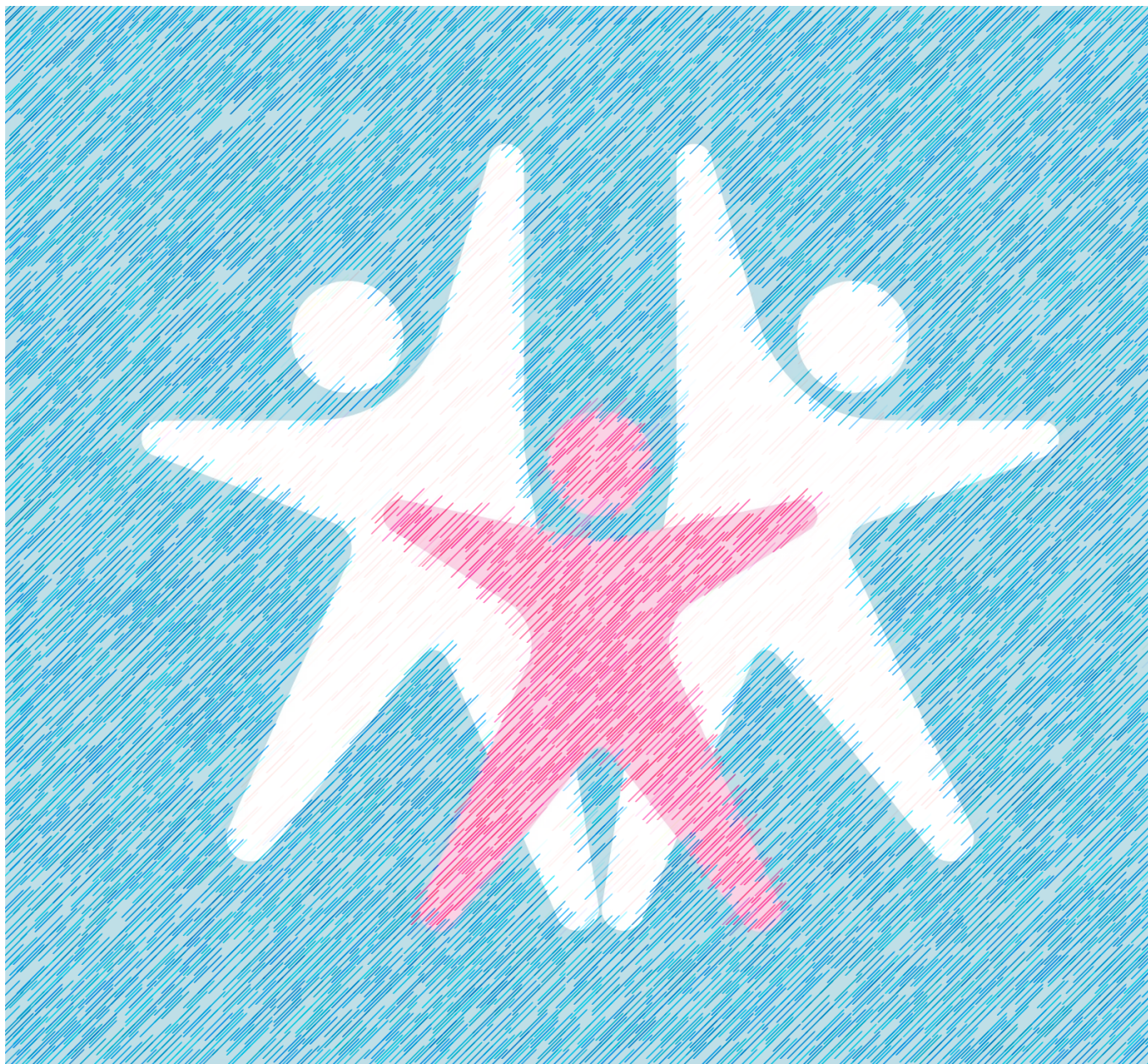
Louise MacQuire-Plows, ESSCP Manager

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Appendix A: ESSCP Annual Report 2024-25

Appendix B: ESSCP Annual Report 2024-25 Executive Summary

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# **East Sussex Safeguarding Children Partnership Annual Report 2024-2025**

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## Foreword

We are delighted to present the 2024-25 annual report on behalf of the three statutory partners of the East Sussex Safeguarding Children Partnership.

We hope you find the report useful in understanding the partnership's work, the challenges the children's safeguarding system faces and celebrating some of the successes. These successes are only possible through the dedication and diligence of the many people working with children, young people and families across a range of agencies.

Through promoting professional curiosity across the multi-agency workforce and ensuring the lived experience of the child is recognised, we strive to keep children at the centre of our thinking and delivery at all levels.

On behalf of the partnership, we hope you find this report to be informative, and open and honest regarding our achievements and challenges over the last financial year.



**Becky Shaw**

**Chief Executive, East Sussex  
County Council**



**Adam Doyle**

**Chief Executive Officer, NHS  
Sussex (Sussex Integrated Care  
Board)**



**Chief Constable Jo Shiner**

**Sussex Police**

# 1. Introduction

Welcome to the East Sussex Safeguarding Children Partnership 2024-25 annual report. As Delegated Safeguarding Partners we are committed to improving outcomes for children and families in East Sussex by embedding learning and sustaining improvements in our local safeguarding system by ‘holding up a collective mirror’ to practice on the ground.

Since we published our revised pan Sussex and local Multi Agency Safeguarding Arrangements, in response to Working Together 2023, we have developed and strengthened several areas of the partnership. Education partners are now fully embedded in the partnership, and robust risk analysis and decision making at the right levels are effective in identifying emerging challenges and responding as a multi-agency group.

The partnership delivers and supports extensive activities to meet statutory requirements and support positive outcomes for children. Throughout this report you will see the evidence and impact of these endeavours.

In 2025-26 we are excited to further explore the partnership’s role in the oversight of how safeguarding partners seek and utilise feedback from children and families to inform their work and influence service provision, with the use of ‘Young Scrutineers’. We are also actively developing our engagement with Voluntary, Charity, Social Enterprise organisations.

A priority for the remainder of 2025 is to respond to challenges of the Sussex Integrated Care Board reconfiguration, how local partners will support the implementation of national reforms, and the further development of our scrutiny programme.

Thank you for your ongoing support, your hard work and commitment to this vital area of work to improve the lives of our children and their families in East Sussex.



**Naomi Ellis**

**Deputy Chief Nursing Officer,  
Director of Patient Experience  
& Involvement, NHS Sussex**



**Carolyn Fair**

**Director of Children’s  
Services, East Sussex County  
Council**



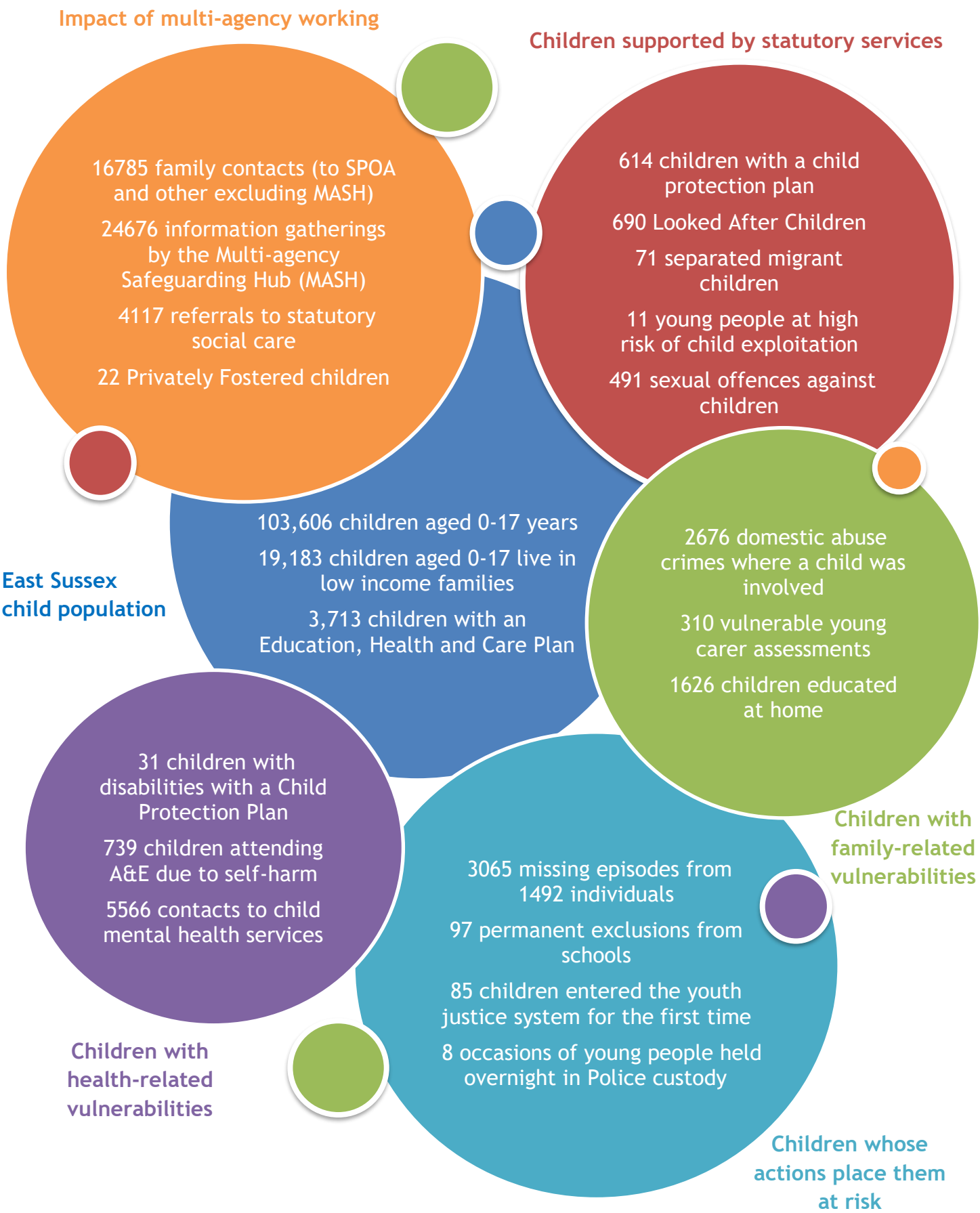
**Richard McDonagh**

**Chief Superintendent, Head of  
Public Protection, Sussex  
Police**

## 2. Key Learning & Achievements 2024-25



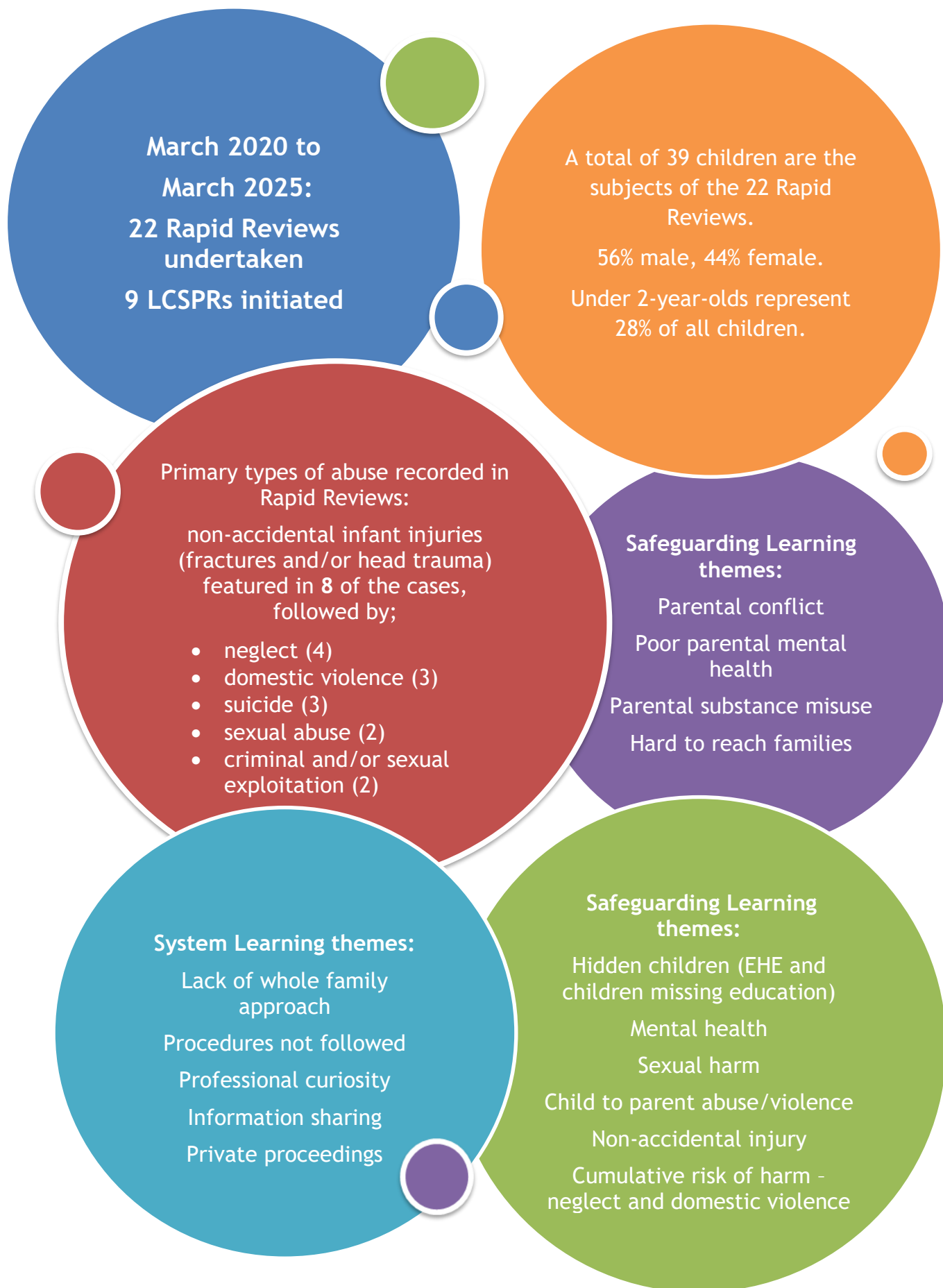
# 3a. Safeguarding Context 2024-25



See **Appendix A** for more detailed information.



### 3b. Safeguarding Context - Rapid Reviews 2020-2025



## 4. Partnership Arrangements

### 4.1 Overview of the Partnership

The East Sussex Safeguarding Children Partnership (ESSCP) acts as a forum for the lead safeguarding partner organisations ([Sussex Police](#), [East Sussex County Council](#), and the [NHS Sussex](#)) to:

- provide strong, collaborative leadership and timely decision-making to ensure the effectiveness of multi-agency working to protect children from abuse, neglect and exploitation.
- engage with, and develop the role of, wider local organisations and agencies in the coordination of safeguarding services in (the geographical local authority borders of) East Sussex.
- implement local, regional, and national learning, including from serious child safeguarding incidents.

### 4.2 Partnership Structure and Subgroups

From September 2024 the statutory safeguarding partners across Sussex (NHS Sussex ICB, Sussex Police, West Sussex County Council, Brighton & Hove City Council, and East Sussex County Council) agreed a partnership structure with the following components:

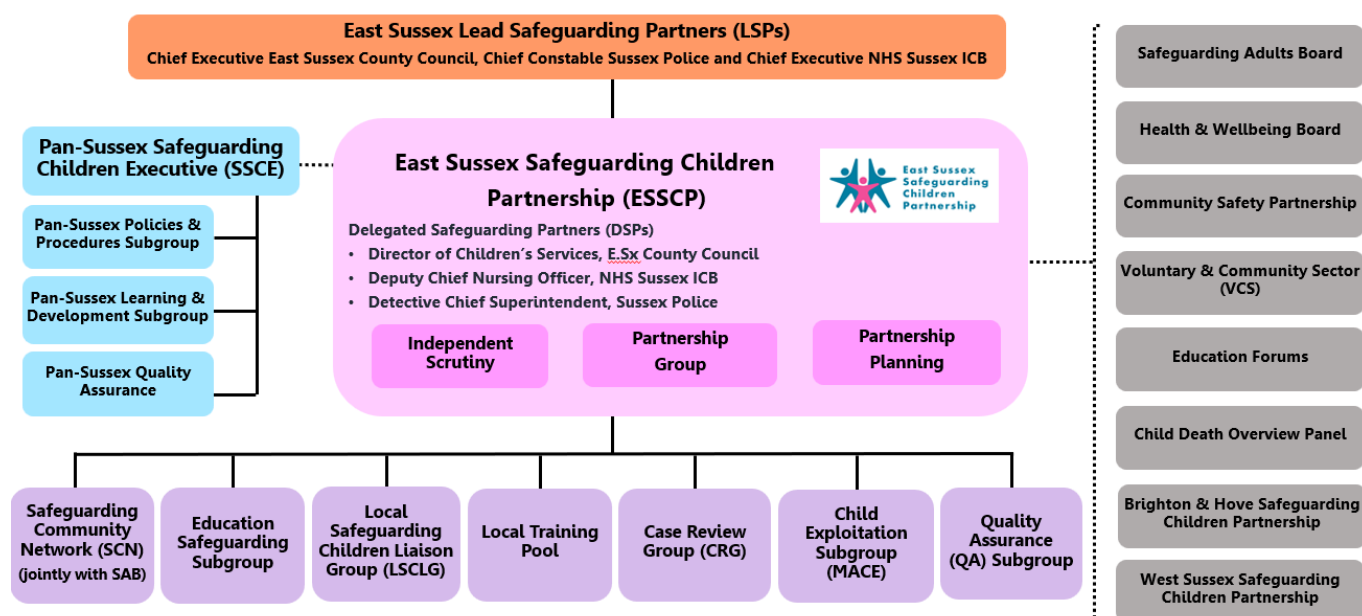
- (i) **A single Sussex Safeguarding Children Executive (SSCE)** responsible for determining multi-agency safeguarding strategy and agreeing models for multi-agency working to safeguard children and young people. The Executive meets at least twice yearly and includes the Delegated Safeguarding Partners from across Sussex. The SSCE determines the regional strategic approach to all issues requiring multi-agency safeguarding action, including responses to reports published by the child safeguarding practice review panel (National Panel). The SSCE can request assurance from partners agencies, if required, that resource allocation meets the needs of children and secures effective discharge of their statutory duties.
- (ii) **Three Local Safeguarding Children Partnerships (LSCPs)** which each reflect the role of the SSCE while exercising separate responsibility for decision making about individual cases of serious incidents, rapid reviews and local practice reviews, through Case Review Groups. Delegated Safeguarding Partners (DSPs) report annually to the Sussex Lead Safeguarding Partners, meeting together as a group to review the effectiveness of arrangements across Sussex. The relevant DSP is the formal Partnership Chair.
- (iii) **Three local area Partnership Groups** which support the work of each LSCP, chaired by the Partnership Chair. These groups replaced the Boards and Steering Groups held under previous arrangements. The broad membership of the Partnership Groups is consistent across Sussex comprising representatives of local statutory, education, voluntary and community sector organisations.

More details on multi-agency safeguarding arrangements (MASA) across Sussex can be found in the ESSCP published arrangements here: [ESSCP Multi Agency Safeguarding Arrangements](#)

## East Sussex arrangements

The ESSCP's area-based core partnership functions are: providing **leadership** to all safeguarding partners by promoting a culture that supports critical thinking and professional challenge; promoting and embedding a culture of continuous **learning** which supports local services to become more reflective and implement changes to practice; and providing **oversight & assurance** on single agency and multi-agency safeguarding practice.

The below structure sets out how the ESSCP supports the delivery of these key functions:



**Partnership Group** is chaired by the Partnership Chair, who for 2024/25, is the Chief Superintendent, Head of Public Protection, Sussex Police. The Partnership Group meets twice a year and includes the Delegated Safeguarding Partners (DSPs), the ESSCP Lay Members and relevant agencies (full list of board members is included in Appendix B). The Partnership Group provides a forum to support and enable local agencies and organisations to work together in a system where:

- There is a shared understanding of safeguarding practice in East Sussex
- Safeguarding assurance is promoted at single agency and multi-agency levels
- Learning and improvement is promoted through a reflective approach to bring change

**Partnership Planning** is also chaired by the Partnership Chair and meets twice a year. The Planning Planning's purpose is to discuss and agree the short-term agenda for the work of the partnership and address any emerging safeguarding risks and issues requiring strategic input. The DSPs (and their representatives), Education Safeguarding subgroup Chairs, Case Review Group Chair and Business Managers attend Partnership Planning.

The Partnership has a range of **subgroups** that lead on areas of ESSCP business and are crucial

in ensuring that the Partnership's priorities are delivered. These groups ensure that the Partnership really makes a difference to local practice and to the outcomes for children and young people. Each subgroup has a clear remit and a transparent mechanism for reporting to the ESSCP, and each subgroup's terms of reference and membership are reviewed annually. New subgroups for 2024/25 are the Education Safeguarding Subgroup and Safeguarding Community Network joint group with the Safeguarding Adults Board.

Until September 2024 the ESSCP had an Independent Chair that delivered '**independent scrutiny**' for the partnership. Between March - July 2024, in partnership with the ESSCP business unit, the Independent Chair consulted with partnership agencies on what independent scrutiny should look like in the new MASA from September 2024. Further details on ESSCP independent scrutiny can be found in Chapter 5 (Leadership).

Development in the East Sussex multi-agency safeguarding arrangements in 2024/25 include:

- establishment of Education Safeguarding Subgroup to maximise the voice of education partners
- merger of the Safeguarding Adults Board Safeguarding Community Network group with ESSCP Voluntary, Charity, Social Enterprise representatives to form an 'all age' group
- development of the pan Sussex Learning & Development and Quality Assurance functions
- development of Lay Members - establishing Lay Member network across Sussex
- pan Sussex section 11 scrutiny completed by independent scrutineer

Further development in 2025/26 to include:

- strengthen both local and pan Sussex Quality Assurance arrangements
- strengthen independent scrutiny - including the appointment of young scrutineers
- embedding the 'all age' Safeguarding Community Network group

### 4.3 Review of Partnership Arrangements

In previous years the Partnership has undertaken a self-assessment as part of the activity to review the effectiveness of local partnership arrangements, using approaches such as the '*six steps for independent scrutiny of safeguarding children partnership arrangements*' developed by the University of Bedfordshire and the National Safeguarding Panel's '*reflective questions for safeguarding partners*', as set out in their annual report.

When the MASA arrangements were initially published in September 2024, and then the final version in December 2024, there was agreement from the LSPs and DSPs that they will be reviewed annually and take in to account any future updates to Working Together to Safeguard Children.

A pan Sussex evaluation of the pan Sussex and local MASA's will take place in quarter four 2025/26. This evaluation will be undertaken by an external scrutineer, and the partnership Lay Members, with the intention of using the Multi-Agency Child Safeguarding (MACS) Evaluation Framework developed by The Association of Safeguarding Partners (TASP). This framework provides a method of structured self-reflection on the effectiveness of LSCP operations across:

- Leadership

- Accountability
- Participation
- Collaboration
- Culture

The ESSCP MASA will be refreshed with the outcome of the evaluation and reported in the 2025/06 Annual Report.

## 4.4 ESSCP Priorities

In March 2023 the ESSCP held an extraordinary Board meeting to discuss local evidence - including learning from case reviews, quality assurance activity, and the voice of children - and propose future priorities for the partnership. Proposed priorities were scoped which clearly identified the evidence to choosing as a priority, the intended impact on practice and outcomes for children, and how success would be evidenced. From the priorities proposed, the DSPs agreed on the following priorities for 2023 -2026:

- **Safeguarding in education** including safeguarding children who are electively home educated, excluded from school, and missing education.
- **Safeguarding adolescents** including adolescents who are criminally exploited, self-harm and/or express suicidal thoughts, child to parent abuse, and transitional safeguarding.
- **Embedding learning** and evidencing impact from case review and audit work, including ensuring that learning from the 2020-23 priority on safeguarding infants was embedded.

More information about the current priorities can be found in Chapter 5 (Leadership).

Looking forward, the DSPs and wider ESSCP partner agencies, will continue to work collaboratively to focus on the complexities of transformation in relation to government reforms. A priority will be to consider the risks and opportunities brought by significant national changes, including NHS reform, Families First Partnership Programme, Children's Wellbeing and Schools Bill, SEND reform and Devolution.

The ESSCP will focus on building on the stable children's safeguarding system in East Sussex to respond to the changes required, whilst maintaining a robust service to local children and families. Extensive multi-agency work has already been undertaken on a transformation plan to ensure that the development and implementation of transformation in East Sussex is a shared endeavour that's makes a positive difference to children and families. DSPs monitor the progress of this work via the ESSCP Risk Register and pan Sussex oversight is provided via the Pan-Sussex Strategic Transformation Group.

## 4.5 Pan Sussex Working

Following the introduction of the pan Sussex Multi-Agency Safeguarding Arrangements (MASA 2024) local Learning & Development subgroups were replaced in September 2024 by the **pan Sussex Learning and Development (L&D) subgroup**. This regional subgroup provides strategic oversight to enable us to work collectively across Sussex to maximise our wide-ranging expertise and resources to best safeguard and promote the wellbeing of children and families.

The subgroup monitors multi-agency training and encourages a learning culture to support multi-agency local services to reflect, respond and implement changes to practice. The subgroup is currently chaired by the ICB Designated Nurse Safeguarding Children and is accountable to the Sussex Safeguarding Children Executive (SSCE). Each local Partnership is still required to provide high quality, up to date safeguarding training to enable practitioners to keep safeguarding at the centre of their work.

Activity from the pan Sussex Learning & Development subgroup in 2024/25 include:

- Development of a pan Sussex Learning & Development Strategy and Delegation of Task process.
- Increase in the pan Sussex training offer, multi-agency conferences and briefings to share learning across the Sussex footprint and gain resource efficiencies.
- Adopting a joint training charging policy to ensure equity and accessibility across Sussex for both statutory and non-statutory organisations.
- Refresh of the safer sleep campaign from 2023, with a follow up 'Every sleep must be a safer sleep' campaign in summer 2024. Safer Sleep courses are available throughout the year for practitioners as a part of the pan Sussex Learning & Development Programme.
- Support for public health messaging, including; Sea/water safety, Beach safety and safer bathtimes with reminders of the risks of drowning, scalds and poisoning.

Further development in 2025/26 to include:

- Develop an approach to evidence impact of training on practice through evaluation
- Consider the value of a pan Sussex Safeguarding Children Partnership website to optimise efficiency and consistence
- Develop local and Sussex wide communication campaigns and align with national campaigns including seasonal campaigns and public health messaging

**The Pan-Sussex Procedures subgroup** co-ordinates the development and timely review of policies, procedures and guidance for safeguarding and promoting the welfare of children and young people across the three pan Sussex Safeguarding Partnerships. The subgroup is currently chaired by the Brighton & Hove Local Authority Head of Safeguarding and is accountable to the Sussex Safeguarding Children Executive (SSCE). The group is well attended, with all participants engaging proactively and meaningfully with policy reviews. Where possible the policy authors/practitioners are invited to the meeting to demonstrate the value and impact of working together across the Sussex footprint. The webpage is publicly accessible [Sussex Safeguarding and Child Protection Policy and Procedures](#)

Since March 2024 several new policies were developed to enhance safeguarding practice in response to local child protection issues. These policies include:

- Contextual Safeguarding of Children and Young People
- Pan Sussex Complaints Procedure
- Pan Sussex Escalation Procedure

Over 50 policies and procedures were reviewed, including the in-depth review of 6 chapters, to ensure they remain current and effective for practitioners across the multi-agency safeguarding partnership. During 2024/25 the group prepared and implemented a new website provider to host the Sussex Safeguarding and Child Protection Policy and Procedures. Initial



feedback on the new platform is positive. We currently benefit from a jointly funded position to co-ordinate the procedures - recruitment for this role would be particularly challenging if it were to become vacant, as the success of our initiatives heavily relies on this post. Although limited analytics show visit statistics to the procedures website, assessing the actual impact on safeguarding practice remains challenging. To gather qualitative insights from practitioners on the impact of policies and procedures, the group plans a user survey at 6 months post new website implementation.

As part of the Sussex MASA, East Sussex SCP take a lead on **Pan Sussex Quality Assurance**, including the collation and analysis of data relevant to multi-agency safeguarding responsibilities, the delivery of the Sussex wide Section 11 audit how agencies are fulfilling their duties in relation safeguarding and child protection, and additional Sussex wide audit activity, as directed by the SSCE. During 2024-25, activity led by the ESSCP business unit has included:

- Leading the coordination of a Pan Sussex Information Sharing Agreement, which has been signed by the key statutory and relevant agencies, represented on the three Sussex SCPs.
- Coordinating the 2024 Pan Sussex Section 11 self-assessment which was completed by all agencies who are represented on more than one of the Sussex SCPs. In spring 2025 an Independent Scrutineer, commissioned by the Sussex DSPs, held individual 'challenge' conversations with thirteen pan Sussex agencies who had completed their section 11 self-assessments. This process was supported by the introduction of a 'staff survey' for front-line staff and managers about their perception of safeguarding practice in their organisation. More information about the section 11 process can be found in the Assurance section of this report.
- Engagement with all Sussex Quality Assurance subgroups on how best to take a Sussex wide approach to audit and data analysis. There was strong support for local QA subgroups to continue to oversee local audit and performance dashboards, to ensure that QA robustly held up the 'mirror to safeguarding practice', and that any pan Sussex QA should clearly add value to existing work. DSPs agreed to trial a pan Sussex audit in 2025-26, aligned to future JTAI themes and to develop a core dataset relating to shared Pan Sussex priorities and/or themes raised by the national Child Safeguarding Practice Review Panel.
- A priority for 2025-26 will be to explore the options for developing a Sussex system to better support the tracking of action plans and analysis of data arising from rapid reviews and LCSPRs. This could be used to help inform Pan Sussex learning and development and improve understanding of agency performance.

**Coordination of work between partnerships and subgroups** is managed effectively via workplans, action logs and delegation of task requests. Partnership members across Sussex are encouraged to propose agenda items, suggest learning themes or initiate policy reviews, in response to local issues, audit findings, and Child Safeguarding Practice Reviews. The majority of these requests are initiated by local Child Protection Liaison Groups/Child Safeguarding Liaison Groups and Case Review Groups, reinforcing the pan Sussex subgroup's alignment with frontline operational needs and regional safeguarding priorities.

## 4.6 Links to Other Partnerships

The Partnership has formal links with other East Sussex and pan Sussex strategic partnerships, namely the Health and Wellbeing Board; pan Sussex Child Death Review Partnership (CDRP), Safeguarding Adults Board (SAB); Safer Communities Partnership; West Sussex and Brighton & Hove Safeguarding Children Partnerships; the Sussex Integrated Care System Children and Young People's Board, Children and Young People Trust (CYPT) and Local Head Teacher Forums.

The **East Sussex Partnership Protocol**, which includes a number of the aforementioned partnerships, was refreshed for 2024-2026. The protocol is intended to support effective joint working between strategic partnership boards in East Sussex, working together at every level to keep people in East Sussex safe from harm and abuse and improve their health and wellbeing. Links to significant partnership documents are highlighted in Appendix C.

The ESSCP annual report is presented to the East Sussex County Council People Scrutiny Committee and Health and Wellbeing Board, and the East Sussex SAB. The report is also shared with the Safer Communities Board, the Police and Crime Commissioner and other ESSCP member organisations' senior management boards.

The **Child Death Review Partnership (CDRP) Annual Report** was presented to the SSCE in January 2025. Pan Sussex Local Authorities and Integrated Care Boards (NHS Sussex ICB) hold legal responsibility for reviewing child deaths in Sussex as set out by the Children Act 2004, amended by the Children and Social Work Act 2017. The Panel conducts statutory reviews on behalf of the Partners to provide independent multi-agency scrutiny for the deaths of all children living in Sussex. The reviews take place once all other child death processes, including coronial inquests and local child safeguarding practice reviews (LCSPR), have concluded. [CDOP - 7 Minute Briefing](#).

The key learning and actions arising from child deaths in 2024-25 relate to: information sharing, safeguarding, sudden unexpected deaths in infancy (SUDI) and unsafe sleeping, road safety, asthma, and bereavement support. More information is available as part of the CDOP Annual Report 2024-25 is available at: [Pan-Sussex-CDOP-Annual-Report-2024-25](#). Action undertaken in response to the CDOP Annual Report include activity by the Learning & Development subgroup to share communications on water safety and suicide prevention, and embedding the learning from the 'out of routine' report on sudden unexpected deaths in infancy into the training programme.

During 2024/25 the ESSCP offered events on a range of relevant safeguarding subjects outside of the 'core' programme. Free Webinar events were delivered by **SEROCU (Southeast Regional Organised Crime Unit)** seeking to reduce criminal computer use in young people and to avoid criminalising them where possible. '*Cyber Choices to help children becoming involved in Cyber Crime*' was delivered in July and August 2024 and '*Cyber Protect Webinars for Parents and Carers and The Digital Dilemma: Keeping your Kids Safe Online*' ran between December 2024 and January 2025.

Through ongoing partnership working with **Adult Social Care (ASC)** and the **Safeguarding Adults Board (SAB)**, the ESSCP have offered free training to the multi-agency audience on the *Mental Capacity Act (MCA)* and *Liberty Protection Safeguards (LPS)*. Additional ESSCP/ASC/SAB



training courses that are relevant to the ESSCP audience regularly appear in ESSCP training publicity, such as: *‘Modern Slavery; Impact of Sexual Violence and Abuse; Responding to First Disclosures’* and *‘Coercion and Control’*.

## 5. Leadership

Strong, collaborative leadership and clear accountability are crucial for effective multi-agency safeguarding arrangements and the capacity of agencies to identify and address system issues.

This section of the ESSCP Annual Report sets out how the partnership has delivered its core 'leadership' function to:

- Ensure that there are arrangements in place for effective independent scrutiny.
- Develop and deliver local business plan priorities.
- Address and escalate strategic and operational multi-agency barriers.
- Promote and embed a culture that supports critical thinking and professional challenge.
- Ensure all relevant local agencies are engaged with the partnership and have a clear understanding of their roles and responsibilities in relation to safeguarding children.

### 5.1. Independent Scrutiny

The purpose of independent scrutiny in partnership arrangements is to drive continuous improvement and provide assurance that arrangements are working effectively for children, families, and practitioners. Until September 2024 the ESSCP had an Independent Chair that delivered 'independent scrutiny' for the partnership. Between March - July 2024 in partnership with the ESSCP business unit, the Independent Chair consulted with partnership agencies on what independent scrutiny should look like in the new MASA from September 2024. The following priorities were agreed:

- While the role of the Independent Scrutineer was valued as a critical friend by agencies there was recognition of the need to diversify the scrutiny 'offer' in East Sussex to be more dynamic, evidenced based, and responsive to trends.
- Strengthen the focus of scrutiny on front-line practice with the flexibility to conduct discreet scrutiny projects as agreed by DSPs.
- Strengthen the voice of child / 'experts by experience' as an explicit part of the scrutiny programme. As part of this, the ESSCP should consider the use of 'young scrutineers', providing input of their ideas into projects, gathering feedback from other young people, reviewing partnership documents and policies, and feeding back to senior stakeholders.
- Ensure a balance between scrutiny at a local and pan Sussex level.
- Explore options for alternative scrutiny approaches, such as peer scrutiny, National Safeguarding Facilitators, etc.

DSPs agreed to a revised scrutiny approach in October, utilising the previous Independent Chair budget to deliver a range of flexible and responsible scrutiny. New elements included:

- **Appointment of an independent chair for the Quality Assurance Subgroup**
- **Commissioning an independent scrutineer** to provide scrutiny of Pan Sussex agency's section 11 self-assessment.
- **Appointment of young scrutineers** to work alongside Independent Reviewers on pieces of scrutiny, attend high level meetings, help involve other children in the partnerships work, take the lead on special projects, and design or review partnership communication.

- Commissioning up to **two pieces of independent scrutiny** a year, providing independent challenge, at both strategic and operational levels, and identify recommendations for improvement.
- **Strengthening the role of Lay Members** within and across the partnership by establishing a Sussex Lay Member network, adding lay members as standing members of the QA and Education subgroups, and creating opportunities for direct engagement with children and families, and practitioners, on key safeguarding topics.
- Introduction of a '**best practice in safeguarding conversation**', aligned with WT23 national child protection standards, foster greater awareness of different roles, raise awareness of the partnership with front-line teams and staff, and provide solid best practice examples of multi-agency working.

## 5.2. Delivery of business plan priorities

ESSCP priorities for 2023-26 were chosen because they include the highest risk children in the county, where multi-agency working is essential and where significant change and/or commitment is necessary to reduce risk. It is in such areas where the partnership can be most effective in scrutinising and supporting practice. Towards the end of 2025-26 the partnership will consider priorities going forward.

- ✓ **Safeguarding in education**
- ✓ **Safeguarding adolescents**
- ✓ **Embedding learning**

### Safeguarding in Education

Everyone who encounters children, and their families, has a role to play in safeguarding children. Early years, school and college staff are particularly important as they see children daily and can identify concerns early and provide help for children, to prevent concerns from escalating. Education partners, and their staff, form a key part of the wider safeguarding system for children.

The ESSCP agreed that by making this area a priority for 2023-26, there is a continued focus on effective joint working between local agencies and education settings, strategically and at a setting level. Key areas of practice, highlighted in the last annual report, remain for educational establishments: School attendance, mental health and emotional wellbeing and harmful sexual behaviours. The impact of the COVID-19 national lockdowns is still evident within education settings, with 'School Readiness' a priority for the Education Division. In the last year, 3 reception aged children were permanently excluded from their schools, the first time this has happened with children of that age in East Sussex. The exclusions were linked to the children's behaviour and dysregulation.

The focus of the partnership in this priority is to:

- Provide **multi-agency expertise and support** to education settings to effectively respond to safeguarding concerns.
- Ensure that all educational settings have the **right information** to support their pupils.
- There is a **multi-agency informed preventative curriculum** available for education settings to access.

- The partnership responds to the requirements in **Working Together 2023 to engage education as a fourth safeguarding partner.**
- There is a partnership wide approach to **safeguarding vulnerable children who are not in education.**
- **Education settings effectively respond to learning identified by the Partnership.**

The ESSCP works closely with the Education Safeguarding Team to use evidence to deliver safeguarding in education, via:

#### **(i) Reviews in schools**

85 Reviews were undertaken by the Education Safeguarding Team in maintained primary and secondary schools from September 2024 to April 2025: 11 in state-funded special schools and 14 in Independent non-maintained special schools.

Undertaking comprehensive reviews in all maintained primary and secondary schools over the past 2 years has created a baseline for positive practice. The new Quality Assurance Support visits offer a very useful intervention for schools to seek reassurance and/or development points with a focus on specific areas and provide challenge and support.

*New commissioning arrangements for academic year 25-26:* The Primary and Secondary Improvement Boards have commissioned the Education Safeguarding Team to complete a focused Quality Assurance visit to every primary and secondary school (including maintained and academies).

All state-funded specials and 15 identified INMS schools will also receive a focused Quality Assurance and support visit in the next academic year.

#### **(ii) Designated Safeguarding Leads (DSL) Network meetings**

In the last academic year, the DSL Networks were revamped to link directly with the new ESSCP Education Safeguarding subgroup to provide improved communication /feedback mechanisms. Topics for discussion and review have included Social Care Transformation Programme, Single View, Operation Encompass.

New Early Years DSL networks have been established for all settings. 60 settings attended each network which is a positive new development.

#### **(iii) The Schools' Annual Safeguarding Audit**

98% of school self-evaluation audits across all school types have been returned to date (DRAFT-TBC)

Many areas of strength identified were identified, and key issues identified as needing further development include: capacity of the DSL Team, dealing with on-line harms, records of restrictive physical intervention, plans for risk assessments such as for Harmful Sexual behaviour are reviewed and updated, co-produced with parents. Schools identified the need for Managing Allegations training.

#### **Key achievements in 2024-25 include:**

- Establishment of the ESSCP Education Safeguarding Subgroup (see 5.5. Engagement of relevant agencies for further details).

- The Schools' Safeguarding Conference (October 2024) had specific input on 'safeguarding for the under 6s, and the Early Years Safeguarding Conference (February 2025) included newly developed guidance on attendance (which is non-statutory at that age). This content was programmed in response to an East Sussex Rapid Review involving a pre-school aged child with irregular attendance at nursery. Both conferences also included content on online safety.
- All 23 state-funded secondary schools, along with 3 special schools, had a funded Theatre in Education performance for year 9 students (approximately 4800 students across the 26 schools). The performance addressed healthy relationships, harmful sexual behaviours and online safety, and were accompanied by lesson resources and a briefing for staff. This was funded and facilitated by Public Health in partnership with the Education Safeguarding Team and PSHE Hubs.
- New multi-agency support programmes were developed in response to critical incidents and suspected suicides of young people. These included using the Unexpected Death Toolkit and suicide prevention training. Loss and Bereavement training was delivered to 28 schools.
- The East Sussex Early Years Improvement Team supported the roll out of Operation Encompass to Early Years Settings. Settings and Childminders are now included within Police processes for notifying attendance at an incident of domestic violence or abuse where children (over the age of two) are present or normally resident.
- In response to feedback from schools, the Education Safeguarding Team worked with colleagues from the Attendance Team, SPOA and Early Help to establish a guidance document "Children not in regular attendance at school". This promotes understanding across teams/agencies/schools as to the need, frequency and purpose of completing 'welfare checks' for children who have unexplained absences from school for extended periods.

## Safeguarding Adolescents

During adolescence, the nature of the risks faced by children, and the way that they experience these risks, can differ from earlier childhood - as do their needs. Specifically, children may be faced with a new set of complex risks - ones not posed by families, but instead by peers, partners, and adults unconnected to their families in communities and online. Peer and social relationships become more central to children's lives and their identity. For many young people adolescence can also be a challenging time. Alongside the many physical and emotional changes that are part of adolescence, growing up also involves changes in roles, relationships, expectations, and status within family, amongst friends and the wider community of home, school, and work.

The focus of the partnership in this priority is to work collaboratively to **safeguard children from all forms of exploitation** and oversee the effective service provision and support for victims of exploitation, and their families; ensure a **coordinated multi-agency response when child suicides** occur, which also identifies any at risk children within the wider network; and develop a **Transition to Adulthood protocol** that outlines key principles for joint working across agencies when supporting vulnerable young adults.

Key achievements in 2024-25 include:

- Children's services successfully applied for **Youth Endowment Funding** to deliver a placed based whole systems approach to tackling exploitation and serious youth violence. As part of the project significant focus was made on earlier intervention, recognising the transition from primary to secondary school as a risk area for children. A targeted PHSE curriculum was delivered in four primary schools supported by a drama production, and partnership with voluntary sector agency Fellowship at Saint Nicolas to deliver a positive activity programme. Over 140 children and families have been supported through the project in just over a year. The project is currently being externally evaluated by John Moores Liverpool University. Early reports from the evaluation evidence that it was impactful in reducing incidences of serious youth violence and exploitation and in improved emotional well-being and confidence in the families engaged.
- Between April and October 2024 Sussex Police (East Sussex Division) piloted a '**Discovery Child**' team co-located with the youth justice team, focused on early identification, rapid intervention, and disruption of child exploitation. An evaluation of the project, in November 2024, highlighted a number of key outcomes, including: a significant reduction in time taken from submission of exploitation related intelligence to multi-agency assessment, action and rapid intervention with partners; weekly partnership intelligence meetings also support the earlier identification of victims, perpetrators and locations of exploitation; and there was a proactive approach to disruptions resulting in clear and sustained increases in disruption for child exploitation on the East Division (a total of 85 disruptions were recorded in East Sussex compared to 67 in West Sussex, 42 in West Surrey, and 26 in Brighton & Hove). There were also 59 protect disruptions recorded in East Sussex during 2024-25 compared to 16 in West Sussex and 10 in West Surrey. The evaluation recommended the continuation of Discovery Child co-located with YJS and Exploitation Team and that the model should be adopted across Sussex.
- YMCA Wise **Project SOLAH** accepted over 60 referrals to the service in 2024-25 for children and young people living in East Sussex. Standing for 'Safer Online at Home', SOLAH began in November 2021 as a pathway for the Sussex Police Online Investigation Team to refer children and young people into especially where they were either uploading self-generated images to the internet or sharing indecent images of children between themselves, in person or online. Children and young people who have been identified as being at risk are offered safeguarding advice and online education sessions delivered by specialist staff at YMCA DownsLink Group's WiSE project. As well as an increase of harmful sexual behaviour support needs. YMCA Wise have delivered 15 professional consultations to staff with East Sussex children services creating tailored tool kits for staff to take direct work forward.
- East Sussex, in partnership with Brighton and Hove, continues to be part of the **National Referral Mechanism (NRM)** devolved decision making Pilot. Locating decision making about whether a child has been the victim of modern slavery within local safeguarding structures ensures that decisions are more closely aligned with the provision of local needs-based support and law enforcement responses. It has also significantly reduced the time taken to reach decisions. Between April 2024 and March 2025, 35 children were discussed at the local NRM panel, with the average decision-making time being 24 days for Reasonable Grounds decision and 44 days for a Conclusive Grounds decision.



Learning and recommendations from the May 2024 Self-harm attendances at A&E audit were shared with the East Sussex Children and Young People Mental Health and Emotional Wellbeing Partnership Group. Next steps were aligned to respond to the concerning rise in suspected child suicides, with a multi-agency workshop held in January 2025 to identify immediate and longer term action to reduce serious self-harm and suicide. The workshop made six recommendations for multi-agency action to prevent serious self-harm and suicide:

- **Recommendation 1: System Response to Risk** Explore the benefits and feasibility of implementing a Multi-Agency Mental Health Education Triage (MAMHET) style approach in East Sussex.
- **Recommendation 2: Mental Health Awareness, Resilience and Safety Planning** Safety planning features in the self-harm toolkit and guidance for schools. The Pan-Sussex Self-harm Learning Network has created a consistent pan-Sussex resource and extensive training has also been provided to schools to support implementation of the guidance.
- **Recommendation 3: Peer Support** The East Sussex Mental Health Prevention Group has agreed to examine the role of peer support in preventing mental health problems and promoting good mental health. The timescales for the draft report are Autumn 2025. The evidence review is underway.
- **Recommendation 4: PSHE Curriculum** The Education Division and Public Health plan to develop a comprehensive suicide prevention package for secondary schools and post-16 Colleges to support them in implementing the new statutory RSE guidance from Sept 2026, as it relates to suicide and self-harm.
- **Recommendation 5: Support for Schools** Undertake a review of the multi-agency support measures available to schools in the medium to long term, following the unexpected death of a child. Including, what additional training might be provided to help schools prepare for bereavement.
- **Recommendation 6: Online Harms** The funding was agreed by Public Health and the University of Brighton to bring together current evidence to gain an understanding of the online lives of young people, including harms and benefits. The project will also gain insight from young people about what would help them to manage their digital lives, and from parents and schools about how we can support them with this issue; and bring together professionals across Sussex to share learning about the digital lives of young people, existing services supporting young people and to develop future plans.

## Embedding Learning

The ESSCP is committed to creating and strengthening a learning culture across all agencies in East Sussex who work with children and young people. A culture which is open, and able to challenge all partner agencies, will be able to identify learning, improve, and then evaluate effectiveness. The ESSCP agreed to make 'embedding learning' a priority to ensure that the partnership becomes better focused on learning with the following three aims: the learning reaches the right people; there are effective mechanisms for sharing learning; and learning is embedding into practice and outcomes for children.

It is the focus of the partnership in this priority to ensure: Mechanisms to **disseminate learning** from Rapid Reviews, Local Child Safeguarding Practice Reviews and audits (multi-agency and single agency), and national reviews are reviewed and improved; **training** delivered by the ESSCP is effective, responds to local learning, and is having a measured impact on safeguarding practice; the ESSCP is able to evidence that **ESSCP learning is impacting on safeguarding practice** and is making a positive impact on outcomes for children; the ESSCP promotes a **culture of learning from experience**, including the experience and views of children and parents/carers; The ESSCP promotes a culture of learning through **effective scrutiny of safeguarding practice** which is transparent and recognises the importance of challenge to drive improvement; and Learning regarding the **safeguarding of infants** is embedded into practice.

Key achievements in 2024-25 include:

- The ESSCP Business Unit has supported the Case Review Group to develop and publish two learning briefings, which concisely highlight key learning for professionals arising from rapid reviews, and one LCSPR, and one evidencing impact briefings from a previously published LCSPR.
- The business unit has also coordinated multi-agency learning events, on the rapid reviews, and contributed to materials, for the annual **Schools Safeguarding conference**, the **Early Years Safeguarding Conference**, responding to suspected child suicides, safeguarding and domestic abuse, and Pan Sussex Conference on neglect.
- **Pan Sussex Safeguarding Fortnight** ran from the 18th to the 29th November. The ESSCP led a series of taster/Brief Bytes sessions across seven subject areas. 250 practitioners attended across a range of agencies.


**East Sussex Safeguarding Children Partnership**


**Safeguarding Fortnight (18 – 29 November 2024)**

The East Sussex Safeguarding Children Partnership is excited to announce its FREE multi-agency SAFEGUARDING FORTNIGHT range of taster learning events.

We have organised 8 one-hour-long taster learning events, between Monday 18th and Friday 29th November 2024, on a range of safeguarding topics from 'child to parent abuse' to a deep dive into 'extreme misogyny'. The events are open to all professionals working with children and families, are free to attend, and are all online.

To sign up all you need to do is click on the below links to register your details.

 <p>Select tickets – Safeguarding Fortnight: Introduction to Child and Adolescent to Parent Abuse and Violence (CAPAV) – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Monday 18<sup>th</sup> (10am)</p>	 <p>Select tickets – Safeguarding Fortnight: How to make a referral for neglect – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Tuesday 19<sup>th</sup> (9am)</p>
 <p>Select tickets – Safeguarding Fortnight: Working with the Gypsy Roma Traveller community – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Wednesday 20<sup>th</sup> (12 noon)</p>	 <p>Select tickets – Safeguarding Fortnight: Safeguarding Infants - Learning from local and national safeguarding reviews – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Thursday 21<sup>st</sup> (2pm)</p>
 <p>Select tickets – Safeguarding Fortnight: Professional Curiosity and Professional Challenge within a Safeguarding Context – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Tuesday 26<sup>th</sup> (10am)</p>	 <p>Select tickets – Safeguarding Fortnight: Harmful Sexual Behaviours – A Multi-Agency Briefing – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Wednesday 27<sup>th</sup> (9.30am)</p>
 <p>Select tickets – Safeguarding Fortnight: Safeguarding electively home educated children – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Thursday 28<sup>th</sup> (9.30am)</p>	 <p>Select tickets – Safeguarding Fortnight: Incels - A Deep Dive into Extreme Misogyny – MS Teams (<a href="https://tickettailor.com">tickettailor.com</a>) Friday 29<sup>th</sup> (9.30am)</p>



**LEARNING FROM SERIOUS SAFEGUARDING INCIDENTS IN EAST SUSSEX**  
**TUESDAY 18 MARCH 2025 (3-4 PM) & MONDAY 24 MARCH 2025 (1-2 PM)**


When a child dies or is seriously harmed, as a result of abuse or neglect, a review may be conducted to identify ways that professionals and organisations can improve the way they work together to safeguard children and prevent similar incidents from occurring.

This one hour briefing sessions will be delivered by colleagues from the ESSCP Case Review Group. The event will cover the themes and learning from three 'rapid reviews' that were conducted in 2024, following serious safeguarding incidents in East Sussex. The reviews featured a three week old baby, a four year old child, and a sixteen year old child.

It is really important that you know about these reviews, and the learning from them, so that the service improvements identified become embedded in to practice.

This event is FREE to attend.

To register your place at the learning briefing session go to the below link:  
<https://buytickets.at/eastsussexsafeguardingchildrenpartnership>


**East Sussex Safeguarding Children Partnership**



- **Impact evaluations** are being developed pan Sussex, with a pilot being undertaken in 2025/26 in relation to neglect resources and training.
- The ESSCP Business Unit has continued to ensure that learning regarding the **safeguarding of infants** is embedded into practice. Examples have included:
  - Presentations on local and national learning regarding safeguarding infants during Safeguarding Fortnight and senior social worker forum.
  - Updating the section 11 self-assessment audit tool to provide assurance that agencies are robustly delivering on learning regarding safeguarding infants.
  - Supporting the delivery of three briefing sessions on safer sleeping, in particular in out of routine situations, over the past year.
  - Coordinating East Sussex multi-agency input into the pan **Sussex ICON Steering group**. The purpose of the group is to ensure that the ICON message is embedded across agencies in the partnership, support practitioners in their role with families, and to ensure consistent messaging across the partnership.

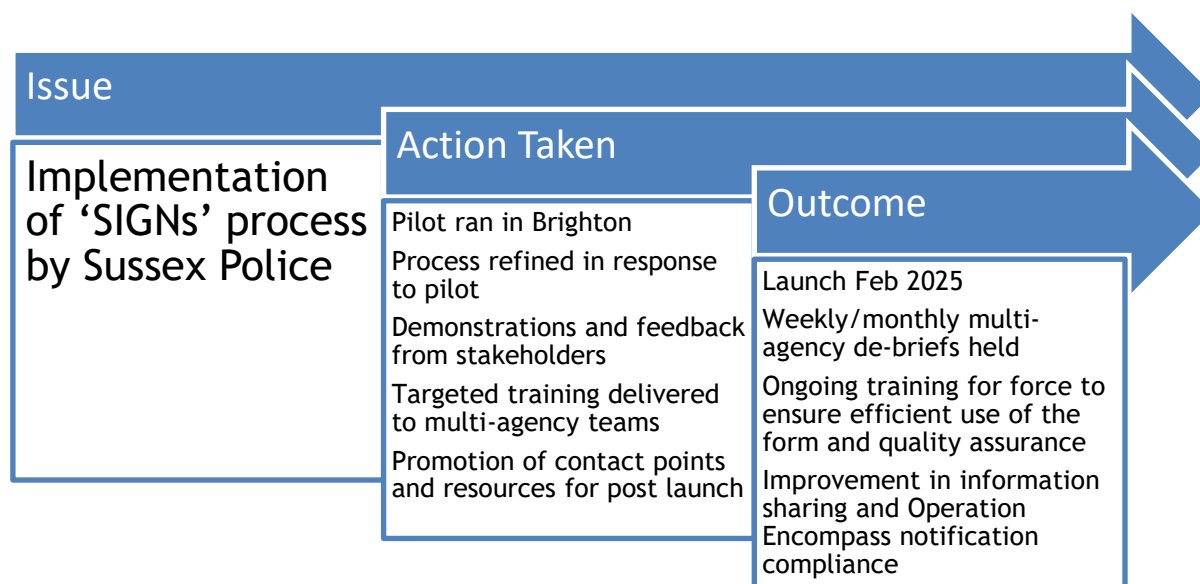
### 5.3. Escalating and addressing risks & issues

The ESSCP holds a Risk and Issues Register, which is reviewed regularly by the Business Unit and DSPs. Partnership members can request for risks and issues to be added to the log, however most additions are escalated via subgroup chairs and from discussions held at Partnership and Planning Group meetings.

During 2024/25 the ESSCP has monitored risks in relation to the ESSCP budget contributions and the transition to a new Sexual Assault Referral Centre (SARC) provider from April 2025.

During 2024/25 the ESSCP has monitored issues in relation to:

- Levels of children subject to child Protection plans
- Capacity of multi-agency staffing in MASH
- Staffing in midwifery services
- Implementation of 'SIGNs' process by Sussex Police:



From January 2025 the Business Unit introduced a monthly briefing for DSPs. This efficient approach allows the Business Unit to escalate emerging issues and barriers in progressing partnership work areas to the DSPs for a swift response. The monthly briefing is RAG rated with items for decision, action or for information. This has allowed the Business Unit to maintain the flow of work within the partnership and keep a record of decisions made by the DSPs.

## 5.4. Critical thinking and professional challenge

Critical thinking and professional challenge are essential to securing good outcomes for children. It requires safeguarding leaders to model effective multiagency leadership, ensuring that the right and necessary capacity and resources are in place. Leaders need to demonstrate, through engagement with practitioners, children, and families, that they have good knowledge about the quality of multiagency practice and its impact on children. They also need to be assured that practitioners have access to high quality supervision with managers providing robust oversight, good support and challenge.

However, safeguarding practice reviews nationally and locally continue to identify that good ‘professional curiosity’ and critical thinking is not always underpinning work with children and families, resulting in assessments and interventions that are not as robust and effectively focused on potential risks of harm to children as they need to be. Previous national panel reports have also highlighted a lack of challenge between professionals and an apparent reluctance to escalate concerns.

ESSCP 2024 Rapid Review for Child 5 (as detailed in the Learning section of this report) highlighted learning locally about the importance of convening complex case meetings to address escalating and enduring risks where current service provisions are unable to reduce risk and support continuity of service delivery. Senior Managers directly involved in complex or long-standing cases at the right time can help in progressing necessary action by addressing any blockages and supporting practitioners who may need additional assistance. The visible involvement of senior leaders in complex practice dilemmas and decision making can be of real benefit and impact. By modelling reflective and analytic thinking when making complex decisions in high-risk situations, organisational leaders can demonstrate their support of practitioners.

Critical thinking and professional challenge examples in 2024-25 include:

- In spring 2025 an Independent Scrutineer, commissioned by the Sussex DSPs, held individual ‘challenge’ conversations with thirteen pan Sussex agencies who had completed their section 11 self-assessments. The scrutiny of the Section 11 returns, when triangulated with challenge conversations and staff survey findings, provided an overall **high level of assurance** for the capacity to critically evaluate strengths and areas for improvement. A high level of assurance was observed in standards such as senior management commitment to safeguarding, the availability of clear organisational responsibilities, and effective safer recruitment practices. However, areas requiring further improvement included the need to integrate the perspectives of children and families from strategic to the frontline.
- Professional challenge training is offered as part of the core offer and was included as a bite-size session within Safeguarding Fortnight.

- In collaboration with the Safer Communities Team and the East Sussex Safeguarding Adults Board, the **Professional Curiosity Resource Pack** was updated and republished. Professional curiosity was an area identified as a common theme across East Sussex reviews. The resource pack was based on the Swindon Safeguarding Partnership resource pack. This resource aims to raise awareness of professional curiosity and how being professionally curious is necessary to fully understand a situation and the risks an adult may face, which are not always immediately obvious. The expectation is that practitioners will share the resource pack and use it in team meetings and as part of group/individual supervision or for their own development.
- In March 2025 Sussex Police implemented a 'partnership escalations' inbox so that partners are able to escalate issues more directly with divisional teams and staff, via divisional command, so that there is an appreciation with respect the type and volume of escalations being received. This inbox will be monitored by divisional secretariat who will receive and distribute messages appropriately across the division.
- The Local Safeguarding Children Liaison Group (LSCLG) is a multi-agency subgroup of the partnership that meets on a quarterly basis. The group act as a forum for multi-agency discussion to explore any learning or potential improvements to multi-agency work, such as procedural and practice development, across the children's safeguarding system.

Next steps in 2025-26 include:

- Celebrate good practice - through annual best practice in safeguarding awards. Publicise examples where professional challenge led to better outcomes for children to reinforce the desired culture.
- Better integration of learning regarding critical thinking and professional challenge - this should include the use of the partnership's communication networks and tools to reinforce value of respectful challenge and critical thinking.

## 5.5. Engagement of relevant agencies

Relevant agencies are those organisations and agencies whose involvement the safeguarding partners consider are required to safeguard and promote the welfare of local children. When the ESSCP published its new MASA all relevant agencies, who were previously members of the ESSCP, continued to be included as critical members in delivering a strong and effective partnership which can respond to existing and emerging needs.

Through the partnership induction programme, all relevant agencies have a clear understanding of their responsibilities in relation to safeguarding children locally, including:

- How they will coordinate with safeguarding partners to improve, implement, and monitor effectiveness of the local safeguarding arrangements (engagement in MASA)
- sharing information and data about safeguarding issues and concerns affecting the children involved in their organisation to contribute to local priorities (Pan Sussex Information Sharing Agreement)
- ensure local multi-agency safeguarding arrangements are fully understood, and rigorously applied within their organisation (section 11 self-assessment)

Examples of how the ESSCP has strengthened engagement of relevant agencies during 2024-25 includes:

## NEW! Education Safeguarding Subgroup

The ESSCP has benefited from solid engagement with education partners including independent settings, special schools, maintained settings and Elective Home Education services. To further embed this the ESSCP undertook a Safeguarding Planning Workshop for education partners in October 2024, attended by representatives from all areas of education and facilitated by the DFE National Safeguarding Education Facilitator. Following recommendations from this group, DSPs agreed the local approach to achieving the effective engagement and contribution of education providers through the initiation of an Education Safeguarding Subgroup.

The first Education Safeguarding Subgroup was held in January 2025, again facilitated by the DFE National Safeguarding Education Facilitator, to develop and agree the group's terms of reference and to start considering the priority areas to address. Education partners and DSPs are firmly committed to embracing the active role of education partners in engagement and decision making at an operational and strategic level within the partnership. This new subgroup provides a communication and engagement channel between the partnership and wider education partner networks, including local Designated Safeguarding Leads, Head Teacher forums, Governors etc.

**Co-Chairs:** Executive Primary Headteacher and Strategic Lead - Safeguarding and Emotional Wellbeing, Education Division, Children's Services Department

**Membership:** includes representatives from Early Years, Primary, Secondary, Further Education, Independent, Special, Multi Academy Trust, Alternative Provision, Governors, Lay Member, Local Authority, including: Safeguarding Education, Early Years, Elective Home Education, Virtual School for Children in Care.

**Purpose (from ToR):** *'Alongside their core purpose of teaching and learning, educational providers, from Early Years to Further Education, play a pivotal role in safeguarding and promoting the welfare of children. By uniting the collective voice of education across all settings we proactively work collaboratively to solve safeguarding challenges, ensure authentic education perspectives are heard throughout the safeguarding partnership, and actively contribute to forward thinking strategic decisions that enhance the safety and well-being of every child.'*

**Priority areas for 2025/26** were defined by the group to be aligned with Working Together to Safeguarding Children 2023 Expectations.

### NEW! Safeguarding Community Network Subgroup

WT2023 highlights that VCSE organisations play an important role in building relationships, identifying concerns, and providing direct support to children. They can often be the first trusted adult to whom a child reports abuse. Therefore, many of these organisations will have a crucial role to play in safeguarding and promoting the welfare of children.

Through further development of a recent Local Child Safeguarding Practice Review action to improve voluntary sector agencies in the multi-agency safeguarding processes, East Sussex are exploring options to collaborate with the Safeguarding Adults Board to expand the VCSE network group and develop resources in collaboration with VCSE organisations:

**Chair:** Healthwatch

**Membership:** Originally a subgroup of the Safeguarding Adults Board (SAB), the membership has been expanded to 'all age' so the subgroup will reach across both the SAB and the ESSCP. Members are from Voluntary, Community and Social Enterprise organisations.

**Purpose:** The group's terms of reference were discussed at a workshop in June 2025 and will be finalised in September 2025.

**Priority areas of work for 2025/26 include:** Embedding the voice of lived experience, including children and families, case discussions, addressing emerging risks and issues, promotion of learning from reviews and sharing of good practice.

## 6. Learning

The ESSCP is committed to creating and strengthening a learning culture across all agencies in East Sussex who work with children and young people - a culture which is open, able to challenge all partner agencies, able to identify learning, improve, and then evaluate effectiveness.

Below are examples of 'learning' within and across the ESSCP in 2024-25.

### 6.1 Learning from Rapid Reviews and Local Child Safeguarding Practice Reviews

#### Case Review Activity 2024/25

In 2024-25 the ESSCP undertook two Rapid Reviews following serious safeguarding incidents, where a child had died or been seriously injured, and where abuse or neglect was known or suspected. Neither Rapid Reviews led to Local Child Safeguarding Practice Reviews (LCSPRs) as the Case Review Group (CRG) recommendation to DSPs was that LCSPRs were unlikely to provide any significant additional learning. The Rapid Reviews had sufficiently drawn out the learning from the cases, with clear areas of multi-agency improvement and appropriate learning themes and actions provided through single agency returns.

In these two cases, learning was shared via learning briefings and two multi agency events in March 2025, alongside multi and single agency action plans monitored by CRG.

Child 4 Rapid Review	Child 5 Rapid Review
<a href="#"><u>Learning Briefing - Child 4 (esscp.org.uk)</u></a>	<a href="#"><u>Learning Briefing - Child 5 (esscp.org.uk)</u></a>
<ul style="list-style-type: none"><li>✓ Convening a multi-agency strategy meeting when significant events or new disclosures occur.</li><li>✓ Risks assessed at the pre-birth to be reviewed regularly, in particular for premature babies.</li><li>✓ Support for isolated single carers of vulnerable premature babies to transition from a highly supportive hospital environment to the home environment.</li><li>✓ Appropriate and equal consideration to be given to fathers when considering the benefits of utilising parent and baby assessment placements.</li><li>✓ Multi agency awareness and understanding of how Family and Criminal court parallel processes interplay.</li></ul>	<ul style="list-style-type: none"><li>✓ Balancing the view of the child, regarding their preference to work with a specific gender practitioner, with the professional view of continuity of case management.</li><li>✓ Professionals to ensure they have clarity on the child's ethnicity and culture, and that this is considered in their approach to practice.</li><li>✓ GP engagement and information in strategy meetings and section 47 enquiries to gain a holistic view of the child's lived experience.</li><li>✓ Moving placements in and out of county disrupted the continuity of care and relationships for child 5 impacting on her engagement and wellbeing.</li><li>✓ Convening a complex case meeting to address escalating and enduring risks where current service provisions are unable to reduce risk.</li><li>✓ Ensuring that appropriate language is used by the multi-agency system in exploitation cases</li></ul>



✓ Importance of parents/carers receiving ICON materials, and in particular appropriate ICON materials for prem babies.	to ensure victims are not recorded as putting themselves at risk through their choices and behaviours, rather than the responsibility being placed on those doing the exploiting.
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There was one additional Serious Incident Notification made in summer 2024 in relation to the death of a Looked After Child, in accordance with Working Together 2023. At postmortem the pathologist gave a natural cause of death. The CRG reviewed the available information and agreed that they were satisfied that the case did not require a Rapid Review and would be most appropriately reviewed through the statutory Child Death Review processes, which was reported to the National Panel.

## During 2024/25 the ESSCP published one LCSPR:

**Child Z** (delay in publication was due to gaining parent input into the review and criminal proceedings, with sentencing in late July 2024)

[ESSCP Child Z LCSPR Report 13.03.25](#)

[ESSCP Child Z LCSPR Partnership Response - Feb 2025](#)

[Child Z Learning Briefing 2022 \(esscp.org.uk\)](#)

### Key learning:

- ✓ The legacy of relationships characterised by domestic abuse
- ✓ Information sharing about adults who may pose risks to children
- ✓ The importance of assessing background information
- ✓ Assessing risk to children from risky adults who are not household members, but part of the child's wider network

## Unpublished LCSPRs:

Three completed LCSPRs awaiting publication due to pending family engagement and Home Office sign-off.

**Family D:** Joint LCSPR and Domestic Homicide Review (DHR). This large complex review, adhering to both LCSPR and DHR requirements, involved an extensive period of information gathering from single agencies and is working alongside a number of parallel procedures. The report is with the Home Office awaiting Quality Assurance.

**Child E:** final report anticipated August 2025 following completion of private law proceedings. Report to be shared with family prior to publication, anticipated in Autumn 2025.

**Child F:** Report complete and with family for review, anticipated publication Autumn 2025.

For all three reviews, action plans are in place and learning themes will be shared in advance of publication.

## 6.2 Learning from National Reviews

How the ESSCP responds to the learning from national reviews has become an integral part of the partnership's scrutiny programme. Generally, the ESSCP business unit and CRG are the leads to ensuring that the learning from national reviews is disseminated, that the learning and recommendations are considered in the context of safeguarding in East Sussex, and that appropriate actions are identified and taken forward. In response to national reviews published in 2024-25 the ESSCP:

- [Safeguarding children in Elective Home Education - Panel Briefing 3](#) tasked the 'education' lead in the CRG to undertake a desktop analysis of the effectiveness of local systems regarding safeguarding practice for children electively home educated, which was reviewed by CRG. Strengths and gaps were highlighted and shared with DSPs.
- [The Child Safeguarding Practice Review Panel - I wanted them all to notice](#). CRG reviewed the learning and recommendations, noting similar learning identified through the local Child E and Child F LCSPRs. The ESSCP agreed to coordinate a Pan Sussex Workshop to explore national learning, learning from local reviews, and consider a pan Sussex approach to the recommendations. The workshop was held in June 2025 with recommendations for action to be shared at the at Sussex Safeguarding Children Executive in July 2025.
- ["It's Silent": Race, racism and safeguarding children - Panel Briefing 4](#) was published in March 2025. The report was considered by CRG in May 2025 and later agreement was taken by the Sussex DSPs to take a similar approach to the Sussex response to the national panel's report on CSA. CRG have also commissioned the QA Subgroup to undertake an analysis of the impact of race, culture and ethnicity in the context of safeguarding in East Sussex.

## 6.3 Quality Assurance Audits

The QA subgroup held **three audits** during 2024-25: an audit on the quality and robustness of responses to children who present at A&E due to deliberate self-harm; and audit on intra-familial child sexual abuse, with a particular focus on testing if learning from the Child Y LCSPR (published in 2023) has been embedded in to practice; and an audit on the quality and effectiveness of s47 strategy discussions.

Learning from the audits is shared at the ESSP Steering Group and one page learning briefings are shared with the wider ESSCP network and on the ESSCP website [Quality Assurance Group - ESSCP](#). QA audit reports are routinely shared with the Learning & Development Subgroup and Local Safeguarding Children Liaison Group to ensure that learning arising from audit activity is more efficiently and effectively embedded into local training and learning activity.



Key learning across audits include:

- That there are strong systems and multi-agency working in place to deal with the immediate needs, and safeguarding concerns, of children presenting at A&E due to self-harm.
- learning points from Child Y had been successfully embedded into practice: procedures were followed; relevant agencies were invited to attend or contribute to multi-agency meetings; there was clarity in the plan regarding how the child's needs were to be addressed; and ABE interviews are appropriately documented
- The explicit reason for a child not undertaking a Health Needs Assessment should be documented. This should include how the individual's sexual health needs have been, or will be, met by other means.
- The timing of a sexual abuse incident should not prevent the Sexual Assault Referral Centre (SARC) from being involved. Regardless of whether the incident happened recently or a long time ago, a referral should still be considered.
- More social workers need to be trained to participate in Achieving Best Evidence (ABE) interviews. Currently, there are limited spaces available per year for social workers to attend ABE interview training. This is impacting on the availability of social workers to support and attend ABE interviews. From the cases audited there are examples of this impacting on the timeliness of ABE interviews and the focus on interviews being child centred.
- As a 'window on the system' there were concerns that in two-thirds of strategy meetings held, in the cases audited in the 'Regular Case File' audit, were held without input from general practice. This highlights learning for multi-agency practice regarding improved coordination and information sharing in particular from general practice.

Further details on the ESSCP QA audits in 2024/25 can be found in the **Assurance** section of this report.

## 6.4 ESSCP Training Programme

The ESSCP has continued to offer both classroom-based training courses as well as virtual sessions for multi-agency practitioners. This mixed mode of delivery is embedded within the training programme and continues to be positive, most practical, and cost effective for the growing number of pan Sussex events and in-house shorter courses.

Between 1st April 2024 and 31st March 2025, 49 training courses ran from the 'core' ESSCP programme (courses advertised via the East Sussex Learning Portal, ESLP) with 694 participants from a range of agencies.

The rate of evaluation returns from the 694 participants during 2024/25, spread over 49 courses where evaluation data is available is 69% (436 returns). The majority of participants continue to rate courses as either Excellent (66%) or Good (34%). Continued analyses of the more in-depth narrative helps the ESSCP Learning & Development Consultant to understand some of the

impact of training and where necessary to follow up with members of the training 'pool' to improve the training offer.

Five new ESSCP courses were introduced from April 2024.

- In April a new short briefing session on Harmful Sexual Behaviours was launched with support from the Education Safeguarding team, which highlighted the locally produced sexual behaviour screening resource and intervention programmes for children and young people.
- Also, in April '*Understanding Self-harm in Children and Young People and the East Sussex Toolkit*' was relaunched with support from the Mental Health Support Team, will become embedded in the ESSCP training programme.
- In July, following the relaunch of the updated Neglect Toolkit and Matrix, a new neglect training course was launched.
- In November '*Adult Mental Health and Suicide Risk Management*' was launched, which replaces the Parental Mental Health and the Impact on Children offer.
- From April 2022 the Government offered grants to Local Authorities to encourage Reducing Parental Conflict (RPC) focussed practice into local services for children and families. A rolling programme of workshops on RPC delivered to Children's Services was extended to include the wider SCP audience, and between April 2024 and March 2025, 71 people attended from across a range of agencies.

Collaborative working with Brighton & Hove and West Sussex continues with pan Sussex 'Improving Outcomes for Looked After Children', 'Suicide Prevention' and 'Safer Sleeping' training embedded into all SCP programmes. All three partnerships have reciprocal arrangements for shared learning, where certain courses are commissioned by one, but co-funded across the three. Other subjects offered on a pan Sussex basis include: Adultification, Equalities: Exploring Inclusive Practice - Racial, Ethnic and Religious Diversity, and LGBTQ+(B&H) and 'Abuse Linked to Accusations of Witchcraft and Spirit Possession'.

Pan Sussex Safeguarding Fortnight ran from the 18<sup>th</sup> to the 29<sup>th</sup> November. The ESSCP led a series of taster/Brief Bytes sessions across seven subject areas. 250 practitioners attended across a range of agencies: Education 69(28%), Health 68(27%), Children's Services 55(22%), Police 16(6%) and Other 42(17%) charities and other organisations.

The ESSCP training pool of practitioner is an exemplary committed group of people, going above and beyond their professional roles to bring a huge amount of knowledge, skill and experience to the partnership's safeguarding training courses.

**ESSCP trauma informed training multi agency training is co designed and delivered with people who have lived experience of trauma, recovery and involvement of services.**

The inclusion of lived experience in training in person, through video, research and discussion, as well as up to date theory and practice guidance about trauma informed working is important to ensure that content is relevant, informed and meaningfully supports practitioners to integrate learning from the training into their work.

It is of vital importance that the sharing of lived experience is purposeful to promote learning and development of participants and to achieve changes in practice positively. To ensure this, the emotional safety of those sharing lived experience, confidentiality and learning agreements are crucial.

**A lived experience contributor to the training shared their view:**

*'I share my experiences in the hope that it will benefit even one child, foster carer or social work professional. What a great privilege that is for me to do, it has given me understanding and gratitude for the hard life that I have lived. My trauma has become my strength. I believe through love and continued work to understand each side of this field of work, the future of Looked After Children and those affected by trauma will be better for it.'*

*I get so much from doing training work, firstly how powerful it is as a Looked After Child to see how much effort is being put into improving practice. The mistakes of the past are being learned from and that fact should be known, the voiceless are being given a voice! I am hoping that my contribution will support workers to help families and children to recovery from intergenerational trauma and to support organisations and workers to become more trauma informed.'*

*I feel very supported by the facilitator, we sometimes laugh about her mothering and fussing about me. But we are running a trauma informed training course so it is important that I am supported, my well-being has always been the main focus and I feel in control. I have done so much spiritual work (and I continue to work hard with recovery work!) to arrive at the emotional stability to be able to give what I do in this work, and I appreciate the importance of looking after myself and each other.'*

Annually, representatives from the Children in Care Council (CiCC) attend the Local Safeguarding Children Liaison Group (LSCLG) to share updates on activities they have undertaken, provide feedback from children and have an opportunity to raise issues with members of the children's workforce.

In November 2024, two representatives attended, and several areas were discussed by the group:

*Children/young people should always be asked if they would like an advocate and/or Independent Visitor, this should be encouraged by workers, even if the initial response is a no*

*Rather than just focussing on one issue, such as mental health, it is important to consider all issues and how they link*

*The importance of joint working across services and young people's negative experiences of when this doesn't happen*

*Young people want a child centred approach, with professionals passing on only relevant information to others and ensuring they chase up / follow through with what has been agreed*

The CiCC has a monthly newsletter for children in care, and CiCC members can be contacted directly by young people/children who want to comment/contribute, or via their social worker.

Other areas of work the CiCC have been involved in include:

- Improving Lives: Young People's Annual Conversation with NHS Sussex
- Junior Consultation with 7-11 year old children in care
- A National Voice
- East Sussex Youth Voice

## 7. Oversight and assurance

### 7.1 ESSCP oversight and assurance

One of the roles of the ESSCP is to ensure the effectiveness of safeguarding practice, which it does through evidence-based auditing, performance management, and self-analysis. The SCP ensures that there is continual evaluation of the quality of services being provided, as well as effective communication and joint working between all SCP partner agencies.

The **Quality Assurance (QA) Subgroup** has the lead role, on behalf of the Partnership, for monitoring and evaluating the effectiveness of the work carried out by partners. It does this through regular scrutiny of multi-agency performance data and inspection reports, and through an annual programme of thematic and regular case file audits. This subgroup is chaired by the Detective Chief Inspector of the Safeguarding Investigation Unit in Sussex Police. From September 2025 the QA subgroup will be chaired by an Independent Scrutineer.

Examples of assurance undertaken by the ESSCP during 2024-25 include:

- The Partnership had an **ESSCP Independent Chair** between April 2024 and August 2024. The function of the Independent Chair was to provide challenge and scrutiny on the effectiveness of the lead partners and other relevant agencies, via the Board and Steering Group meetings, and to also work with the lead partners to ensure the effectiveness of the safeguarding work carried out by partners. The Chair acted as a constructive critical friend to promote reflection and continuous improvement and to provide support to that improvement. This included:
  - Scrutinising the learning and action plans arising from the three rapid reviews that were conducted in early 2024-25 and endorsing the recommendations to not conduct Local Child Safeguarding Practice Reviews (LCSPRs). As part of this process they provided support and challenge to the National Safeguarding Panel on the rationale for local decision in one of the rapid reviews.
  - Reinforcing key multi-agency actions arising from LCSPRs, in particular raising concerns with agencies regarding their attendance and participation in Child Protection Conferences processes and requesting agencies consider their responsibilities.
  - Overseeing the partnership's development of independent scrutiny arrangements post the implementation of new MASA arrangements from September 2024. The scrutiny plan also provided an overview for lead partners on key areas of challenge to multi-agency working and progress with responding to national learning.
  - Escalating concerns about the long-term viability of the ESSCP budget with the Lead Safeguarding Partners.
  - Providing a bi-annual report to the Lead Safeguarding Partners on current key risks and issues to safeguarding children in East Sussex.
- In addition to the Independent Chair, the **three Lay Members** play a critical role in the partnership. The Lay Members act as further independent insight, on behalf of the public, into the work of agencies and of the partnership. As well as acting as critical friends at Board meetings, providing additional challenge and scrutiny, one Lay Member is a standing

member of the Case Review Group (CRG), and Lay Members are panel members for all LCSPRs. During 2024-25 Lay Members have also become formal members of the QA Subgroup and the newly established Education Subgroup. Their role has been critical at CRG, via the rapid review process and subsequent LCSPR process, in advocating the voice of the child.

- During 2024-25 the ESSCP established a Sussex Lay Member network with membership from the three lay members of the ESSCP and other lay members from the Brighton & Hove and West Sussex SCPs and three safeguarding adult boards. The network has provided peer support, a forum to share experiences and ideas on how to develop the lay member role, developed a consistent 'offer of support' to lay members from the safeguarding partnership business teams, and enabled better understanding of lay members roles and responsibilities.

*I have been a lay member of the ESSCP for a number of years. The Partnership continues to impress me. Professionals remain committed despite the reduction in resources. They are willing to challenge each other and collaborate well. I am a member of the Case Review Group and discussions there are open, honest and detailed which leads to relevant and comprehensive learning. This year I, and one of the Partnership Managers, took part in workshops run by Research in Practice on behalf of the National Panel to consider safeguarding practice reviews. This was a good opportunity to hear how other authorities manage the process and confirmed that East Sussex does this better than most.*

*This year saw changes to the organisation of the Partnership in response to Working Together (2023). The partnership no longer has an independent chair and so no longer has someone who can take the role of independent scrutineer. The Lay Members and Partnership Managers have been considering ways in which we could increase our role in scrutinising the work of the Partnership. We are already critical friends, and members of working groups, but are keen to expand the scope of our involvement and to focus more on representing the voices of the public, particularly those of children and young people.*

**Harriet Martin**

*I am privileged to have represented the voice of children, families, and the general public in my role as a Lay Member on the Partnership for a further year. Over the last year I have been actively involved with the Education Sub-group and have attended the Early Years Designated Safeguarding Leads (DSL) network meetings. The Education Sub-group grows in strength and already demonstrates how committed and proactive our education partners are to being an integral element of the wider partnership. The Early Years DSL network, albeit newly formed, is an excellent example of the knowledge and value that practitioners provide.*

*The increased engagement with the Voluntary, Charity and Social Enterprise organisations is another exciting development for the Partnership, and once again shows how forward thinking and progressive the Partnership is.*

**Nick Porter**



*When Working Together to Safeguard Children was published in December 2023, extensive work was undertaken to shape future partnership arrangements. The team has since worked hard to meet the requirements set out in the report.*

*Earlier this year, I was invited to join the Quality Assurance subgroup who have been involved in a range of projects - for example, in February 2024 the group undertook a 'deep dive' audit involving front line professionals working with specific children and their families. They found that Child Protection Plans were in place, they were appropriate, robust, and supported the family to reduce risk demonstrating the high standard of work undertaken across the county.*

*What makes the work of the ESSCP so effective however, is the members themselves who, coming from a range of professional backgrounds bring a high level of expertise which is generously shared at meetings to ensure that safeguarding children is explored from a range of angles. There is an emphasis on proactivity, transparency and information sharing. In addition, a range of high-level learning opportunities have been developed which allow us all to remain current and informed.*

*It has been a privilege to be a Lay Member of the ESSCP to date and I look forward to continuing to support the work of the partnership knowing the high level of commitment and professionalism that shines through at every meeting.*

**Anne Moynihan**

- In summer 2024 the ESSCP, along with Brighton & Hove SCP and West Sussex SCP, made requests to all pan-Sussex agencies to complete the updated '**section 11' self-assessment audit**. The purpose of the audit is to provide evidence of how they comply with s11, of the Children Act 2004, when carrying out their day-to-day business and provides an indication of how well organisations are working to keep children safe. Minor amendments were made to 'Standard 9' (recognition and response to risk) in the 2024 tool, in response to recent local learning from safeguarding reviews. Agencies were encouraged to be reflective and open about areas of safeguarding policy and practice that could be improved.

In spring 2025 an Independent Scrutineer, commissioned by the Sussex DSPs, held individual 'challenge' conversations with thirteen pan Sussex agencies who had completed their section 11 self-assessments. This scrutiny process included an initial review of agency's self-assessment by the Independent Scrutineer - highlighting measures where ratings might be over-optimistic, making requests for documentary evidence, identifying challenge questions for consideration - and triangulating information to responses provided in a 'staff survey' of front-line staff and managers about their perception of safeguarding practice in their organisation. This was followed up by individual conversations with agencies to review the information.

In their final report to DSPs, the Independent Scrutineer found the section 11 returns, when triangulated with challenge conversations and staff survey findings, provided DSPs with a:

- **Medium level of assurance** for the delivery of statutory duties.
- **High level of assurance** for the capacity to critically evaluate strengths and areas for improvement. A high level of assurance was observed in standards such as senior management commitment to safeguarding, the availability of clear organisational responsibilities, and effective safer recruitment practices. However, areas requiring

further improvement included the need to integrate the perspectives of children and families from strategic to the frontline.

Additional challenges were identified in supporting practitioners through reflective supervision and in understanding the impact of their decisions on children and families. The final report will be shared with DSPs in July 2025 for agreement on next steps.

- The QA subgroup held **three audits** during 2024-25:

The QA subgroup held an audit in May 2024 on the quality and robustness of safeguarding response on six cases of **children's attendance at A&E due to deliberate self-harm**, where there were known safeguarding concerns. The audit was agreed following the QA subgroup's monitoring of the attendance data on the ESSCP dashboard, noting the 34% increase over the previous year.

Of the cases audited, many of the children had attended A&E due to self-harm multiple times. Reasons for attendance included cutting to arms and legs and overdosing on insulin (as a form of self-harm). Two of the children arrived at A&E via ambulance.

Overall, the auditors were satisfied that there were strong systems in place to deal with the immediate needs of children presenting at A&E due to self-harm. The audit found that there was good working multi-agency working to respond to safeguarding concerns, particularly between ESHT, Social Care, the school and CAHMS. The audit also identified strong professional curiosity by staff in A&E, leading to timely and appropriate referrals.

Further work was identified to provide assurance that care plans are shared with relevant agencies on discharge, in particular schools and general practice, as this could not be evidenced in all cases that were audited.

It was also not clear from the audit what could have been done to prevent the young person from self-harming or if there was a more appropriate place for a child's mental health needs to be addressed. The chair recommended the audit findings were shared with the East Sussex Children and Young People Mental Health and Emotional Wellbeing Partnership Group to discuss further work required on identifying how self-harm can be prevented.

The QA audit group held an audit on six cases of **intrafamilial child sexual abuse** in December 2024. The audit theme was chosen to provide assurance that learning and recommendations highlighted in the [ESSCP Child Y Safeguarding Practice Review](#), published in 2022, had been effectively embedded into local practice. The audit focused on the following key questions:

- Were procedures followed?
- Were relevant agencies, such as SWIFT and cSARC invited to attend or contribute to multi-agency meetings?
- Was there clarity in the plan regarding how the children's needs are to be addressed?
- Was the Achieving Best Evidence (ABE) interview carefully planned and appropriately documented?



The cases selected included children aged between six and 17 years old at the time of reporting the abuse. All the cases featured multi-agency involvement, a strategy discussion, and an ABE interview had taken place. The perpetrators of abuse in the cases audited included a biological father, stepfather, a parent's ex-partner and a family friend. Many of the children had also experienced self-harm, neglect, physical abuse and parental mental health issues. Two cases were Child in Need, and one was a Looked After Child.

The audit highlighted that the learning points from Child Y had been successfully embedded into practice: in all six cases procedures were followed; relevant agencies were invited to attend or contribute to multi-agency meetings; there was clarity in the plan regarding how the child's needs were to be addressed; and in five cases the ABE interviews were carefully planned and appropriately documented

The audit identified learning around recording and follow up of health needs, when a health needs assessment was not undertaken and issues with securing ABE trained social workers. The auditors also reflected on the challenges of supporting children and families when there are lengthy police investigations, noting that in two of the six cases audited police investigations had been ongoing for over a year.

The **QA subgroup recommended** that issues raised in the audit regarding ABE interviews were escalated to delegated safeguarding partners, and to request assurance on the plan for increasing the number of social workers trained. The audit also recommended that the ESSCP closely monitor the provision for holistic health assessments in the newly commissioned SARC service (from April 2025), and that the ESSCP seek assurance on the quality and robustness of multi-agency working in cases where there are lengthy police investigations or decisions to take no further police action.

The QA subgroup held a **regular case file audit** of six recent cases where a Section 47 enquiry had been initiated and/or a Strategy Discussion had been held, in February 2025. The ESSCP try to undertake a regular case file audit once a year as a 'window on the safeguarding system'.

The cases selected were children aged 4-15 years old at the time considered in this audit. The children had experienced domestic abuse, poor parental mental health, neglect and sexual abuse. Five children were on a Child Protection plan when the cases were selected, with one case open to the children's disability service.

The audit found that in all six cases there was timely and appropriate identification of risk, good collaboration and communication between partner agencies, and effective strategy discussions and section 47 enquiries. There were examples of excellent practice in individual cases, such as persistent and creative engagement of father and child in one case, use of professional networks, and examples of innovative engagement with children, particularly those with complex needs.

As a 'window on the system' the audit group were concerned that two-thirds of strategy meetings held, in the cases audited, were held without 'input' from general practice. This highlighted learning for multi-agency practice regarding improved coordination and information sharing in particular from general practice

- The QA Subgroup reviews the ‘**ESSCP Performance Dashboard**’ on a quarterly basis. The dashboard includes 60 performance indicators which are presented by: impact of multi-agency practice; children supported by statutory services; children with family related vulnerabilities; children with health-related vulnerabilities; and children whose actions place them at risk. Indicators are reviewed by the QA subgroup and escalated to the Steering Group if required (up to September 2024). Examples of indicators focused on by the QA subgroup in 2024-25 included:
  - Continued focus on self-harm and suicide. Indicator 42 (Attendances at A&E due to deliberate self-harm) was escalated to the ESSCP Steering Group to consider the significant increase in attendances by children to East Sussex A&E departments due to deliberate self-harm. An audit was held in May 2024 to review the quality and robustness of safeguarding response to these children. Learning and recommendations from the audit were shared with the East Sussex Children and Young People Mental Health and Emotional Wellbeing Partnership Group to discuss further work required on identifying how self-harm can be prevented. Next steps were aligned to respond to the significant rise in suspected child suicides, with a multi-agency workshop held in January 2025 to identify immediate and longer-term action to reduce serious self-harm and suicide.
  - At the start of 2024-25 agreement was made with Sussex Police to expand the range of data supplied for the ESSCP dashboard. New information included more detailed breakdown of sexual offences against children (including the age of the suspected perpetrator - which has helped with the partnership’s understanding of harmful sexual behaviour); improved data on domestic abuse crimes where children are involved (previously the QA subgroup had relied on MARAC information); and more detailed information about exploitation, use of custody, and diversion activity.
  - The subgroup has closely monitored the number of children with child protection plans over the past year in light of children social care’s plans to safely reduce the numbers following the previous period of unsustainable high levels. The QA subgroup has challenged children’s social care colleagues on the robustness of plans, the impact on re-referrals, and repeat child protection plans. In addition, the QA subgroup has overseen the introduction of new performance measures regarding quoracy and participation by multi-agency partners at child protection conferences.
- The Partnership has a key role in **evaluating the effectiveness of support for looked after children and care leavers** - it does this via the annual scrutiny of the ESSCP Annual Looked After Child & Care Leaver Report, the annual Independent Reviewing Officer (IRO) report, regular monitoring of key performance information in the ESSCPs quarterly dashboard, and via the Section 11 process. In addition, one of the ESSCP Lay Members met with the Operations Manager for Looked After Children to scrutinise data on the disproportionate representation of some ethnic groups in the cohort, following presentation of the annual report at Board.
- The Partnership has a key role in **evaluating the effectiveness of early help services** - it does this via the regular monitoring of key performance information in the ESSCPs quarterly dashboard.

## 7.2 Lansdowne Secure Children's Home

Lansdowne secure children's home is within the Partnership's local area. The unit underwent an extensive review and redesign of the staffing structure during a closure period from February 2023. The home reopened in February 2024.

It is a statutory requirement of the partnership to undertake a review of the use of restraint within Lansdowne. Regulation 2 of the Children's Homes Regulations 2015 defines 'restraint' means using force or restricting liberty of movement. Therefore, a review should consider the use of physical restraint along with other practices, such as the use of 'single separation' (where children are locked into an area) and 'managing away' (locked into an area with staff).

For 2024/25 the partnership reviewed the Lansdowne Restraint Dashboard, Managing Away Report, Action Plan and the Ofsted reports for inspections undertaken in 2024/25. The Restraint Dashboard detailed the number of restraint incidents (for individuals or as a unit), the reason for the restraint, the restraint holds used, and the location and duration of the restraint. The Managing Away report detailed the number of Managing Away incidents (for individuals or as a unit) and the duration of Managed Away. Lansdowne's action planning detailed extensive actions in relation to staff training, support and wellbeing, including observational practice supervision, significant incident debriefs, reflective and trauma informed practice and through record keeping.

From the reports provided by both the unit and the external scrutiny of Ofsted, the DSPs considered the unit's approaches to managing behaviour, episodes of single separation and use of restraint. The effective relationships between staff and the children were evident, with well-informed staff able to use support strategies in response to incidents. The partnership was encouraged to see that the manager and leadership team promote learning and development of the team, supporting staff to develop and grow, which includes attendance at ESSCP training programmes.

A full Ofsted inspection was undertaken in September 2024, with a follow up monitoring visit in March 2025. The full inspection in 2024 found the secure children's home provides effective services that met the requirements for **good**. Ofsted observed:

*'Children told inspectors that they feel safe and always have someone that they can talk to if they are worried about something.'*

*Staff complete the mandatory training required by the organisation. They also receive bespoke training that is tailored to the needs of the children. Staff discuss safeguarding issues in team and one-to-one meetings. This provides opportunities for staff to discuss and reflect further about specific safeguarding issues. As a result, training is focused on care, support and the safeguarding needs of children.*

*Incidents where **physical restraint** is used are closely scrutinised to ensure that the measure was appropriate and proportionate. Children are seen by a nurse at the earliest opportunity*

*following an incident to ensure they are well supported. The manager and the leadership team scrutinise records closely and provide robust oversight. A debrief and evaluation takes place to consider how to prevent recurrence. As a result, learning and reflection ensure that staff practice is safe and that children are cared for.*

*The multidisciplinary ‘Safeguarding Huddle’ meetings provide an opportunity for leaders, managers, health team members and staff to regularly assess the care and risks that exist for each child. These discussions inform each child’s individual risk assessments and safety plans. This helps to ensure that staff are aware of each child’s vulnerabilities and what they need to do to help keep children safe. As a result, children have their individual needs met in a way that best helps to keep them and staff supporting them safe.*

***Single separation** (where children are locked in an area when they meet the legal criteria of being a significant risk to themselves or others) and **managing away** (where children are with staff but are kept apart from their peers due to risk) are used minimally and appropriately. Children receive the support and care they need from staff during and following these times. When a restriction is used, there is clear rationale for the decision-making. There is robust management oversight and regular review to ensure appropriate practice, and the least amount of time is used.*

*When safeguarding incidents or concerns occur, these are reported swiftly to the appropriate professionals, including the local authority designated officer. Records are comprehensively completed, and management oversight is robust with clear communication, expectations and learning outcomes. This helps to safeguard children and protect them from future harm.’*

The Ofsted monitoring visit in March 2025 did not identify any concerns in relation to the use of restraint within Lansdowne.

Following helpful feedback in July 2025 from Ofsted, the ESSCP will be improving its practice with regards to the review of restraint practices at Lansdowne. For 2025/26 and ongoing, the LADO will be undertaking quarterly visits to Lansdowne to review reports and recordings from incidents to determine a view of practice and safeguarding. These regular visits will be accumulated to inform a ESSCP annual review for ESSCP Independent Quality Assurance Chair and Lay Member scrutiny.

## 8. ESSCP Budget and value for money

### 8.1 Actual Income and Expenditure 2024/25:

ESSCP BUDGET REPORT 2024/25	2024/25 Expenditure
Independent Scrutiny	£12,703
Business Managers and Administrator	£112,370
Learning & Development Consultant	£64,295
Administration	£1,300
Partnership Meetings/Events and Training Programme	£9,410
QA and Data Support	£18,000
Pan Sussex Procedures	£7,707
IT Software and Hardware	£1,316
Safeguarding Practice Reviews	£18,513
<b>TOTAL EXPENDITURE</b>	<b>£245,614</b>

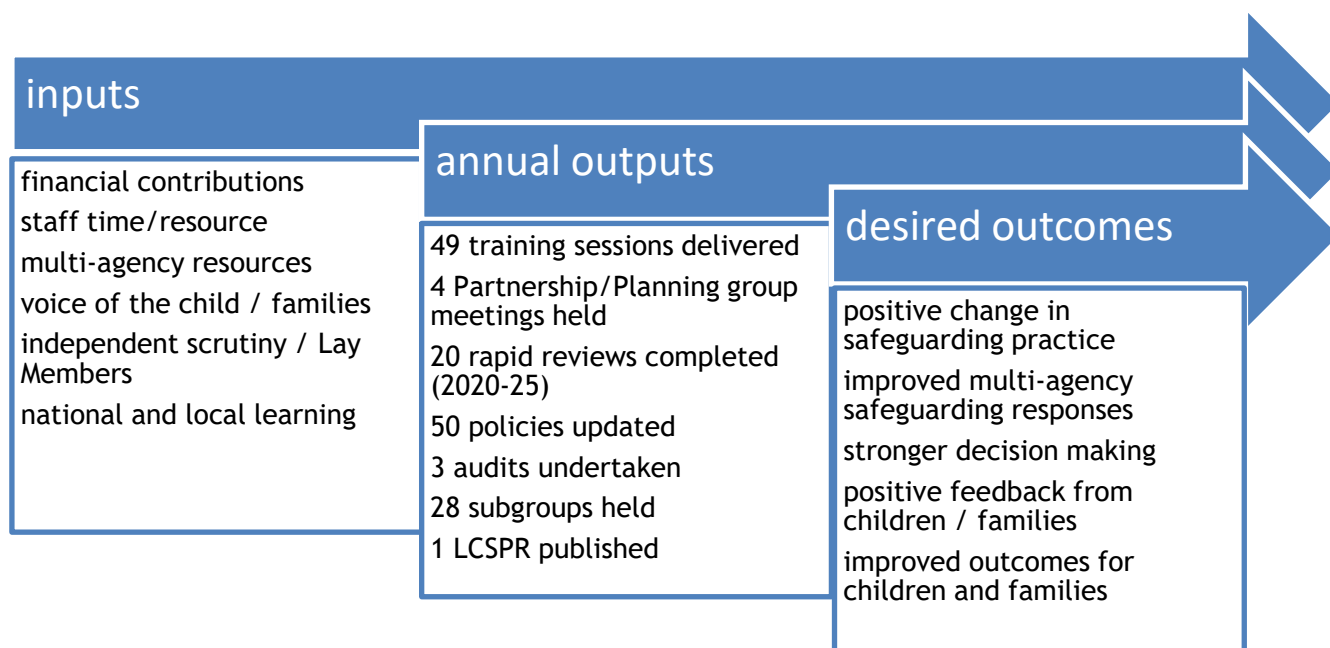
FUNDING BY SOURCE 2024/25	2024/25 Income
ESCC base budget	£139,600
ICB Sussex (NHS)	£53,987
Sussex Police	£36,750
Training income (cc3033)	£6,458
C/forward income - 23/24	£28,146
<b>TOTAL INCOME</b>	<b>£264,941</b>

<b>NET (OVER) / UNDER*</b>	<b>£19,327</b>
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\* 2024/25 confirmed underspend of £19,327. This is largely due to unspent independent scrutiny funds post the Independent Chair's resignation, as well as efficiencies with venue sourcing and administration costs.

### 8.2 Evaluating value for money

Evaluating the value for money (VfM) of the ESSCP involves assessing whether the support to partnership arrangements are effective in a way that is *economically efficient*, *efficient in delivery*, and *produces impact*. The table below details the inputs, outputs and desired outcomes for the ESSCP:



In 2025/26 the ESSCP will be undertaking a full evaluation of the partnership arrangements, which will include an element of value for money, in particular for the learning & development function. This will be fully reported in the 2025/26 Annual Report.

Prior to this, by considering East Sussex's statistical neighbours (as per the table below), it is possible to compare broad indicators of value for money:

- East Sussex Safeguarding Children Partnership spend is £2.72 per child. Amongst statistical neighbours this is mid-range, with Northumberland being the highest at £6.25 and Essex the lowest at £1.20.
- East Sussex deprivation is moderate, and the county has a higher rate of children subject to a Child Protection Plan and rate of children looked after than many statistical neighbours. This combination suggests East Sussex is not a 'high spender' in terms of safeguarding children's partnership funding compared with neighbours, but has high levels of statutory intervention.
- Serious incident notifications are mid-high per capita: SI notifications per 10k are around 1.45 for East Sussex – not the highest, but above several neighbours. This can be interpreted two ways: a greater propensity to report/notify which is positive for safeguarding culture, or a higher incidence of serious incidents. This would require further work to determine, however the conversion rate from SI's to Local Safeguarding Practice Review is considered appropriate by the National Panel review of Rapid Review outcomes.

	0-17 year old population (ONS mid-year estimates 2023)	IDACI average score in 2019	Rate of children subject to CPP per 10,000 at end of March 2024	Rate of children looked after per 10,000 at end of March 2024	Serious incident notifications in 2022-2025	SCP spend 2023-24
<b>East Sussex</b>	<b>103606</b>	<b>0.161</b>	<b>66.1</b>	<b>63.4</b>	<b>15</b>	<b>£282,251</b>
Bury	43965	0.169	74.7	59.3	8	£262,280

Dorset	66022	0.121	50.7	56.3	7	£303,140
Devon	147313	0.123	36.0	58.6	26	£280,807
Essex	322812	0.144	31.8	67.8	6	£388,544
Kent	348332	0.158	44.8	35.6	43	£430,522
Cornwall	105686	0.164	19.4	78.2	15	£278,000
Norfolk	169965	0.155	34.8	67.6	13	£516,994
Northumberland	58812	0.174	28.5	50.6	4	£367,730
West Sussex	179008	0.110	65.3	74.1	20	£344,500
Bournemouth, Christchurch and Poole	74285	0.147	36.0	73.5	6	£303,140



## 9. Appendices

### 9.A Safeguarding Context 2024-25

Impact of multi-agency working		
Family contacts (to SPOA and other excluding MASH)	↓	The total number of contacts was lower than in previous years (16,785 compared to last year figure of 17,855 and 2022-23 figure of 17,798).
Information gatherings by Multi-agency Safeguarding Hub (MASH)	↑	The number of multi-agency information gathering (MIG's) increased by 8.7% (24,676 compared to 22,699), continuing the year on year increase (between 2023-24 MIGs increased by 7%, the previous year by 8%)
Referrals to statutory social care	↓	The number of referrals to statutory social care decreased between 2024-25 and 2023-24 (4117 compared to 4400).
Privately Fostered children	↓	Following a peak of 50 in summer 2024, the number of Privately Fostered children fell to 22 at the end of 2024-25. Generally, the number of privately fostered children is lower than previous years.
Children supported by statutory services		
Children with a child protection plan	↓	The number of CP plans has steadily fallen throughout 2024-25 to a low of 614 at the end of March 2025. This figure was 11% lower than the March 2024 total of 688 plans and is the lowest monthly figure for over two years, from a peak of 766 at the end of February 2024.
Looked After Children	↑	The number of Looked After Children increased by 5% in 2024-24 compared to the previous year (690 compared to 655 across the year in 2023-24). The number peaked in October 2024 at 709, the highest figure in over two years.
Looked after Children who are Separated Migrant Children (formerly known as UASC)	↔	The number of Looked after Children who are Separated Migrant Children (formerly known as UASC) remained relatively stable across 2024-25 and to a similar level as 2023-24. The end of year figure of 71 was similar to the end of year 2024 figure of 69.
Young people at high risk of child exploitation	↓	The average number of children rated as RED within the SAFER process has remained fairly similar - there were an average number of 12 children rated 'red' in 2024-25 compared to 14 in 2023-24. Overall, the number of 'red' and 'amber' cases held at SAFER has decreased by 30% (21 at the end of 2024-25 compared to 30 in March 2024).



Sexual offences against children	N/A	There were 491 sexual offences against children recorded by Sussex Police in 2024/25: 267 where the suspect was an adult (59 rape, 208 other sexual offence); and 224 where suspect was aged 0-17 (79 rape, 145 other sexual offence).
<b>Children with family related vulnerabilities</b>		
Domestic abuse crimes where children were involved	N/A	There were a total of 2676 domestic abuse crimes recorded in East Sussex during 2024-25 year where children were involved. On average, children are involved in 44.1% of all domestic abuse crimes reported to the police.
Vulnerable young carers	↓	There were 310 children's social care assessments completed in 2023/24 where a young carer was identified as a factor, this is an decrease compared to 380 in the previous year.
Children educated at home	↓	The number of children school age children recorded as being electively home educated at the end of March 2025 is lower than the March 2024 figure (1626 compared to 1820). However, this still represents a 30% increase on the March 2023 figure of 1262. In November 2024 there was a two year high of 1958 children being electively home educated.
<b>Children with health related vulnerabilities</b>		
Children with disabilities with a Child Protection Plan	↑	At the end of March 2025 there were 31 children with disabilities with a child protection plan and increase of 47% on the previous end of year figure of 21. On average, the number of children with a CPP was 34 per month compared to 24 in 2023-24.
Children attending A&E due to self-harm	↓	739 children in 2024-25 attended A&E in East Sussex hospitals due to deliberate self-harm, a decrease from the 786 who attended in 2023-24 (however this still represents an increase from 692 in 2022/23 and 612 in 2021/22). There was a peak of 76 attendances in September 2024.
Contacts to SPOA CAMHS	↓	A total of 5566 contacts were made to the CAMHS 'front door' (SPOA) in 2024-25. This is a slight decrease from the previous year high of 5963.
<b>Children whose actions place them at risk</b>		
Missing episodes	↑	There were a total of 3065 missing episodes in 2024-25, a 29% increase on the 2023-24 figure of 2373.
Number of permanent exclusions from school	↓	There were a total of 97 permanent exclusions from school across the 2024-25 financial year, compared to 125 in the previous year. The 2024-25 figure has fallen back in line with the 2022-23 levels.

Young people entering the youth justice system	↓	79 young people entered the youth justice system for the first time in 2024-25 compared to 85 in 2023-24. The rate of FTE per 100,000 0-17-year-olds is still well below the target rate (50 per 100,000 compared to a target of 75)
Young people held overnight in Police custody	↓	There were 8 occasions of young people being held overnight in Police custody in 2024-25, slightly higher than in 2023-24, but lower than in previous years (11 in 2022/23 and 2021/22)

## 9.B: Partnership Group Membership - as at March 2025

NAME	TITLE, ORGANISATION
Carolyn Fair	Director of Children's Services, East Sussex County Council
Naomi Ellis	Deputy Chief Nursing Officer, NHS Sussex
Richard McDonagh (CHAIR)	Detective Chief Superintendent, Head of Public Protection, Sussex Police Service

Anne Moynihan	Lay Member, East Sussex SCP
Deborah Jenkin	Senior Business Administrator
Giovanna Simpson	Training & Development Consultant, East Sussex SCP
Harriet Martin	Lay Member, East Sussex SCP
Louise MacQuire-Plows	Manager, East Sussex SCP
Nick Porter	Lay Member, East Sussex SCP
Victoria Jones	Manager, East Sussex SCP

Alix Hews (AH)	Named Nurse Safeguarding Children - East Sussex, Kent Community Health NHS Foundation Trust
Alison Sheta / Stacy Pettit	SARC - Mountain Healthcare
Gail Gowland	Head of Safeguarding (Adults and Children), East Sussex Healthcare Trust
Gareth Knowles	SECamb Trust Safeguarding Lead, Clinical Supervisor
Gemma Brown	Named Nurse Safeguarding Children, East Sussex Healthcare NHS Trust
Jackie Dyer / Lynne Torpey	NHS England and NHS Improvement - South
Jo Tomlinson	Head of Safeguarding and Looked After Children, NHS Sussex
Joe Nhemachena	Deputy Director of Clinical Standards & Safeguarding, NHS Sussex
Judith Sakala	Named GP for Child Safeguarding, NHS Sussex
Michael Brown	Head of Safeguarding Children & Looked After Children, SPFT
Sally Pullen	Head Of Service, East Sussex School Health, Children's Integrated Therapies and Equipment Services Kent Community Health NHS Foundation Trust
Sergio Lopez-Gutierrez	Designated Nurse Safeguarding Children for NHS Sussex
Tracey Ward (Deputy Chair)	Designated Doctor Safeguarding Children, NHS Sussex
Vicky Ashby	General Manager, East Sussex CAMHS, Sussex Partnership NHS Foundation Trust
Vikki Carruth	Director of Nursing, East Sussex Healthcare NHS Trust

David Kemp	Head of Community Safety, East Sussex Fire & Rescue Service
Eleanor Gregory	Interim Head of East Sussex Probation Delivery Unit
Kate Adams	Service Manager, Sussex Children & Family Court Advisory Support Service CAFCASS
Kate Lawrence	Chief Executive Lotus Families East Sussex
Kyra Siddall-Ward	Executive Primary Headteacher, Cavendish Education Trust

Amanda Glover	Operations Manager, Adults Services, ESCC
Bob Bowdler, Cllr	Lead Member for Children and Families
Catherine Dooley	Senior Manager - Education Division, ESCC
Deborah Ennis	Assistant Director, Transformation and Commissioning, Children's Services
Douglas Sinclair	Head of Safeguarding and Quality Assurance, Children's Services
Emma King	Consultant, Public Health, ESCC
Justine Armstrong - Smith	Safer Communities Manager, ESCC
Kathy Marriott	Assistant Director (Early Help & Social Care), Children's Services
Magdalena Kaiser	ESCC Children's Services - Safeguarding Unit Operations Manager
Rachel Doran	Legal & Coroner Services Manager, ESCC
Sam Harman	Safeguarding Adults Board Development Manager
Star Pswarayi	Head of Safeguarding Adults, ESCC
Vicky Finnemore	Head of Specialist Services, Children's Services

Charlotte O'Callaghan	Senior Policy Officer, Wealden District Council
David Plank	Director, Child + Adult Safeguarding, Wealden District Council
Peter Hill	Senior Policy Officer, Wealden District Council, Wealden District Council
Richard Parker-Harding	Head of Environmental Health, Rother District Council
Seanne Sweaney	Community Services Lead, Lewes District & Eastbourne Borough Councils
Verna Connolly	Head of People and Business Support, Hastings Borough Council

## 9.C Links to other documents

[East Sussex Health and Wellbeing Strategy](#)

[East Sussex Children and Young Peoples Plan](#)

[Children and Young People's Trust](#)

[Sussex Police and Crime Commissioner - Police and Crime Plan 24-28](#)

[East Sussex Safer Communities Partnerships' Business Plan](#)

[East Sussex Safeguarding Adult Board Strategic Plan 2024-2027](#)

[East Sussex Youth Cabinet](#)

[West Sussex Safeguarding Children Partnership](#)

[Brighton & Hove Safeguarding Children Partnership;](#)

## 9.D Acronyms

<b>ABE</b>	Achieving Best Evidence
<b>ALWSPA</b>	Abuse Linked to Accusations of Witchcraft and Spiritual Possession
<b>AMH</b>	Adult Mental Health
<b>B&amp;H</b>	Brighton & Hove
<b>CACE</b>	Collaboration Against Child Exploitation
<b>CAFCASS</b>	Children and Family Court Advisory and Support Service
<b>CAMHS</b>	Child and Adolescent Mental Health Service
<b>CDOP</b>	Child Death Overview Panel
<b>CDRP</b>	Child Death Review Panel
<b>CME</b>	Children Missing Education
<b>CNB</b>	Child Not Brought
<b>CPP</b>	Child Protection Plan
<b>CQC</b>	Care Quality Commission
<b>CRG</b>	Case Review Subgroup
<b>CSARC</b>	Children's Sexual Assault Referral Centre
<b>CSP</b>	Community Safety Partnership
<b>CYPT</b>	Children and Young People Trust
<b>DA</b>	Domestic Abuse
<b>DAT</b>	Duty and Assessment Team
<b>DfE</b>	Department for Education
<b>DHR</b>	Domestic Homicide Review
<b>DSP</b>	Delegated Safeguarding Partner
<b>DSVA</b>	Domestic and Sexual Violence and Abuse
<b>EET</b>	Education, Employment, or Training
<b>EHE</b>	Electively Home Educated
<b>ES</b>	East Sussex
<b>ESFRS</b>	East Sussex Fire & Rescue Service
<b>ESHT</b>	East Sussex Health Trust
<b>ESSCP</b>	East Sussex Safeguarding Children's Partnership
<b>FGM</b>	Female Genital Mutilation
<b>HSB</b>	Harmful Sexual Behaviour
<b>ICB</b>	Integrated Care Board
<b>JTAI</b>	Joint Targeted Area Inspection
<b>LAC</b>	Looked After Children
<b>LADO</b>	Local Authority Designated Officer
<b>LCSPR</b>	Local Child Safeguarding Practice Reviews
<b>LGBTQ</b>	Lesbian Gay Bisexual Transgender queer
<b>LPS</b>	Liberty Protection Safeguards
<b>LSCLG</b>	Local Safeguarding Children Liaison Groups
<b>LSCP</b>	Local Safeguarding Children's Partnership
<b>LSP</b>	Lead Safeguarding Partner
<b>MACE</b>	Multi-Agency Child Exploitation Group
<b>MACS</b>	Multi-Agency Child Safeguarding
<b>MARAC</b>	Multi-Agency Risk Assessment Conference
<b>MASA</b>	Multi-Agency Safeguarding Arrangements
<b>MASH</b>	Multi-Agency Safeguarding Hub
<b>MCA</b>	Mental Capacity Assessment
<b>NAI</b>	Non Accidental Injury
<b>NPS</b>	National Probation Service
<b>NRM</b>	National Referral Mechanism
<b>PG</b>	Partnership Group
<b>PP</b>	Perplexing Presentations
<b>PSHE</b>	Personal Social Health and Economic
<b>QA</b>	Quality Assurance

<b>RPC</b>	Reducing Parental Conflict
<b>SAB</b>	Safeguarding Adults Board
<b>SAFER</b>	Situation, Assessment & Actions, Family, Expected Response, Referral & Recording
<b>SAR</b>	Safeguarding Adult Review
<b>SARC</b>	Sexual Assault Referral Centre
<b>SCARF</b>	Single Combined Agency Report Form
<b>SCP</b>	Safeguarding Children Partnership
<b>SCR</b>	Serious Case Reviews
<b>SECamb</b>	South East Coast Ambulance
<b>SEND</b>	Special Education Needs and Disabilities
<b>SEROCU</b>	Southeast Regional Organised Crime Unit
<b>SLES</b>	Standards and Learning Effectiveness Service
<b>SMART</b>	Specific, Measurable, Attainable, Relevant, and Time-based
<b>SOLAH</b>	Safer Online at Home
<b>SPFT</b>	Sussex Partnership Foundation Trust
<b>SPOA</b>	Single Point of Advice
<b>SSCE</b>	Sussex Safeguarding Children Executive
<b>STP</b>	Sustainability and Transformation Plan
<b>SUDI</b>	Sudden Unexpected Death in Infancy
<b>SWIFT</b>	Specialist Family Services
<b>TASP</b>	The Associate of Safeguarding Partners
<b>TOR</b>	Terms of Reference
<b>VCSE</b>	Voluntary Charity Social Enterprise
<b>VFM</b>	Value for money
<b>WS</b>	West Sussex
<b>YOT</b>	Youth Offending Team

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**East Sussex  
Safeguarding  
Children  
Partnership**

# Annual Report 2024-25 Executive Summary

## Introduction:

We are delighted to present the 2024-25 annual report on behalf of the three statutory partners of the East Sussex Safeguarding Children Partnership (ESSCP). The full report can be found on the partnership's website here: [ESSCP Annual Report - ESSCP](#)

We hope you find this executive summary useful in understanding the partnership's work, the challenges the children's safeguarding system faces and celebrating some of the successes. These successes are only possible through the dedication and diligence of the many people working with children, young people and families across a range of agencies.

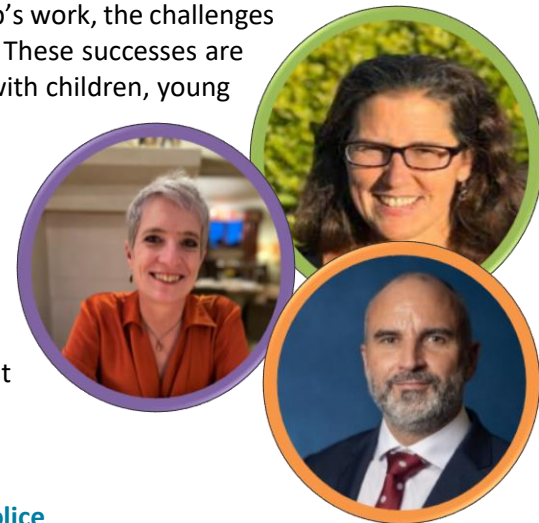
Through promoting professional curiosity across the multi-agency workforce and ensuring the lived experience of the child is recognised, we strive to keep children at the centre of our thinking and delivery at all levels.

Thank you for your ongoing support, your hard work and commitment to this vital area of work to improve the lives of our children and their families in East Sussex.

**Carolyn Fair - Director of Children's Services, East Sussex County Council**

**Richard McDonagh - Chief Superintendent, Head of Public Protection, Sussex Police**

**Naomi Ellis - Deputy Chief Nursing Officer, Director of Patient Experience & Involvement, NHS Sussex**



## Partnership Arrangements

The purpose of the partnership is to ensure that agencies work effectively together to safeguard and protect children, ensuring children receive the right help when needed by the right people. The ESSCP works closely with the safeguarding partnerships in West Sussex and Brighton & Hove to avoid duplication and share best practice.

Richard McDonagh is the ESSCP Chair. The ESSCP's core partnership functions are:

- providing **leadership** to all agencies by promoting a culture that supports critical thinking and professional challenge;
- promoting and embedding a culture of continuous **learning** which supports local services to become more reflective and implement changes to practice; and
- providing **oversight & assurance** on single agency and multi-agency safeguarding practice.

More information about what we do can be found in this [3-minute video](#)

## Key learning & Achievements 2024-25:

- Two multi-agency Rapid Reviews conducted in response to serious incidents.
- Rapid review briefings published and two 'Learning from Serious Safeguarding Incidents' sessions held.
- One LCSPR published. Three completed LCSPRs awaiting publication due to pending family engagement and Home Office sign-off.

- Launch of pan Sussex and local Multi Agency Safeguarding Arrangements, in response to Working together 2023, in September 2024.
- Significant development of multi-agency safeguarding arrangements with education and voluntary sector.

- 694 multi-agency staff attended 49 core ESSCP training courses.
- 100% of evaluations rated course as Excellent or Good.
- 250 multi-agency staff attended across 7 learning sessions during Safeguarding Fortnight in November 2024.
- 5 new courses introduced into the training offer.

Learning from case reviews

Partnership development

### ESSCP Learning & Achievements 2024-25

Training

Safeguarding projects

Business Priorities 2024/25

Case File Audits

- Task & Finish Groups / Project Activities:
  - Pan Sussex Information Sharing
  - Online Safety
  - SingleView
  - Social Care Transformation

- Safeguarding children in schools
- Safeguarding adolescents
- Embedding learning

Three multi-agency audits held:

- Quality and robustness of response to children presenting at A&E due to deliberate self-harm.
- Intra-familial child sexual abuse
- Regular case file audit of recent safeguarding cases.

## Leadership:

The ESSCP emphasised strong, collaborative leadership to deliver effective multi-agency safeguarding across agencies. Key developments in 2024-25 included:

- **Independent scrutiny:** Transition from an Independent Chair to a more flexible scrutiny model, with plans for young scrutineers to be appointed in 2025 and flexibility to conduct in depth scrutiny reviews, to strengthen focus on frontline practice and the child's voice.
- **Delivering our Strategic priorities (2023–26):** Safeguarding in education (including strengthening focus on children not in regular school attendance, establishing an Education Subgroup, and funding a Theatre in Education programme focusing on healthy relationships, harmful sexual behaviours, and online safety); safeguarding adolescents (including tackling exploitation and serious youth violence, preventing self-harm and suicide, and safe transition to adulthood); and embedding learning from audits and reviews (including a focus on safeguarding infants).
- **Escalating and addressing risks and issues:** Ongoing oversight of budget pressures, service capacity issues, and the police "SIGNS" process to improve information sharing.
- **Culture of critical thinking and professional challenge:** Leaders promoted critical thinking and visible senior management involvement in complex cases, while acknowledging that professional curiosity and inter-agency challenge still require strengthening
- **Engagement of relevant stakeholders:** Creating a new Education Subgroup to ensure that education partners are fully engaged and contributing to safeguarding developments; joining the adult safeguarding board to expand the Safeguarding Community Network to include VCSE groups working with children and families.

## Learning:

The Partnership is committed to creating and promoting a learning culture across all agencies, so that professionals across all levels are able to learn, improve, challenge each other, and evaluate our effectiveness. Activity in 2024-25 included:

- **Undertaking two rapid reviews** following serious safeguarding incidents.

Child 4 Rapid Review	Child 5 Rapid Review
<a href="https://www.esscp.org.uk/learning-briefing-child-4">Learning Briefing - Child 4 (esscp.org.uk)</a> <ul style="list-style-type: none"> <li>✓ Convening a multi-agency strategy meeting when significant events or new disclosures occur.</li> <li>✓ Risks assessed at the pre-birth to be reviewed regularly, in particular for premature babies.</li> <li>✓ Support for isolated single carers of vulnerable premature babies to transition from a highly supportive hospital environment to the home environment.</li> <li>✓ Appropriate and equal consideration to be given to fathers when considering the benefits of utilising parent and baby assessment placements.</li> <li>✓ Multi agency awareness and understanding of how Family and Criminal court parallel processes interplay.</li> <li>✓ Importance of parents/carers receiving ICON materials, and in particular appropriate ICON materials for prem babies.</li> </ul>	<a href="https://www.esscp.org.uk/learning-briefing-child-5">Learning Briefing - Child 5 (esscp.org.uk)</a> <ul style="list-style-type: none"> <li>✓ Professionals to ensure they have clarity on the child's ethnicity and culture, and that this is considered in their approach to practice.</li> <li>✓ GP engagement in strategy meetings and section 47 enquiries to gain a holistic view of the child's lived experience.</li> <li>✓ Convening a complex case meeting to address escalating and enduring risks where current service provisions are unable to reduce risk.</li> <li>✓ Ensuring that appropriate language is used by the multi-agency system in exploitation cases to ensure victims are not recorded as putting themselves at risk through their choices and behaviours, rather than the responsibility being placed on those doing the exploiting.</li> </ul>

- **Publishing the Child Z safeguarding practice review:** <https://www.esscp.org.uk/wp-content/uploads/2025/03/ESSCP-Child-Z-LCSPR-Report-FINAL-13.03.25.docx>

- **Undertaking three audits** on the quality and robustness of responses to children who present at A&E due to deliberate self-harm; intra-familial child sexual abuse, with a particular focus on testing if learning from the Child Y LCSPP (published in 2023) had been embedded into practice; and an audit on the quality and effectiveness of s47 strategy discussions. A preventing suicide and self-harm workshop in December 2024 produced six recommendations, including system-wide responses, peer support, curriculum development, and research into online harms.
- **Training and workforce development:** 694 staff attended 49 courses, with 100% of evaluations rating the course excellent or good; five new courses were added to the ESSCP programme, including a revised 'Neglect' training course, harmful sexual behaviours, and adult mental health and suicide risk management. The ESSCP 'trauma informed' training was co-designed and delivered with people who have lived experience of trauma, recovery and involvement of services.

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## Oversight & Assurance:

The ESSCP continued to scrutinise the effectiveness of child protection and safeguarding practice through evidence-based auditing, performance management and independent challenge. Key assurance mechanisms in 2024-25 included:

- **Use of an Independent Chair and Lay Members** to act as 'critical friends' and provide independent challenge and scrutiny of the work of the partnership and agency practice.
- **The Section 11 self-assessment** conducted in summer 2024 provided evidence of how well agencies keep children safe. An independent scrutineer, who held 'challenge conversations' with agencies on their return provided a high level of assurance for the capacity of agencies to critically evaluate strengths and areas for improvements. A high level of assurance was observed in standards such as senior management commitment to safeguarding. However, areas requiring further improvement included the need to integrate the perspectives of children and families better in agency's strategic decision making.
- The **Quality Assurance (QA) Subgroup** held three audits of practice regarding the response to vulnerable children who present at A&E due to deliberate self-harm, how agencies work together to support a child and family where sexual abuse is reported, and an audit of six random safeguarding cases to provide a 'window on the safeguarding system'. The QA subgroup also scrutinise performance data and other safeguarding reports.

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## Useful resources:

- The East Sussex Safeguarding Children Partnership (ESSCP) provides a thriving training programme with a wide range of courses to ensure professionals who work with children and families stay up-to-date with current local and national safeguarding practice. And from September 2025 all our training is free to attend! To see the full range of courses go to the East Sussex Learning Portal: [East Sussex CC: Log in to the site](#)
- When was the last time you used the Pan Sussex Child Protection and Procedures Manual? [Contents – Sussex Safeguarding and Child Protection Policy and Procedures Resource](#)
- All of our learning briefings following rapid reviews and safeguarding practice reviews can be found on our website here: [Safeguarding Practice Reviews \(previously Serious Case Reviews\) - ESSCP](#)

<b>Report to:</b>	<b>People Committee</b>
<b>Date of meeting:</b>	<b>20 November 2025</b>
<b>By:</b>	<b>Director of Children's Services</b>
<b>Title:</b>	<b>Ofsted Focused Visit – July 2025</b>
<b>Purpose:</b>	<b>To inform the Committee of the outcome of the recent Ofsted Focused Visit of East Sussex Children's Services</b>

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## **RECOMMENDATIONS**

**People Committee is recommended to consider and comment on the findings of the Ofsted Focused Visit which were published on 1 September 2025.**

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### **1 Background**

1.1 Ofsted undertook a Focused Inspection of the East Sussex Children's Services 23 -31 (on-site 30-31) July 2025. The purpose of this type of inspection is to evaluate an aspect of service, a theme, or the experiences of a cohort of children. For this inspection visit, the theme was **Children in need or subject to a protection plan**, covering:

- thresholds
- step-up/step-down between children in need and child protection
- children on the edge of care
- children subject to a letter before proceedings and the quality and impact of pre-proceedings interventions, such as family group decision-making meetings
- children in need at risk of family breakdown
- the quality of decisions about entering care
- protection of disabled children

1.2 This visit forms part of the inspection of local authority children's services (ILACS) framework. Our last ILACS was December 2023, where we achieved the overall rating of 'good'.

1.3 Focused visits usually occur between standard and short inspections. ESCC had not had a focused visit within this framework, neither following the ILACS in 2018 nor the ILACS in 2023.

### **2 Supporting information**

2.1 The report, published on 1 September 2025, can be found at appendix A.

2.2 This type of visit does not provide an outcome grading but instead sets out key findings within the area of focus or theme, and any associated recommendations.

2.3 The response letter highlights the following key findings:

*Children in need in East Sussex, and those who are the subject of a child protection plan, are receiving services that make a positive difference for them and whose effectiveness is being continually developed.*

*The senior leadership team, with strong corporate support, continues to invest in services for vulnerable children. Leaders have continuously developed and refined services to ensure they have a positive impact on children's lives.*

*There is a strong focus on providing integrated, multidisciplinary support to children and families. This approach ensures that children and families benefit from consistent, high-quality practice that supports their progress and improves their lives.*

*There is relentless focus on supporting a stable and committed workforce, enabling staff to develop their skills and feel valued within the council. Leaders are actively creating the right conditions to strengthen social work practice and improve the quality of services for children and families.*

2.4 Ofsted also recognised the work to support many children to remain at home through our connected families approach:

*Children on the edge of care but not receiving support through the pre-proceedings process can also benefit from exemplary and transformational support from an integrated multidisciplinary team of social workers, connected coaches and therapists. As a result, many children are supported to remain living at home with their families.*

2.5 The visit and the subsequent response letter were resoundingly positive, including the encouraging recognition of leadership and of ESCC as a reflective and improvement driven local authority:

*Leaders have a clear understanding of their strengths and areas for development. The local authority's self-evaluation is reflective and demonstrates a commitment to learning, developing social work practice, and responding to areas where development is needed. This understanding has been used by the Director of Children's Services and her wider leadership team to drive ongoing improvement in the quality and impact of services for children.*

2.6 We have received one recommendation for improvement:

*The timeliness with which child protection strategy meetings are held, as this is not consistently timely for all children (outcome 3, national framework).*

2.5 The findings recognise, however, that this was associated to a small number of children and, where risks are urgent, the holding of strategy meetings is consistently prioritised. Also noted in the response was 'once held, child protection strategy meetings are attended by the relevant professionals, who appropriately consider the level of risk and the impact on the children involved. There is timely progression to child protection conferences when required'.

### **3 Conclusion and recommendations**

3.1 East Sussex has maintained a focus on the key priority outcome of keeping vulnerable people safe. The response letter recognises the improvements made following the last ILACS in 2023 in relation to the Public Law Outline, private fostering arrangements and neglect.

3.4 People Committee is asked to consider and comment on the contents of the inspection report and note that the areas of improvement set out in the 2023 ILACS have been addressed and recognised by Ofsted. It should be noted that the findings of this visit will be considered when

planning the next inspection. This is likely to be an ILACS later next year (in line with the three-year cycle for this Ofsted framework).

**Carolyn Fair**

Director of Children's Services

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**APPENDICES**

Appendix A: Ofsted report for the Focused visit to East Sussex children's services

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1 September 2025

Carolyn Fair  
Director of Children's Services  
St Anne's Crescent  
Lewes  
BN7 1UE

Dear Ms Fair

### **Focused visit to East Sussex children's services**

This letter summarises the findings of the focused visit to East Sussex children's services on 30 to 31 July 2025. His Majesty's Inspectors for this visit were Rodica Cobarzan, Steve Bailey and Zafer Yilkan.

Inspectors looked at the local authority's arrangements for children in need and child protection planning.

This visit was carried out in line with the inspection of local authority children's services (ILACS) framework.

### **Headline findings**

Children in need in East Sussex, and those who are the subject of a child protection plan, are receiving services that make a positive difference for them and whose effectiveness is being continually developed.

The senior leadership team, with strong corporate support, continues to invest in services for vulnerable children. Leaders have continuously developed and refined services to ensure they have a positive impact on children's lives.

There is a strong focus on providing integrated, multidisciplinary support to children and families. This approach ensures that children and families benefit from consistent, high-quality practice that supports their progress and improves their lives.

There is relentless focus on supporting a stable and committed workforce, enabling staff to develop their skills and feel valued within the council. Leaders are actively creating the right conditions to strengthen social work practice and improve the quality of services for children and families.

### **What needs to improve in this area of social work practice?**

- The timeliness with which child protection strategy meetings are held, as this is not consistently timely for all children (outcome 3, national framework).

## **Main findings**

Children and families receive support and intervention at the appropriate level for their needs. Children benefit from ongoing assessments and interventions that are strengthened by a multi-agency approach, particularly through the involvement of specialist staff who work with adults and are focused on domestic abuse, mental health or substance misuse and family group conferences. This approach helps improve children and families' circumstances and reduce risks.

When children's circumstances do not improve, and risks increase, appropriate action is taken promptly for most children to protect them and prevent harm.

A small number of children experience delays when a child protection strategy meeting is required. However, when risks are urgent, the holding of strategy meetings is consistently prioritised. As a result, these few children do not benefit at the earliest opportunity from plans created by a multi-agency network to reduce risk while the investigation is ongoing. Once held, child protection strategy meetings are attended by the relevant professionals, who appropriately consider the level of risk and the impact on the children involved. There is timely progression to child protection conferences when required.

Children's plans are proportionate to their identified needs and provide clear information on how children and their families will be helped. Most plans have specific measurable timescales. Safety planning is proportionate, realistic and well recorded. Plans are created in collaboration with families and professionals, and build on the strengths and resources within the family's network and the wider community.

Meetings such as child in need meetings, core groups and child protection conferences are held regularly and well attended by key partner agencies and family members. These meetings support effective information-sharing and allow plans to be adapted in response to the families' changing needs. Child protection chairs provide effective oversight of plans through midway reviews. Minutes of meetings are clear. They have a strong child focus, while remaining sensitive towards parents.

Social workers build meaningful and trusting relationships with children and their families. The local authority's chosen model of practice is well embedded, with social workers consistently delivering thoughtful, creative and kind support. Visits to children are tailored to their individual needs and often take place more frequently than the statutory timescales.

Direct work with children informs their plans and reviews well, and is supported by a wide range of tools and observations that help to capture and understand children's lived experiences. This work is further strengthened by the involvement of connected family intervention practitioners and connected coaches, Swift and other adult-facing

workers who, together, form a strong network of support that delivers life-changing work for children and families.

Children's social workers involve family members from the earliest stages of interventions, even before the formal family group conferences take place. They support everyone involved to contribute to sustainable changes that the wider network is working on achieving together.

When the support provided to children by a child protection plan is not sufficient to safeguard them, there is timely escalation into the pre-proceedings stage of the Public Law Outline. This is an area of practice that has improved since the last inspection. Letters before proceedings are used appropriately to help parents or carers to understand the concerns and what actions need to be taken. There is effective oversight of children's welfare and the difference that interventions are making through the process. Families are offered an increased level of support and services from a multidisciplinary team. Kinship assessments are enabling an increasing number of children to remain safely within their family network.

Children on the edge of care but not receiving support through the pre-proceedings process can also benefit from exemplary and transformational support from an integrated multidisciplinary team of social workers, connected coaches and therapists. As a result, many children are supported to remain living at home with their families.

The local authority response to children living in private fostering arrangements has improved since the last inspection. All children now receive timely visits from social workers and assessments are completed promptly to support with decisions about these arrangements.

Social workers consistently use a neglect toolkit to better understand the impact of neglect on children and to help to ensure that support and decision-making take into account and are focused on children's lived experience. Well-co-ordinated, multi-faceted help is provided promptly, with its impact kept under regular review. Social workers remain curious about the underlying needs of parents as causal factors, when there are concerns about neglect. They build strong relationships that allow them to revisit difficult or sensitive conversations, ensuring that interventions are best targeted to promote sustainable change. For a very small number of children, interventions are less timely, and the cycle of neglect is repeated before decisive action is taken.

Social workers in East Sussex generally receive timely and appropriate supervision, although there is some inconsistency in the quality of recording. Social workers report that supervision provides valuable support and opportunities to reflect on practice. In most circumstances, records capture the necessary information to support families' progress. However, actions set in supervision are not consistently

reviewed, which limits the ability of managers and staff to effectively evaluate progress made.

The strong and comprehensive quality assurance framework is supported by a wide range of audits, including monthly systemic, thematic and multi-agency audits. These provide valuable insights that contribute to the local authority's continuous improvement plan. Leaders are aware of areas for development, including the need for greater consistency in the incorporation of feedback from children and families, as well as in how monthly audits capture the quality and impact of direct practice.

Alongside qualitative information to understand and strengthen practice, leaders are making good use of quantitative information. While existing performance management systems are used well, they rely heavily on the manual extraction of data and data analysis which is resource intensive, and does not support managers and leaders as well as they might and could act as a brake on continued progress.

Leaders have a clear understanding of their strengths and areas for development. The local authority's self-evaluation is reflective and demonstrates a commitment to learning, developing social work practice, and responding to areas where development is needed. This understanding has been used by the Director of Children's Services and her wider leadership team to drive ongoing improvement in the quality and impact of services for children.

Ofsted will take the findings from this focused visit into account when planning the next inspection or visit.

Yours sincerely

Rodica Cobarzan  
**His Majesty's Inspector**

<b>Report to:</b>	<b>People Scrutiny Committee</b>
<b>Date of meeting:</b>	<b>20 November 2025</b>
<b>By:</b>	<b>Deputy Chief Executive</b>
<b>Title:</b>	<b>People Scrutiny Committee Work Programme</b>
<b>Purpose:</b>	<b>To review and discuss the People Scrutiny Committee's future work programme</b>

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**RECOMMENDATIONS:** The Committee is recommended to:

- 1) review and agree the latest work programme set out at Appendix A to ensure it reflects the correct focus of the committee including in relation to its role in the ongoing RPPR process;
  - 2) accept the recommendations of the recent Scoping Board to progress with a scrutiny review of Personal Transport Budgets and Independent Travel Training (as set out at paragraphs 2.5-2.7) and agree the proposed Terms of Reference as set out at Appendix B (*to follow*); and
  - 3) review upcoming items on East Sussex County Council's Forward Plan as set out at Appendix C 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.

1.3 In setting and reviewing the work programme, Members should also consider the committee's input into the Reconciling Policy, Performance and Resources (RPPR) process and identify any information needed to provide effective challenge on key issues and areas of work impacting on the Council's future planning.

## **2. Supporting information**

### ***Work programme***

2.1 The work programme was reviewed by the Committee at its work planning awayday on 20 October, where it was agreed that input into local responses to special educational needs and disabilities (SEND) pressures, as well as upcoming national SEND reforms, should remain a key focus of the Committee, and that this should be explored through the Children's Services Reforms Reference Group. The Committee also agreed to scrutinise the Adult Social Care and Health's (ASCH) response to the recent Care Quality Commission report as well as progress against its action plan.

2.2 The Committee agreed to add the following items to the work programme:

- Children's Mental Health support, including its role in attendance
- The Carers Partnership Plan and support for carers

2.3 These changes are reflected in the latest draft work programme attached at **Appendix A**. The Committee is asked to review, discuss any further amendments to, and agree the latest work programme.

2.4 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***

### Home to school transport

2.5 A further scoping board took place in October which considered updates from officers on Home to School Transport demand and cost pressures; programmes of work underway; and national policy updates, including awaited SEND reforms which are anticipated to have significant impacts on SEND policy. The Board agreed that in light of pending national reforms, a broad review of Home to School Transport would be unfeasible, however there was value in conducting a focused scrutiny review on local cost avoidance measures including use of Personal Transport Budgets and Independent Travel Training. The Scoping Board has recommended the Committee should proceed with a scrutiny review to consider how the Council can increase the uptake of Personal Transport Budgets and Independent Travel Training, aiming to identify barriers to uptake and support increased engagement.

2.6 It is recommended that the Committee undertakes a scrutiny review of this area with the aim of reporting to the Committee in March 2026. The proposed Terms of Reference are attached at **Appendix B** (*to follow*) for the Committee's approval.

2.7 The Committee is also asked to agree the membership and Chair of this Review Board.

## ***Reference Groups***

### Health and Social Care Integration Programme

2.8 The Group last met on 6 October 2025 to consider quarterly progress on the Shared Delivery Plan. The Group also received an update on ongoing reforms to Integrated Care Boards and the wider NHS, discussing potential impacts for East Sussex. The Group will hold further meetings aligned to key milestones in the integration programme.

### ***Briefings and training***

2.9 As part of its ongoing development, the Committee used part of its annual awayday to review its use of pre-meets and questioning strategies to ensure effective questioning and impactful committee meetings.

2.10 Upcoming items on the Member Training Programme relevant to the People Committee are highlighted on the work programme. As part of ongoing development, Members are invited to consider any other topics of interest for training to support their role on the committee.

### ***Forward Plan***

2.11 A copy of the Council's Forward Plan of executive decisions for the period 1 November to 28 February 2026 is included at **Appendix C**. 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, including its input into the RPPR process, is regularly reviewing the 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**

**Deputy Chief Executive**

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## People Scrutiny Committee - Work Programme

Current Scrutiny Reviews		
Title of Review	Detail	Proposed Completion Date
Initial Scoping Reviews		
Subject area for initial scoping	Detail	Proposed Dates
Home to School Transport	<p>At its 2024 away day the Committee discussed the challenges in transport for care and home to school transport and agreed that this, in collaboration with Children's Services and Adult Social Care and Health, could be a potential topic for a future scrutiny review.</p> <p>An initial scoping board was held in May 2025 where Members considered current statutory duties around transport in both adult social care and education; cost pressures; and programmes of work, planned and underway, to address these.</p> <p>In relation to ASCH transport, the Board agreed that it was not currently the right time for a scrutiny review into this area, due to work in progress, but that potential upcoming changes to transport policy in ASCH would be brought to the Committee when appropriate.</p> <p>The Board was keen to scrutinise areas in Home to School Transport and agreed that a rapid review in the autumn into some specific aspects could add value. A further scoping board took place in October 2025 which considered the current pressures, costs and statutory responsibilities related to Home to School Transport; cost avoidance measures in place to mitigate these; and national developments, including anticipated significant reforms in the awaited Schools White Paper. The board agreed that in light of pending national reforms, a broad review of Home to School Transport would be unfeasible, however there was value in conducting a focused scrutiny review on Personal Transport Budgets and Independent Travel Training, aiming to identify barriers to uptake and explore supporting increased engagement.</p> <p>Membership of Scoping Board: Cllrs Belsey, Cross, Howell and John Hayling (Parent Governor Representative). Review Board Membership TBC.</p>	To report to March 2026 Committee

## Suggested Potential Future Scrutiny Review Topics

Suggested Topic	Detail
Children's Mental Health Support	At its 2025 away day the Committee discussed increasing demand for Children's services due to parental and children's mental health needs and agreed to include children's mental health support, including its role in school attendance, to its work programme as a potential topic for a scrutiny review.
Carers Partnership Plan	<p>At its 2024 away day the Committee agreed to recommend that a report on the progress of the Carers Partnership Plan be brought to the Committee and that it may wish to consider this topic for a future scrutiny review.</p> <p>The Committee discussed this again at its 2025 awayday, noting findings in the recent CQC assessment report that the plan had not been published at the time of writing, and agreed that although the Carers Partnership Plan had now been published, there was a role for scrutiny in monitoring the implementation of this.</p>

## Scrutiny Reference Groups

Reference Group Title	Subject area	Meeting Dates
Children's Services Reforms	<p>The Committee agreed at its March 2025 meeting to convert the existing Prevention in Children's Services Reference Group and the Attendance Reference Group into a single Reference Group focused on national reforms relating to Children's Services, with a particular focus on the Children's Wellbeing and Schools Bill. The Reference Group will consider the impact of these reforms on ESCC and scrutinise the Department's response to these. The Committee agreed to look at the recruitment of foster carers as part of this work.</p> <p>The Group met in June 2025 and received a presentation on key reforms in children's social care and the department's work in response to these, including the establishment of the Transformation Board. The Group agreed that the next meeting would focus on the expected SEND White Paper.</p> <p>At its 2025 awayday, the committee agreed to hold further meetings to focus on SEND pressures and reform.</p> <p>Membership of the Reference Group: Cllrs Belsey, Cross, Field, Geary and Howell and John Hayling (Parent Governor Representative)</p>	8 December 2025
CQC Reference Group	<p>The Committee agreed at its 2023 awayday to establish a Reference Group to support ASCH with the upcoming CQC inspection and LGA Peer Review.</p> <p>The Reference Group last met on 17 June 2024 and received a presentation from the Department on findings from the recent LGA Peer Review and the Department's response to these findings, including the development of an ASCH Departmental</p>	January 2026

	<p>Priority Action Plan. The Group welcomed the positive findings from the LGA report, discussed some of the areas for consideration, and agreed to continue to provide scrutiny support to the Department in its preparations for the CQC assessment. ASCH spokespeople attended additional briefing sessions ahead of the CQC visit.</p> <p>At the Committee's 2025 awayday, it was agreed that the Group would explore areas identified for improvement by the CQC, including data sharing amongst partners.</p> <p>The next meeting is planned for January 2026 and will consider the outcome of the assessment and progress on the Departmental Priority Action Plan.</p> <p>Membership of the Reference Group: Councillors Cross, Geary (Chair), Howell and Webb.</p>	
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 reviews HASCIP progress reports provided to the Health and Wellbeing Board and meets on an ad hoc basis as required to consider issues arising in more detail.</p> <p>The Group last met on 6 October 2025 to consider quarterly progress on the Shared Delivery Plan, focusing on Integrated Community Teams, hospital discharge, and the role of the Health and Wellbeing Board. The Group also received an update on ongoing reforms to Integrated Care Boards and the wider NHS, discussing potential impacts for East Sussex.</p> <p>Membership of the group: Councillors Belsey, Clark, Geary (Chair) Howell and Webb.</p>	TBC
Reconciling Policy, Performance and Resources (RPPR) Board	RPPR Board meets 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: 11 December 2025
<b>Reports for Information</b>		
<b>Subject Area</b>	<b>Detail</b>	<b>Proposed Date</b>
Climate Change Health Impact Assessment	For the Committee to receive the final Climate Change Health Impact Assessment.	March 2026
<b>Training and Development</b>		
<b>Title of Training/Briefing</b>	<b>Detail</b>	<b>Proposed Date</b>

Carers Partnership Plan	To brief members on the Carers Partnership Plan as this was identified as an area of interest for a potential topic for a future review.	TBC
Schools White Paper	To receive a briefing on the Schools White Paper to develop Member's understanding of key reforms and implications on local services.	TBC (depending on publication of White Paper)
Relevant upcoming Member Training Programme items (open to all Members)	<ul style="list-style-type: none"> <li>- SEND and mainstream Home to School Transport</li> <li>- Mental Health and Emotional Wellbeing for Children and young people</li> </ul>	19 November 25 26 November 25
<b>Future Committee Agenda Items</b>		<b>Author</b>
<b>12 March 2026</b>		
East Sussex Education Attainment and Performance	To update the Committee on the education attainment results for the 2023/24 academic year.	Director of Children's Services
Standing Advisory Council for Religious Education (SACRE) Annual Report	To update the Committee on the work of SACRE.	Roy Galley, Chairman of SACRE / Director of Children's Services
SEND update	To update the Committee on progress on the SEND action plan; SEND White Paper and any local implications/programmes of work.	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.	Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To continue the Committee's work on the RPPR process for 2025/26 financial year.	Chief Executive
Healthy Ageing Scrutiny Review	12 month monitoring report on progress with the Review's recommendations.	Director of Adult Social Care and Health
<b>13 July 2026</b>		
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.	Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To continue the Committee's work on the RPPR process for 2025/26 financial year.	Chief Executive

<b>21 September 2026</b>		
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.	Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To continue the Committee's work on the RPPR process for 2025/26 financial year.	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 2024/25 and the priorities and issues for 2026/27 that will be highlighted in the Partnership Business Plan.	Director of Adult Social Care and Health
<b>23 November 2026</b>		
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.	Senior Policy and Scrutiny Adviser
Reconciling Policy, Performance and Resources (RPPR)	To continue the Committee's work on the RPPR process for 2025/26 financial year.	Chief Executive
East Sussex Safeguarding Children Partnership (ESSCP) Annual Report	Presentation of the annual report of the East Sussex Safeguarding Children Partnership.	Independent Chair, East Sussex Safeguarding Children Partnership

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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:

- 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 Hannah Matthews at County Hall, St Anne's Crescent, Lewes, BN7 1UE, or telephone 01273 335138 or send an e-mail to [hannah.matthews@eastsussex.gov.uk](mailto:hannah.matthews@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 335089.

**FORWARD PLAN – EXECUTIVE DECISIONS (including Key Decisions) – 1 November 2025 to 28 February 2026**

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 Penny di Cara – 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

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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
3 Nov 2025	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Admission arrangements for East Sussex schools 2027-28- permission to consult To seek Lead Member approval to consult on the proposed admission arrangements for Community and Voluntary Controlled schools for the 2027-28 academic year.	<b>KD</b>	Public consultation to be published on website.	Report, other documents may also be submitted	Jo Miles 01273 481911
10 Nov 2025	Lead Member for Transport and Environment	Proposed relocation of Hastings Register Office To consider the proposal to relocate the Hastings Register Office for births, deaths, and marriages.			Report, other documents may also be submitted	Nick Skelton 01273 482994



10 Nov 2025	Lead Member for Transport and Environment	Hastings Green Connections Experimental Traffic Regulation Orders Decision as to whether Hastings Green Connections can advertise experimental traffic orders to trial vehicle restrictions in the town centre.			Report, other documents may also be submitted	Ellie McDaniel 01273 335464
10 Nov 2025	Lead Member for Transport and Environment	Installation of Fire Suppression Systems at Waste Transfer Stations To seek Lead Member approval to fund the installation of fire suppression systems at Maresfield and Pebsham waste transfer stations. This is to reduce the likelihood of a fire causing damage and disruption at both facilities, and reduce the consequent impact that the loss of either facility would have on waste collection and disposal services in East Sussex.	<b>P KD</b>		Report, other documents may also be submitted	Justin Foster 01273 335805
11 Nov 2025	Cabinet	RPPR Update - 2026/27 next steps and Medium Term Financial Plan To consider an update on the reconciling policy, performance and resources (RPPR) process for 2026/27, the next steps and the medium term financial plan.	<b>KD</b>		Report, other documents may also be submitted	Victoria Beard 07894 708914
11 Nov 2025	Cabinet	Ofsted Focused Visit Inspection report Cabinet will be asked to note the findings of the Ofsted Focused Visit which took place 23 – 31 July 2025, which was published 1 September 2025.			Report, other documents may also be submitted	Michelle Ingham 01273 482550

<p>28 Nov 2025</p>	<p>Lead Member for Adult Social Care and Health</p>	<p>Proposal to introduce admin fees for adults who fully fund care and support arranged by East Sussex County Council To consider the outcome of the public consultation on the proposed implementation of admin fees for adults who fully fund their care. This would apply to adults who have been financially assessed as having sufficient capital to be able to pay for their care themselves, under section 17 of the Care Act, and have requested that ESCC set up care on their behalf. The proposed fees would offset set-up costs and invoicing charges that the Council incurs when setting up this care.</p>	<p><b>KD</b></p>	<p>A public consultation will be undertaken for this proposal (running from May-July). The 2400 individuals who could be impacted were contacted directly. The survey is available publicly online and will be promoted through local networks and the council social media channels. Feedback from this consultation will be used to inform the final proposal. This proposal has the potential to impact individuals across all wards, as adults who fully fund their care live countywide.</p>	<p>Report, other documents may also be submitted</p>	<p>Ben Baker, Sonny Butler 01273 482830</p>
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November 2025	Director of Communities, Economy and Transport	Award of construction contract for the Exceat Bridge replacement scheme Following the procurement process under the Hampshire Gen5 framework, which allowed 6 suppliers to submit bids for the construction of the new bridge, the Exceat Bridge Replacement Project Board will review the bid evaluations and provide a recommendation to the Director of Communities, Economy, and Transport to make the final contract award decision.	<b>P KD</b>		Report, other documents may also be submitted	Karl Taylor 01273 482207
November 2025 Page 159	Director of Communities, Economy and Transport	East Sussex on-street electric vehicle chargepoint contract award Award of contract, following the conclusion of a procurement process, of an operator to install and manage on-street electric vehicle charge points on the road network in East Sussex.	<b>P KD</b>		Report, other documents may also be submitted	Ian Glover 01273 336389
3 Dec 2025	Lead Member for Education and Inclusion, Special Educational Needs and Disability	School Organisation Plan 2025 to 2029 To seek Lead Member approval to publish a School Organisation Plan for the period 2025 to 2029. The School Organisation Plan sets out how East Sussex County Council (the local authority), in accordance with its statutory duty, seeks to ensure there are sufficient primary, secondary, and special school places in the right locations to meet demand.		Schools, academy trusts and local diocesan education services are being consulted on the draft plan prior to Lead Member approval being sought to publish the plan.	Report, other documents may also be submitted	Gary Langford 01273 481758

5 Dec 2025	Lead Member for Resources and Climate Change	Phoenix Centre, Lewes - Decision regarding the grant of a new lease On 12 August 2025, the Lead Member for Resources and Climate Change agreed that the property be let in accordance with s123 of the Local Government Act 1972. Following a marketing period, the Lead Member will consider offers made and the analysis. A decision will be made regarding the organisation that is to take a lease on the property.	<b>P</b>		Report, other documents may also be submitted	Rebecca Lewis 07955 312371
5 Dec 2025	Lead Member for Resources and Climate Change	Updates to the East Sussex County Council Social Value Policy To consider proposed changes to the Social Value Policy including a new Social Value Model as a method for securing social value through its procurement activity. This will replace the Social Value Measurement Charter. The new Social Value Model will be reviewed by the Place Scrutiny Committee ahead of consideration of the policy by the Lead Member.			Report, other documents may also be submitted	Anne Epsom 07977 350180
8 Dec 2025	Lead Member for Transport and Environment	The East Sussex Rail Strategy 2025 - 2050 To consider responses from the key stakeholder and public consultations on the draft East Sussex Rail Strategy, alongside seeking approval of this as a supporting document to the East Sussex Local Transport Plan 4.	<b>KD</b>		Report, other documents may also be submitted	Lisa Simmonds 03456 080190

8 Dec 2025	Lead Member for Transport and Environment	The East Sussex Freight Strategy 2025 - 2050 To consider responses from the key stakeholder and public consultations on the draft East Sussex Freight Strategy, alongside seeking approval of this as a supporting document to the East Sussex Local Transport Plan 4.	<b>KD</b>		Report, other documents may also be submitted	Lisa Simmonds 03456 080190
8 Dec 2025	Lead Member for Transport and Environment	Experimental Traffic Regulation Order for Eastbourne Town Centre Movement and Access Package Phase 2b and Victoria Place Levelling Up Fund (Seaside Road to Grand Parade) Further to the Lead Member approval for Eastbourne Town Centre Movement and Access Package Phase 2b & Victoria Place Levelling Up Fund (Seaside Road to Grand Parade) to progress to detailed design and construction, a further decision is required on the proposal to implement an experimental Traffic Regulation Order on Phase 2b. This would allow for options regarding timings of restricted hours to be explored for each phase to identify the most suitable hours for the local traders and/or residents.	<b>KD</b>		Report, other documents may also be submitted	Emma Burt 01273 481170
15 Dec 2025	Lead Member for Adult Social Care and Health	East Sussex Housing Partnership Strategy To approve a draft strategy which has been developed by East Sussex Housing Partnership. The strategy sets out a vision and priority areas of work for the local housing sector.	<b>KD</b>		Report, other documents may also be submitted	Michael Courts 01273 336034

15 Dec 2025	Lead Member for Adult Social Care and Health	Circle Room Young Persons Sexual Health clinic, Lewes - consultation outcome To consider the feedback from the consultation in relation to the future of the Circle Room Young Persons Sexual Health clinic in Lewes and to make a decision in relation to next steps.	<b>KD</b>	Circle Room's service users (young people aged up to 25 years old)	Report, other documents may also be submitted	Tony Proom 01273 335252
16 Dec 2025	Cabinet	Council Monitoring Quarter 2 To consider the Council Monitoring report for the second quarter of the financial year 2025/26 as part of the Council's Reconciling Policy, Performance and Resources (RPPR) budget monitoring process.	<b>KD</b>		Report, other documents may also be submitted	Victoria Beard 07894 708914
16 Dec 2025	Cabinet	Annual Report of Looked After Children To consider the annual report of the Looked After Children.	<b>KD</b>		Report, other documents may also be submitted	Sally Carnie 01323 747194
16 Dec 2025	Cabinet	Treasury Management Annual Report and Mid-Year Report 2025 To consider a report on the review of Treasury Management performance for 2024/25 and the outturn for the first six months of 2025/26, including the economic factors effecting performance, the Prudential Indicators and compliance with the limits set within the Treasury Management Strategy.	<b>KD</b>		Report, other documents may also be submitted	Ian Gutsell 01273 481399
16 Dec 2025	Cabinet	RPPR Update - Update on planning for 2026/27 and beyond To consider an update on the Reconciling Policy, Performance and Resources (RPPR) process for 2026/27, the next steps and the Medium Term Financial Plan.	<b>KD</b>		Report, other documents may also be submitted	Claire Lee 07523 930526

16 Dec 2025	Cabinet	Annual accounts for the Lewes Public Library and Museum Charitable Trust Cabinet will consider a report on the annual accounts of the Lewes Public Library and Museum Charitable Trust, and consider whether there have been any issues that require further action by the County Council as a Corporate Trustee.			Report, other documents may also be submitted	Jane Clarke
December 2025	Director of Adult Social Care and Health	The Commissioning of the East Sussex Domestic Abuse Service (ESDAS) To award the contract for the East Sussex Domestic Abuse Service (ESDAS) following the outcome of the commissioning process.	<b>KD</b>		Report, other documents may also be submitted	Caz Kearton-Evans 07879 117579
December 2025 Page 163	Chief Operating Officer	Site 6, Eastbourne - Disposal of Long Leasehold Interest On 14 January 2025, the Lead Member for Resources and Climate Change declared Site 6, Eastbourne (the property) to be surplus and approved the disposal of it. Authority was delegated to the Chief Operating Officer to agree the terms of sale, jointly with Eastbourne Borough Council. The property has been marketed on the open market. The Chief Operating Officer will consider the offers made.	<b>P KD</b>		Report, other documents may also be submitted	Rebecca Lewis 07955 312371
19 Jan 2026	Lead Member for Transport and Environment	East Sussex and Brighton & Hove Local Nature Recovery Strategy The County Council has a statutory duty to prepare a Local Nature Recovery Strategy (LNRS) for the county, including the administrative area of Brighton & Hove City	<b>KD</b>	The Local Nature Recovery Strategy has been developed through significant	Report, other documents may also be submitted	Kate Cole 01273 481621

		Council. The report will be to seek Lead Member approval for the final LNRS, as well as the necessary statutory stages that lead to publication of the final LNRS.		consultation with a large range and number of stakeholders. Ahead of the Lead Member decision, a draft Strategy will have been subject to a 6-8 week period of public consultation.		
19 Jan 2026	Lead Member for Transport and Environment	Petition for traffic calming measures to be introduced along The Village, Eastbourne To consider a petition calling for the installation of traffic calming measures along The Village between the junction of Matlock Road and Coltstocks Road.			Report, other documents may also be submitted	Warwick Hadley 0345 6080193
27 Jan 2026	Cabinet	Treasury Management Strategy 2026/27 To consider the Treasury Management Strategy for 2026/27. This includes setting the Prudential Code and approving the Minimum Revenue Provision Policy Statement and Annual Investment Strategy for 2025/26	<b>KD</b>		Report, other documents may also be submitted	Ian Gutsell 01273 481399
27 Jan 2026	Cabinet	Ashdown Forest Conservators 2024-25 Outturn report Approval is required to agree the funding of the operational deficit on the Core Budget, as per the Ashdown Forest Act.			Report, other documents may also be submitted	Andy Fowler 01273 481774



27 Jan 2026	Cabinet	Reconciling Policy, Performance and Resources (RPPR): Draft Council Plan 2026/27, Revenue Budget and Capital Programme To ask Cabinet to approve the draft Council Plan, Council Tax levels, Revenue Budget and Capital Programme for 2026/27 for recommendation to the County Council (including Savings Proposals, Equality Impact Assessment, Engagement and Scrutiny feedback).	<b>KD</b>		Report, other documents may also be submitted	Claire Lee 07523 930526
23 Feb 2026	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Admission arrangements for East Sussex schools 2027-28- determine The Lead Member is asked to determine the admission arrangements for 2027-28 for schools for which East Sussex County Council is the admission authority.	<b>KD</b>		Report, other documents may also be submitted	Jo Miles 01273 481911
24 Feb 2026	Lead Member for Resources and Climate Change	Award of contract for school meals catering Approve the award of the school meals catering contract to the successful bidder following a competitive tender process. This contract award will be for a period of 5 years plus an option for an additional 2 years. The 2-year extension will be subject to contract performance.	<b>P KD</b>		Report, other documents may also be submitted	Johnny Parish 07849 303899
24 Feb 2026	Lead Member for Resources and Climate Change	Playing field adjacent to the Tilling Green Community Centre - Decision regarding disposal of the freehold interest On 25 September 2025, the Lead Member for Resources and Climate Change considered the outcome of the responses	<b>P KD</b>		Report, other documents may also be submitted	Rebecca Lewis 07955 312371

		from members of the public concerning the intention to dispose of the site. Approval was given to market the site on the open market. Following a marketing period, the Lead Member will consider offers made and the analysis. A decision will be made regarding the organisation that is to purchase the site.				
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<b>Report to:</b>	<b>People Scrutiny Committee</b>
<b>Date of meeting:</b>	<b>20 November 2025</b>
<b>By:</b>	<b>Director of Adult Social Care and Health</b>
<b>Title:</b>	<b>Care Quality Commission (CQC) Assessment of Adult Social Care</b>
<b>Purpose:</b>	<b>To provide the Committee with information regarding the outcome of the CQC assessment and next steps.</b>

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## **RECOMMENDATIONS:**

- 1) The People Scrutiny Committee is recommended to consider the outcome of the Care Quality Commission's (CQC) Assessment of Adult Social Care in East Sussex, which was published on Friday 3 October 2025 with an overall rating of 'Good'.**
  - 2) Agree that the CQC Reference Group, a sub-group of the People Scrutiny Committee, should monitor and review the development and implementation of departmental actions in response to the CQC report.**
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## **1. Background**

1.1 The Health and Care Act 2022 granted the Care Quality Commission (CQC) new powers to assess local authorities' compliance with the Care Act 2014. The 'return of the regulator' was a significant development for adult social care departments who had not been assessed by statutory, external bodies for approximately 15 years.

1.2 The CQC developed a new assessment framework for adult social care assessments as these differed significantly from their existing assessment regimes. This first round of assessments has been a learning process for all parties and the CQC adjusted their methodology throughout this first round of assessments and have indicated that they will undertake future assessments differently. Details of any new approach have not yet been shared.

1.3 The CQC were clear that, whilst they understand the pressures faced by adult social care departments and their partners nationally, they would not take this into account when assessing our delivery of the Care Act.

1.4 In East Sussex, a significant amount of preparatory work was undertaken in advance of the CQC assessment. This included an extensive self-evaluation process using the industry standard Local Government Association (LGA) and Association of Directors of Social Services (ADASS) self-assessment tool. We produced a Self-assessment document which was promoted by the LGA as good practice. We commissioned an LGA Peer Review in February 2024 as a way of providing further assurance and insights into our key strengths and areas for development. Our preparation for assessment was reviewed by the People Scrutiny Committee CQC Reference Group.

1.5 East Sussex were notified of the official start of our CQC assessment on 12 August 2024. Stage one of the assessment was to supply the CQC with around 250 pieces of evidence, including performance data, policies, strategic plans and our Self-assessment. Following the submission of this evidence, we focussed on preparation sessions for Members and staff who would meet with the CQC, and in providing summary case file information to support the CQC in conversations with adults and carers who had used our services.

1.6 We were notified on 2 December 2024 that the on-site element of the assessment would take place between the 11 and 13 of February 2025. We ran mock interview sessions and additional preparation sessions in the lead into the site visit.

1.7 The second phase of the CQC assessment included:

- Interviews with adults and carers who had used ASCH services.
- Interviews with Members, including the Leader of the Council, the Lead and opposition Lead Members for ASCH and cross party representatives from the People Scrutiny Committee, including the Chair.
- Interviews with ASCH officers including the Chief Executive, Director of ASCH, Director of Public Health and staff from across the department.
- Drop in sessions for ASCH staff
- Questionnaires and interviews with key external stakeholders and partners including the NHS, the voluntary community and social enterprise sectors and the independent chair of the Safeguarding Board.
- Preparing a three hour pre-assessment on-line presentation for the CQC which highlighted our key strengths and areas for development.

1.8 The CQC published its assessment of East Sussex Adult Social Care and Health's delivery of the Care Act on 3 October 2025. The full report can be found at Appendix A. Key findings from the assessment are summarised in Section 2 below. Proposed next steps are set out in Section 3.

## **2. Key findings from CQC Assessment**

### **Overall rating**

2.1 Adult Social Care and Health achieved a rating of 'Good'. This means that the CQC consider the service to be performing well and meeting their expectations.

### **Areas of strength and areas for improvement**

2.2 The CQC framework is set out using four overarching themes. Each of these themes are outlined below with the key strengths and areas for development identified by the CQC.

### **Theme 1: Working with people - Strengths**

#### Adult Social Care and Health is easily accessible

2.3 The report identified that Adult Social Care and Health is easily accessible through Health and Social Care Connect (HSCC) and information and advice was available as well as onward referrals to relevant support and services.

#### Person centred care planning

2.4 The approach to assessment and care planning was person-centred and strength based. The CQC stated *'The approach reflected people's right to choice, built on their strengths and assets and reflected what they wanted to achieve and how they wished to live their lives. People told us they felt listened to throughout their Care Act assessment and that their views were heard and respected.'*

#### Development of an integrated offer through Integrated Care Teams (ICTs)

2.5 There was recognition of the work being undertaken with partners such as, primary and community health services, borough and district councils, mental health, the NHS Sussex

ICB and Voluntary, Community, Faith and Social Enterprise (VCFSE) organisations to develop an integrated offer of health, care and wellbeing throughout the ICTs.

#### Prevention offer that includes the use of technology and OT clinics

2.6 The report acknowledged the preventive offer including Occupational Health clinics that people could attend and telecare which is technology that enables people to remain independent and safe in their own homes. The CQC reported that *'The local authority works with people, partners and the local community to make available a range of services, facilities, resources and other measures to promote independence, and to prevent, delay or reduce the need for care and support.'*

2.7 The report recognised the significant impact of the Joint Community Reablement and Rehabilitation (JCR) service in preventing on-going care needs, by stating *'In 2023/24 72% of adults did not require on-going care after receiving JCR support.'*

#### Effective delivery of Direct Payments

2.8 The report outlined that Direct Payments were well managed, and staff were supported to ensure they are offered to all adults and contained the following, *'People told us they received direct payments from the local authority. The direct payment process was easy to understand, and payments were received on time and as planned.'*

#### Effectively reducing inequalities

2.9 The report outlined that there is a good understanding of local demographics, and this information is used to reduce inequalities in people's care and support experiences and outcomes. There is an Equality Diversity and Inclusion strategy and action plan in place. It acknowledged the Accessible Information Standard policy and how staff would consider people with a disability, impairment or sensory loss, and ensured they were able to get information in a format they understood.

### **Theme 1: Working with people - Areas for development**

#### Waiting lists for Care Act assessments and reviews

2.10 The report outlined that Adult Care Act assessments and reviews, Carers, Occupational Therapy and Financial Assessments were not always completed in a timely manner. The CQC noted that there were waiting lists in place.

2.11 The CQC however, recognised the work that has been undertaken on waiting times and the implementation of an enhanced standard process for managing waiting lists which includes: better communication with people, better management of waiting lists by monitoring risk and the management of performance.

#### Inconsistent information about Financial Assessments

2.12 The CQC found that information around Financial Assessments was not consistently made clear to people but noted the project to improve waiting times and communication regarding financial assessments including working with the Citizen Panel and People Bank to design and test new versions of written communications.

#### Limited information on the effectiveness of signposting

2.13 Although the report recognised information and advice was provided by HSCC to East Sussex residents; it identified that there was not a systemic approach to monitor whether signposting had been effective for people.

### **Theme 2: Providing Support - Strengths**

#### Effective JSNA and Market Position Statement

2.14 The report noted that the Joint Strategic Needs Assessment (JSNA) and Market Position Statement are used well to identify and plan for local care and support services. The

CQC refer to clear plans to improve local people's health and wellbeing and reduce health inequalities in East Sussex.

#### Good oversight of commissioned services

2.15 The report indicated commissioning teams had good oversight of commissioned services and provided on-going management, overview of quality and service delivery, and held providers to account for the contract and contained the following: *'Partners told us the local authority's model of commissioning was accessible and supportive of all providers.'*

#### Effective Market Support to monitor provider quality.

2.16 The Market Support Team maintained knowledge of the provider markets and risk, utilising risk assessment tools to provide effective market support including in business continuity situations.

#### Strong co-production with people who are experts by experience

2.17 The report outlined the many good examples of co-production including work completed by the Involvement Matters Team who are made up of people with Learning Disabilities and are directly involved in service development and staff training, for example *'People told us they had a lot of interaction with the local authority and had been involved with a co-production group who supported with staff training, interviews and produced easy read documents.'*

#### Effective partnership working

2.18 The report highlighted that partners participated in developing local authority strategies through their involvement in the ASC Strategy Steering Group, Community Oversight Board, Health and Care Partnership Board and the Financial Inclusion Group and indicated that *'Partners told us the local authority valued them, and they had strong links with adult social care and public health'*

2.19 The report referenced our Commissioning Excellence Programme as a good example of developing excellence in local authority / VCFSE commissioning.

### **Theme 2: Providing Support – Areas for development**

#### Gap in provision for people with complex and challenging conditions

2.20 The report reflected that there is a gap in provision in the county for people with particularly complex and challenging conditions. It is acknowledged that this is not a sole responsibility of ASCH and is being addressed with partners across the system by planning a strategic approach to respond to this challenge.

### **Theme 3: How the Local Authority ensures safety within the system – Strengths**

#### Effective case risk management policy with triage by risk level

2.21 The CQC noted that there is an effective case risk management policy which is used by all operational staff where referrals are triaged by level of risk. This was supported by practice standards, case monitoring documentation and training.

#### Good quality assurance oversight of the independent care sector

2.22 The report described our Market Oversight Panel (MOP) which is a multi-agency two-weekly forum. The forum shares information about the care sector to identify potential risks to people, and risks and impacts on the wider market and providers, and was identified as a good source of coordinated support to the market.

#### Effective transitions charter and pathway for young people to adult services

2.23 The CQC concluded that there are suitable processes in place to support young people and their families with the transition to adult social care services. There is a Transitions

Charter in place which informs young people and families what they can expect from the process.

#### Effective safeguarding

2.24 The CQC noted that safeguarding concerns are responded to appropriately, in a timely manner and that there are effective processes for quality assurance oversight of safeguarding. The report referred to the close links with the Safeguarding Adults Board (SAB) and how learning from Safeguarding Adult Reviews (SARs) was included in relevant staff training.

### **Theme 3: How the Local Authority ensures safety within the system – Areas for development**

#### Delays in hospital discharge

2.25 The report noted that hospital discharge was not always completed in a timely manner for people, mainly due to Discharge to Assess (D2A) capacity. The report acknowledged that the number of D2A beds had reduced due to reductions in NHS funding and capacity was being discussed with system partners.

#### Inconsistent sharing of safeguarding enquiry outcomes with providers

2.26 The CQC noted that some partners felt that they could be kept better informed about the outcome of safeguarding concerns that they had raised.

#### Sharing Safeguarding Adult Review (SAR) themes with partners.

2.27 Although SAR themes are shared with partners, the report suggested this could be done more systematically, however, noted that this is a planned action moving forward.

### **Theme 4: Leadership – Strengths**

#### Clear governance and accountability structures at all levels

2.28 The report outlined the effective use of adult case file audits and our Quality Practice and Assurance Framework (QPAF) to provide information and assurance on the quality of practice in ASCH.

#### Effective leadership

2.29 The report noted that there is a stable adult social care leadership team with clear roles, responsibilities and accountabilities and indicated that *'Leaders were visible, capable and compassionate' and 'The local authority's political and executive leaders were well informed, and the scrutiny process was effective.'*

#### Effective risk management framework and escalation processes

2.30 The CQC noted that there are effective risk management and escalation arrangements in place.

#### Strategic planning informed by performance, risk, and EDI data

2.31 The CQC report stated, *'The local authority uses information about risks, performance, inequalities and outcomes to inform its adult social care strategy and plans.'*

#### A culture of learning and development

2.32 The CQC report stated, *'There was an inclusive and positive culture of continuous learning, improvement and development.'*

#### Strong training and development offer for staff

2.33 The report highlighted the bespoke training that is aligned with Care Act duties and professional needs; the strong emphasis on reflective practice, peer learning, and legal

literacy; and emotional resilience support for staff handling crisis calls. *‘Staff told us about the numerous opportunities for career progression and staff development.’*

2.34 The report noted that a strengths-based practice (SBP) model is promoted with a strong emphasis on wellbeing, choice and self-direction.

#### Learning from complaints drives service improvement

2.35 The CQC noted *‘The local authority learned from people’s feedback about their experiences of care and support, and feedback from staff and partners. This informed strategies, improvement activity and decision making at all levels.’*

### **Theme 4: Leadership – Areas for development**

#### Prevention strategy still in development

2.36 At the time of the assessment in February 2024, the Prevention Strategy, *‘which has a clear focus on prevention and wellbeing to reduce care and support needs’*, was still in development. The CQC noted this was yet to be implemented.

### **3. Next steps – response to the key findings**

3.1 We will use the key findings from the CQC assessment to review and update our existing development and improvement plans, aligning these with our overarching vision and agreed priorities.

3.2 As many of the development areas highlighted by the CQC were self-identified, there is a close alignment with our current Portfolio Plan priorities of Prevention, Waiting Times, Safeguarding, Quality and Value for Money.

3.3 Improvement actions will be delivered through our existing strategies (eg: Waiting Lists Project, Safeguarding Hub in HSCC, etc.) and wider health and care system initiatives (eg: Complex commissioning and market development, delayed discharge reduction) and monitored on a quarterly basis as part of the regular Council Plan progress reporting.

### **4. Conclusion and reasons for recommendations**

4.1 The strengths outlined in the report show that, overall, East Sussex is in a good position and is delivering well against the challenges and pressures faced by adult social care and our key partners, both locally and nationally.

4.2 As was the case with the LGA Peer Review, our strengths and areas for development were known to us and had been documented in our Self-assessment and / or highlighted in our pre-assessment presentation to the CQC, and most importantly, largely already included within our existing plans and priorities.

4.3 The People Scrutiny Committee, through its CQC Reference Group, assisted in our preparation for the assurance process and, as such, are well placed to monitor the development and implementation of our response to the CQC report as part of our wider improvement plan.

## **MARK STANTON**

### **Director of Adult Social Care and Health**

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## **Appendices**

Appendix A - ESCC CQC Assessment



# East Sussex assessment

## [How we assess local authorities.](#)

Assessment published: <date of publication>

## About East Sussex

### Demographics

East Sussex is a local authority within the South East of England, with 5 district councils in their boundary. There is a population of 546,000 people with a mixture of market towns, rural and coastal communities. East Sussex has an index of multiple deprivation score of 4. However, there are areas of great deprivation within East Sussex with 6.7% of the area now in the most deprived decile.

The population is largely people aged between 18 to 64 years old. There is an ageing population in East Sussex with 26% of the population aged 65 or over, compared to the England average of 18%. 20% of the county's population are aged over 70 years old, compared to the England average of 13.7%. East Sussex has a higher percentage of people who identify as White British at 93.88%. 2.26% of people identify as Mixed or Multiple, 2.13% identify as Asian or Asian British, 0.82% identify as Black, Black British, Caribbean or African and 0.91% of people identify as other in East Sussex.

There is an Integrated Care System (ICS) covering the whole of Sussex and an NHS Sussex Integrated Care Board (ICB). There are 2 acute hospitals within the local authority area, 5 community hospitals and 1 Sussex wide mental health provider.

East Sussex has been under no overall control politically since 2023, with a Conservative minority administration. There are 50 elected members made up from 23 Conservative, 12 Liberal Democrats, 5 Labour, 5 Green, 2 Independent Democrats and 3 Independent.

### Financial facts

- The Local Authority estimated that in 2023/24, its total budget would be **£829,131,000.00**. Its actual spend for the year was **£936,062,000.00** which was **£106,931,000.00 more** than estimated.
- The Local Authority estimated that it would spend **£275,813,000.00** of its total budget on adult social care in 2023/24. Its actual spend was **£288,828,000.00**, which is **£13,015,000.00 more** than estimated.
- In 2023/24 **30.86%** of the budget was spent on adult social care.
- Approximately **10290** people were accessing long term Adult social care support, and approximately **1975** people were accessing short term support in 2023/24. Local authorities spend money on a range of adult social care services, including supporting individuals. No two care packages are the same and vary significantly in their intensity, duration, and cost.

This data is reproduced at the request of the Department of Health and Social Care. It has not been factored into our assessment and is presented for information purposes only.

## Overall Summary

### Local Authority rating and quality statement scores

Good: Evidence shows a good standard (67%)

### Summary of people's experiences

People's views were mostly positive about the local authority. Although, there were delays for Care Act assessments. When people were supported by the local authority, they felt listened to, their views respected and that their care plan was person centred.

People had carers assessments completed for them, however, there was mixed reviews about the effectiveness of carers reviews and the support people received throughout the assessment. The local authority had recognised a gap in their carers' offer and had been working with people to co-produce a new carers strategy.

People told us they had a positive experience with the local authority's reablement offer. It had supported them to re-gain independence after a hospital admission, and they were provided with exercises and equipment to support their return home independently.

People had been working in co-production with the local authority around their website and ensuring information on there was accessible and easy read documents were available for people. They told us they were looking at the removal of acronyms in documents so that information provided by the local authority was more accessible to people.

The local authority had an Involvement Matters Team which was a co-production group for people with lived experience. This team would support with co-production of strategies and development of local authority services. People told us they felt their feedback was listened to and used to implement change.

### Summary of strengths, areas for development and next steps

There were waiting lists in place for all Care Act processes across East Sussex. There was a plan of reducing these which was a clear focus for the local authority, but work was still ongoing around this. Data was shared across all local authority staff, so all staff had a clear understanding of targets. There was clear leadership oversight of the waiting lists in place to ensure people remained safe.

The local authority was developing Integrated Community Teams to provide partnership working with the local authority front line teams and health professionals, housing and the voluntary, community, faith and social enterprise (VCFSE) sector to ensure robust and consistent support for people. At the time of the assessment this was in the early stages of development and delivery.

The local authority had recognised a gap within care provision for people with complex needs, which meant support was taking longer to be put into place for people or they were needing to be placed out of area. The local authority was working on supported living accommodation and working in partnership with providers, the ICB and district councils to solve this gap in care provision.

Co-production was a real strength for the local authority, they regularly involved experts by experience and people using services to input on strategic commissioning and local services. The local authority had created co-production panels such as the citizens panel and the Involvement Matters Team, who were made up of people who used services and supported the voice of people in East Sussex.

There were delays around hospital discharge within East Sussex due to the capacity of discharge to assess beds. This was causing longer stays for people in hospital putting pressure on people, the local authority and partners. The local authority was working with partners to address this issue.

Local authority staff had good knowledge and clear understanding of their role within safeguarding and the processes in place. These processes supported people to remain safe. Staff worked in partnership with the local Safeguarding Adults Board and had a Safeguarding Development Team Lead sitting within each locality team to ensure oversight. Staff felt well supported within their decision making around safeguarding.

The local authority had structures and processes in place. The workforce was passionate about supporting people to achieve positive outcomes and there was a strong leadership team in place to support them. The local authority had good knowledge of their area, the people living there and the demographics. There were challenges in terms of discharge and gaps within the care market.

The local authority had clear development, and improvement plans in place around waiting lists, discharge delays and prevention strategies. Although they were not fully implemented at the time of the assessment, action plans were in place and being worked towards. There were also plans in place around the development of supported living properties to support the gap in care provision.

## Theme 1: How the local authority works with people

### Assessing needs

#### Score:

2 - Evidence shows some shortfalls

#### What people expect:

I have care and support that is coordinated, and everyone works well together and with me.

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

#### The local authority commitment:

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

#### Key findings for this quality statement

##### **Assessment, care planning and review arrangements**

People could easily access the local authority's care and support services through multiple channels, including online and self-assessment options. People told us their initial contact with the local authority was easily accessible and they could contact them by telephone. The local authority hosted a single point of contact for adult social care and community health services called Health and Social Care Connect (HSCC). The HSCC was developed in collaboration with NHS partners to provide accessible information, advice and guidance for people in one place. HSCC was a service operating 24 hours a day, 7 days a week all year round and could be contacted by people or professionals in a range of ways such as, email, telephone, type talk, British Sign Language (BSL) and through their IT portal.

Referrers could access multiple health and care pathways through HSCC, with qualified nursing staff who also triaged referrals when required. Local authority staff such as, social workers, would undertake Care Act assessments once triaged. HSCC provided access to out-of-hours urgent response services for adult social care and community health. They could provide or signpost information and advice or send the contact as a referral to the most appropriate service within adult social care or community health. Out-of-hours could also refer to urgent response services and emergency duty services if required. Staff told us that when a person required an assessment, the team would gather all the relevant information and would triage the call to see which team would best suit the service needed.

The approach to assessment and care planning was person-centred and strength based. The approach reflected people's right to choice, built on their strengths and assets and

reflected what they wanted to achieve and how they wished to live their lives. People told us they felt listened to throughout their Care Act assessment and that their views were heard and respected. People told us they appreciated being able to be supported by a family, friend or carer. People received copies of their assessment or review once these were completed. Care plans documented clear processes for people to follow if they were to need further support from the local authority or their needs had changed before their next review. People told us how they would contact the local authority if they needed to.

A strengths-based approach document demonstrated the local authority's approach to assessments, noting the assessor should use an approach that looked at a person's life holistically, considering their needs in the context of their skills, ambitions, and priorities. Care plans were person centred focusing on what's important to the person and focusing on their strengths and what they could do. Staff told us they used a strength-based approach within Care Act assessments and focused on what people could do.

Adult Social Care Survey (ASCS) 2024 data showed 66.80% of people were satisfied with care and support in East Sussex, which was better than the England average of 62.72%. 80.58% of people who feel that they have control over their daily life, which was better than the England average of 77.62% and 48.29% of people who reported that they had as much social contact as they wanted with people they like, which was better than the England average of 45.66%. This was reflected in the feedback we received from people.

The local authority was in the early stages of developing their Integrated Community Teams (ICT). These were broken down into 5 locality areas across the county. The local authority was working with partners such as, primary and community health services, borough and district councils, mental health, the ICB and Voluntary, Community, Faith and Social Enterprise (VCFSE) organisations to develop an integrated offer of health, care and wellbeing throughout the ICTs. The aim was this would support assessments and streamline support for people who needed services.

### **Timeliness of assessments, care planning and reviews**

Assessments, care planning and reviews were not always completed in a timely manner or up to date and the local authority had waiting lists in place. Some people told us they had initial contact with the local authority in February 2024, and an assessment was not started until June 2024. Data provided by the local authority showed the median days wait for Care Act assessments was 17 days and the maximum was 345 days. There were 86 adults who had waited more than 6 months for an assessment. Leaders told us they were aware people waiting for Care Act assessments could mean their needs deteriorated whilst not receiving support. However, they were trying to ensure they were meeting people's needs in the interim and minimising the wait where they could.

In April 2024 the local authority initiated a project to reduce waiting times for assessments and improve performance on reviews. Local authority data provided showed there were 1368 people with an overdue care review by 0-6 months, 503 people who were overdue by 6 to 12 months and 703 people were more than 12 months overdue for a review. Data from the Adult Social Care Finance Report (ASCFR)/Short and Long-Term Support (SALT) 2024 showed 57.39% of long-term support clients were reviewed, this was similar to the England average of 58.77%.

The average wait time from first contact with the local authority to start of an adult's initial assessment was 36.7 days, the median waiting time was 17 days. The local authority implemented improved standard communications for people awaiting an assessment. For cases that were non-urgent, people would receive a letter of information on estimated waiting times, who to contact if their needs were to change and information on other local support services available. Leaders told us work had been carried out to look at people who were currently waiting to identify if prevention methods could be implemented before a Care Act assessment took place. Leaders worked with HSCC to identify prevention methods at the first initial contact.

In 2023 the local authority had undertaken assurance work to ensure that robust arrangements were in place to manage risks associated with waiting lists. While this work highlighted that every team had appropriate arrangements for managing waiting lists, there were differences in how each service managed this and they recognised the need to streamline processes. This was addressed in 2024 when an enhanced, standard, process for managing waiting lists and communicating with people on waiting lists was implemented across adult social care. Staff told us they look at each person's case and assess if they were safe. Staff could discuss cases with more senior staff or could go straight to the local authority adult safeguarding hub. Cases were prioritised using a RAG rating with urgent cases taking priority and cases were constantly reevaluated and reprioritized. Staff told us waiting lists were managed by local authority senior Management, however, they were regularly communicated to front line team members so they had an awareness of numbers of people waiting.

Performance on waiting times was reported monthly and formally reviewed every 6 weeks at the Waiting Times Steering Group. The Waiting Times Steering Group was created in line with the April 2024 project to improve waits. Waiting times were also reviewed 6 monthly at the Improvement and Assurance Board, to ensure visibility and accountability. Staff told us they shared waiting list data with both the steering group and board, as well as with the senior leaders at the local authority. Leaders told us they had a good understanding of waiting lists and improvements were being made. Heat maps were produced with data on waiting lists (showing the areas of high and low numbers) and sent out weekly. This supported the management of key performance indicators (KPI).

## **Assessment and care planning for unpaid carers, child's carers and child carers**

The needs of unpaid carers were recognised as distinct from the person with care needs and assessments, support plans and reviews for unpaid carers were undertaken separately. People told us the local authority had completed carers assessments for them, however, there were mixed reviews about the effectiveness of them and the support they received through the assessment. Local authority staff completed carers assessments and reviews and there were carer assessment specialists who completed assessments at the front door to the local authority. Survey of Adult Carers in England (SACE) 2024 data showed 26.16% of carers felt that they had control over their daily life, which was somewhat better compared to the England average of 21.53%. 33.28% of carers reported that they had as much social contact as desired, which was similar compared to England average of 30.02%.



There was a carers pathway operational instructions document which provided guidance for all operational staff on carers' pathways. A carer's assessment could be completed with the carer over the phone or face-to-face. It could also be completed by the carer, and this was known as a supported self-assessment. Practitioners were expected to consider a person's needs and wishes when deciding the best way to carry out the carer's assessment. If a carer contacted the local authority requesting that their overdue review was completed, the team would complete a review on the phone or refer to a locality team if the review could not be completed over the phone.

Care Act assessments for unpaid carers were not always completed in a timely manner. Local authority data provided showed there were 301 unpaid carers waiting for a Care Act assessment. The median wait was 1 days, and the maximum wait was 298 days. Staff told us it had been identified they were supporting a high number of carers in crisis, including those who were unpaid carers for individuals who self-funded their care and support. A partner organisation was commissioned for 2 posts to complete unpaid carers reviews and had just been funded for additional posts to support the local authority with the back log of carers assessments. Partners told us the local authority were aware of their backlog for assessments, and they were aware the local authority had funded additional posts to help reduce this. Leaders expected this additional resource would speed up the assessment process and reduce waiting times.

Unpaid carers could be provided with advocacy, benefit advice, personal budgets and counselling. Different teams across the local authority told us they were encouraged to provide extra support for unpaid carers, this could be in the form of extra visits, phone calls or being on the end of the phone when needed. Unpaid carers were contacted within 28 days of first contact, although this could be just to inform them of their position on a waiting list. Survey of Adult Carers in England (SACE) 2024 showed 7.41% of carers accessing training for carers which was better than England average of 4.30% and 43.24% of carers were satisfied with social services which was somewhat better than the England average of 36.83%. 79.05% of carers felt involved or consulted as much as they wanted to be in discussions which was better than the England average of 66.56%.

Care Act assessments for young unpaid carers were completed in a timely manner. Local authority data provided showed there were 21 people waiting for an assessment as of 30<sup>TH</sup> June 2024. The median wait was 20 days and the maximum wait was 39 days. The local authority commissioned an external provider to support young unpaid carers in the county. They offered reassessments and reviews to all young unpaid carers at 1-year from their previous assessment or when they became aware of a change in circumstance for the family. The family or unpaid carer could contact them at any point to request a review or reassessment and there was no waiting list in place for these. They reported that 70% of young carers have a review or reassessment each year.

### **Help for people to meet their non-eligible care and support needs**

People were given help, advice, and information about how to access services, facilities and other agencies for help with non-eligible care and support needs. HSCC was the single point of access for adult social care, where they would signpost, provide information and give advice to people if they did not have eligible care needs. Staff were able to see if the person had been in contact with them before and any advice given. HSCC would use the online directory to find services to signpost people to. Staff provided an example of a

case that was not eligible for Care Act provision, but the person was experiencing loneliness and isolation. Through signposting to a buddy service they were able to support the person to reduce their isolation without the need of a commissioned service.

Leaders told us HSCC were trained in providing signposting, information, advice and guidance and if somebody had contacted before they would review the local authority response and whether the person did need further Care Act support. The local authority had not got a systemic approach to the management oversight or recording of contact for people with non-eligible needs at the time of assessment to monitor whether signposting had been effective for people.

### **Eligibility decisions for care and support**

The local authority's framework for eligibility for care and support was transparent, clear and consistently applied. The local authority had an eligibility criteria policy and guidance in place to ensure consistency in decisions was applied. Where people were not happy with decisions made about their care and support people could make an appeal or complaint.

The local authority had an appeals process guidance in place to support the completion of an assessment or review. It supported staff through the range of reasons people may appeal, the process of appeal and complaints process if the appeal could not be resolved. The local authority had provided data for the number of appeals for care act assessments, support and funding. They had received 48 appeals of which 40 had been closed and 8 remained open for period 2023/24. Out of 48 appeals, 19 were upheld and 4 were partially upheld.

The local authority had a 2-stage process for appeals. Stage 1 would be allocated to a Team Manager to collate all information which would then be reviewed by senior managers for a decision. The Team Manager would then contact the person with the outcome. If the person was unhappy with this, this would go to stage 2 where the Assistant Director of Operations would decide an outcome. The Team Manager would then contact the person with the outcome of this.

There was a total of 19 appeals which were agreed from stage 1 of the local authority's appeal process. There were 7 appeals at stage 2 of which 4 were closed and 3 were currently open. Majority of the themes were in relation to property disregard and disability related expenditure.

### **Financial assessment and charging policy for care and support**

Financial assessments for people were not always completed in a timely manner and there were large waiting lists for support. Local authority data provided in December 2024 showed 311 people were waiting for a financial assessment. The median wait for a financial assessment was 1 days and the maximum days wait was 190 days. The number of people waiting for a financial assessment had reduced by 29% since the start of 2024.

Information around financial assessments was not always made clear to people. Some people told us they had been provided with information on care charges, and costs were clearly identified. Whilst others told us they did not understand the financial assessment process and there was a lack of communication from the local authority on how financial



contributions were calculated. Financial assessment and charging were one of the service areas with the highest complaints rate at 59 complaints. Although, this did see a reduction of complaints by 34% compared to the year before. The uphold rate of complaints was 64% which was higher than the departmental average.

Partners told us sometimes processes within the local authority were quite slow, with financial assessments being an area for improvement. However, the local authority recognised this. Consequently, the local authority had initiated a project to improve financial assessments by improving waiting times for people and reducing waiting lists. Also improving communication regarding financial assessments including working with volunteers from the Citizen Panel to design and test new versions of written communications.

There was a charging for care and support policy in place as part of the financial assessment process, where mental capacity and communication needs were assessed before the financial assessment. Third parties such as people's representative's and interpreters were involved during the financial assessment, as and when needed. As well as a charging for care and support policy there was a Financial Assessment process which was intended to provide guidance for operational staff, and finance and benefits assessment staff on financial assessment processes.

### **Provision of independent advocacy**

Timely, independent advocacy support was available to help people participate fully in care assessments and care planning processes. An advocate can help a person express their needs and wishes and weigh up and make decisions about the options available to them. They can help them find services, make sure correct procedures are followed and challenge decisions made by local authorities or other organisations. The local authority had commissioned an independent advocacy provider to deliver all statutory advocacy services across the county, which included Care Act advocacy. This supported people who lacked capacity or had significant difficulty in engaging with Care Act processes so they could access the assistance they needed. In 2023/24 their advocacy provider supported people in 2,562 instances.

Partners told us the local authority had a good understanding of advocacy services. The knowledge and understanding of advocacy within the senior members of the team was good, but this could vary in front line staff teams. Partners were involved in providing training to address any gaps in advocacy knowledge and raising awareness of advocacy services.

Staff told us advocacy was easily accessible, and they were able to make referrals to the advocacy provider. Local authority staff were able to contact the advocacy provider via telephone to discuss any urgent referrals or discuss anything before a referral is made. From the point the referral was made it was around a 2 week wait for an advocate to be allocated to support. Advocacy would support people to communicate through Care Act processes and the advocate provided a written report to the social worker within a week.

## Supporting people to lead healthier lives

### Score:

3 - Evidence shows a good standard

### What people expect:

I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally.

I am supported to plan ahead for important changes in my life that I can anticipate.

### The local authority commitment:

We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.

### Key findings for this quality statement

#### **Arrangements to prevent, delay or reduce needs for care and support**

The local authority works with people, partners and the local community to make available a range of services, facilities, resources and other measures to promote independence, and to prevent, delay or reduce the need for care and support. The local authority had a preventative service offer which included their telecare only support to around 4,500 people which supported people to remain at home. Telecare is technology that enables people to remain independent and safe in their own homes. There was also a range of Public Health preventative services, including warm homes grants and an integrated health and wellbeing service. People told us they used the technology offer of a lifeline alarm. This offered them assurance when they were at home alone that they could access support quickly if they needed to and supported them to remain living independently at home.

Leaders told us about the preventative agenda of the local authority which included embedding Occupational Therapists and assistant Occupational Therapists within districts and boroughs. These staff were upskilled to trusted assessor roles so they could assess for straight forward adaptations and support people to remain at home. A trusted assessor is a suitably qualified person who carries out assessments of health and/or social care needs to facilitate speedy and safe transfers from hospital.

People told us the local authority had supplied them with equipment around their home enabling them to return home after a hospital admission. The local authority had clear guidelines and instructions set out on how staff in the local authority would secure the provision of minor adaptations for people who have eligible needs, and who lived in East Sussex. The provision of minor adaptations applied to people regardless of whether they lived in public or private housing. The local authority website had information on help to use or move around your home safely. It told people how they could apply for equipment

and if they were eligible for equipment. Major adaptations guidance set out the process and funding of major adaptations in properties.

The local authority worked with partners on preventative offers to support people to remain healthier for longer. Each year the local authority worked with a local organisation supporting to organise a 2-month long programme of events focussing on older people keeping physically, emotionally and socially active. ASCS 2024 data showed 93.04% of people who use services who feel clean and presentable, which was similar to England average of 93.28%. 94.88% of people who use services who get adequate food and drink, which was somewhat better compared to the England average of 93.71%.

Survey of Adult Carers in England (SACE) 2024 data showed 15.07% of carers able to spend time doing things they value or enjoy, which was similar to England average of 15.97%. 93.47% of carers who found information and advice helpful, which was significantly better than the England average of 85.22%. ASCS 2024 data showed 75.46% of people who reported that they spend their time doing things they value or enjoy, which was somewhat better compared to the England average of 69.09%.

### **Provision and impact of intermediate care and reablement services**

The local authority had a Joint Community Reablement and Rehabilitation (JCR) service. The JCR was made up of two complementary services, adult social care provided JCR's specialist domiciliary reablement care which was free for up to 6 weeks. East Sussex Healthcare NHS Trust provided the JCR occupational therapy and physiotherapy. The two parts of the service worked in tandem or independently dependent on people's needs. Staff told us they worked closely with the NHS to identify any ongoing therapy needs for people. Adult social care funding for JCR provided the care and support and there were no waiting lists in place for this service. JCR offered short term packages of care with an emphasis on the person regaining their independence to return home. JCR worked within local hospitals and would meet with health care professionals daily to see who may be able to be supported by the project.

JCR was originally commissioned to support people to maintain independence in the community, however, JCR now supported hospital discharges with 43% of referrals from acute wards. Around 3% of referrals were from gateway wards that support admission avoidance. JCR reablement worked with around 2000 people a year. A key indicator for the service would be at the end of the intervention the client would no longer require a package of care. In 2023/24 72% of clients did not require on-going care after receiving JCR support. ASCOF 2024 data showed 90.77% of people 65+ still at home 91 days after discharge from hospital into reablement/rehabilitation, which was somewhat better than the England average of 83.70% and supported the evidence we found.

People told us they had used the local authority's reablement service within a care home following a hospital admission, which was an intermediate care reablement service. Reablement support was provided to people for several weeks which enabled them to regain independence and return home. People told us this service was very good and provided them with daily exercises and equipment needed to support their reablement.

## Access to equipment and home adaptations

Local authority data in June 2024 provided showed people awaiting assessments for equipment were 254 OT assessments and 66 Sensory assessments. The median wait time was 4 weeks for OT and 7 weeks for Sensory and the maximum wait was 22 weeks for OT and 24 weeks for Sensory. 90% of assessments were completed within 28 days, and all cases were triaged by risk and prioritised by category. However, waiting times meant people were not always getting support at times this was needed.

The local authority described their Occupational Therapy (OT) offer as a key component of their prevention priority. They offered OT clinic appointments to people with relatively straight forward needs, and requiring a preventative service so they can be seen quickly. Simple equipment was prescribed immediately, and minor adaptations were done via photographs and measurements brought to the clinic or a follow up visit.

Leaders told us they would invite people to the OT clinics, and they could test out and see which equipment best suited them prior to making any decisions. This promoted independence and kept people at the centre of the assessment and in control of their own support. There were 3 sites for OT clinics which were in Bexhill, Lewes and Eastbourne. The OT's worked in a strength-based practice way identifying what people can do rather than what they can't do and looking at the least restrictive option in terms of support and adaptations.

People told us they received walking aids from OTs for indoor use as well as walking aids to support them outdoors. They had follow up appointments on their equipment and knew who to contact if they needed further support around equipment. Local authority data provided showed people awaiting equipment following an assessment were 525 cases. The maximum waiting time for equipment was 148 days. It had been identified the wait would generally be because of specialist equipment. The local authority considered making a referral to the Housing Solutions Worker where available in all cases where an adaptation was not technically feasible or was likely to cost more than £10,000. The guidance also highlighted what would constitute as a standard or complex need and how to apply for the Disability Facilities Grant (DFG). Mandatory DFG were administered by the housing department of the local district or borough council.

The Integrated Community Equipment Service (ICES) covered the process and purchasing of community equipment provided to assist people with daily living needs. The equipment provider was responsible for the procurement, delivery, collection, repair, maintenance, decontamination and disposal of community equipment including skin pressure relief.

The local authority Occupational Therapists (OTs) had been seconded into District and Borough Councils. This had allowed for integrated working with housing related services, including larger housing adaptations. Assessments were undertaken regardless of whether the person lived in public or private sector housing. Individuals who were identified as self-funding were offered information and advice, including on major adaptations, to ensure their needs were appropriately met. They provided equipment and minor adaptations via the Integrated Community Equipment service.

There were around 8,000 users of monitored Technology Enabled Care (TEC) alarms; these were only available to people who met Care Act eligibility criteria. Staff told us there

were opportunities within commissioning around TEC such as, Robotic pets as companions. An example was provided where a robotic cat had a significant positive impact for one person which supported the person confidence to leave their home for a hospital procedure. There were clear intentions by the local authority around the use of TEC aligning the current service with the requirements of health partners. This included links with Telehealth and implementing a mobile response service, implementing a short-term service to support hospital discharge and placing a greater importance on the information received from equipment used in people's homes. The local authority were continuing to develop their technology offer.

Staff told us about challenges with equipment commissioning around implementing adaptations to property, particularly private rental properties. To overcome this, they expanded the range of equipment adaptations available for providers for example, temporary steps instead of structural changes. If equipment was not available, they could spot purchase through local suppliers, providing better outcomes for people.

### **Provision of accessible information and advice**

There were guidelines in place for staff working in HSCC as this was the first point of contact for people accessing services or advice. The guidelines expected on initial calls was to collect information, signpost and give advice. Staff told us the aim is to make every contact count and there was an emphasis on ensuring support was provided for every call whether that be a further Care Act assessment need, signposting to another service or information sent out. ASCS showed 67.35% of people who use services find it easy to find information about support, which is similar to England average of 67.12%. People gave mixed responses in relation to accessible information about services. Some people told us they were emailed documents to review information and advice that could support them, whilst others said they did not receive information or had to ask for information.

The local authority's website had guidance on how to access adult social care services and information and advice for people already using services. There was East Sussex Community Information service directory on their website which provided information for people trying to find services, events and activities. People told us the online directory was an online service that was not promoted enough as a useful resource.

There was also a directory called 1space, this allowed people to search for what they were looking for, such as specialist services within their locality areas and this would then provide a list of services in East Sussex.

Staff showed us 1Space and told us the directory was updated annually to ensure information was correct. The site was accessible where you could change format and language however this was not necessarily straightforward and instructions for changing the language were only in English. Health and Social Care Connect referred people to the website and should someone need further assistance with digital access (digital exclusion), staff would encourage them to go to a local library, or they would print it off for them if needed. Staff told us the most common thing people had looked for on the site was support with maintaining independence, but it was not clear to what extent this data was used to inform other areas or decision making within adult social care.

The local authority website outlined support and services offered for unpaid carers. Information could be provided in fact sheets, care line magazine online or an e-newsletter.



Leaders told us the scrutiny board were looking at unpaid carers support and making sure that signposting to services was readily available for them. The Survey of Adult Carers in England data showed 71.90% of carers who find it easy to access information and advice, which was better than England average of 59.06%.

The local authority had a clear goal for services to simplify language and communication used to make information easier to understand. BSL leaflets and videos were accessible and included information about assessments, ongoing support, charging, independent advocacy, unpaid carers support and making a complaint.

## **Direct payments**

People told us they received direct payments from the local authority. The direct payment process was easy to understand, and payments were received on time and as planned. The Adult Social Care Outcomes Framework (ASCOF) 2024 data showed 28.12% of service users who receive direct payments, which was somewhat better than the England average of 25.48%. 39.72% of service users aged 18-64 who receive direct payments, which was similar to England average of 37.12% and 17.01% of service users aged 65 and over who receive direct payments, which was somewhat better than the England average of 14.32%.

The local authority had a direct payments policy in place which stated direct payments should be offered to everyone where possible to provide flexibility, and choice of care and support received. Everybody would have all the relevant information and time to make an informed decision regarding whether they would like a direct payment.

Staff told us members of the Direct Payments Team and social workers were able to undertake joint visits to people to explain direct payments and the process involved. An example was provided where a joint visit took place for a person and their unpaid carer. There was some confusion around direct payments and what this support could offer and what the carers role was in direct payments. The joint visit enabled local authority staff to go through direct payments in more detail, provide information in an accessible format and discuss different account options.

There was a direct payment champion in each neighbourhood team, and they would come together to meet every 4 weeks. They ran drop in events fortnightly where people who receive direct payments and local authority staff could come in for support. There were 1388 people who received direct payments in East Sussex, however, there was a slight downwards trend due to a variety of reasons such as people moving from living at home to care homes, and the accessibility of people being able to recruit personal assistants (PA).

Staff told us since the COVID-19 pandemic there had been less uptake for people who wanted to work in a PA role. The local authority was doing advertisements to try and attract people to the roles and support this. The local authority had a strategic partnership in place with an external agency for direct payments, who could support people with finding and employing PA's. There was a recruitment and training platform where PA's could advertise their availability for work and people looking to find a PA could advertise their job vacancy.

There was a Service Development Manager to oversee direct payments and develop the offer of direct payments in two phases. These phases were to improve the current

processes based on the feedback and knowledge the local authority already have, and co-produce with local people, direct payment users and other stakeholders, a direct payments action plan to support greater up take of these.

There was a direct payment action plan 2023/25 which supported plans to raise awareness within local authority teams of direct payments, provided training and support to staff around direct payments. There were improvements identified with responsible people named. Staff told us that training on direct payments had been delivered to all neighbourhood teams to raise awareness of direct payments.

## Equity in experience and outcomes

### Score:

3 - Evidence shows a good standard

### What people expect:

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

### The local authority commitment:

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.

### Key findings for this quality statement

#### **Understanding and reducing barriers to care and support and reducing inequalities**

The local authority understood its local population profile and demographics. It analysed equality data on social care users and used it to identify and reduce inequalities in people's care and support experiences and outcomes. The local authority had an Equality, Diversity and Inclusion (EDI) Strategy 2024 to 2027. The strategy focused on 4 key areas, delivering leadership on equality and demonstrating commitment, engaging effectively with residents to make improvements, delivering quality services that reflected the diverse needs of local people and building a diverse workforce with equality confidence, knowledge and skills.

The strategy included baseline measures so that the local authority could monitor progress and evaluate effectiveness. The Performance Board oversaw the progress of this strategy and data was used to direct work and monitor outcomes. Staff told us data was provided to the Performance Board and to operational teams. Operational teams would discuss the data in team meetings and look at how they can improve the data sets from an operational level. The EDI strategy action plan was co-developed with a range of groups, including those representing people who used services, staff, VCFSE partners and the ICS.

The local authority had a good understanding of their local demographics which included rural areas. The local authority provided examples of how Equality Impact Assessments (EqIA) had improved quality and action planning. For example, the EqIA was used to support the provision of transport and additional drivers to facilitate access to learning disability day services for those affected by rurality and complex needs. EqIA were undertaken as part of the EDI strategy. The local authority used surveys, demographic information and feedback from stakeholder forums to undertake a rigorous assessment of impact and avoid unintended, unequal consequences of change. Staff told us EqIA's took place as part of the commissioning process, identifying actions needed under equality



matters in line with the EDI strategy ensuring appropriate communication so seldom heard groups were not excluded from access to services.

The local authority had good knowledge of current and future challenges for example, coastal economic challenges and coastal climate challenges. Leaders told us they were looking at the what the future effects of climate change had on people living in coastal communities that could lead to health inequalities such as, the rising temperatures and the impact this can have on people. They were working with care providers in coastal areas around adapting care plans for people. For example, the majority of care homes had conservatories attached to them which people living there would like to use and may not understand the effects this could have on their health in hot weather. There was a health impact assessment underway to look further into these challenges and how this may impact on people.

The People Scrutiny Committee held a review of the EDI strategy. This was to identify key groups of people less likely to engage with services. The local authority had gathered data internally and from partners in the Voluntary, Community and Social Enterprise sector (VCFSE), staff engagement sessions and engagement with intermediaries representing seldom heard communities. 6 monthly reviews had taken place to review actions suggested by the scrutiny committee,

The scrutiny review of EDI identified several communities who were seldom heard. Gypsy, Roma and Traveller communities were one of the groups recognised due to cultural barriers and finding it hard to build trust with others outside of the community. This led to poor health, inequalities in accessing health care and poor access to education. The review led to recommendations being made to address gaps in equalities and to reach seldom heard groups. The local authority had a Gypsy Roma Traveller team to support and engage with the community. The team did not conduct assessments but would refer or signpost onto appropriate teams, such as the neighbourhood team and they supported members of the community through assessment processes.

The local authority was working to provide services appropriate to people's cultural needs for now and in the future. The local authority was a part of the community of practice circle which aimed to address concerns of LGBTQ+ people about future care in care homes or in their own home. The local authority worked with providers around EDI in their services which included, LGBTQ+ inclusivity for older people. There were plans within the local authority EDI strategy for training, improved engagement with partners working with LGBTQ+ community and improved understanding of data including gaps. Leaders told us they had less diversity in the local authority area than other places in England and they were using and understanding census data to get a picture of who and where people were in East Sussex, this included a deeper understanding of the LGBTQ+ communities. The local authority had included consideration to reaching harder to reach communities such as, LGBTQ+, refugees and asylum seekers and those digitally excluded within their adult social care strategy and had created a communication plan.

## **Inclusion and accessibility arrangements**

The local authority had an Accessible Information Standard policy and Sourcing Interpreting, Translation and Communication support guidance in place. This supported with ensuring people could access and understand information that was provided to them.

Staff would consider people with a disability, impairment or sensory loss, and ensured they were able to get information in a format they understood.

The local authority provided clear guidance for staff about using interpreters and translators. This included when to use a qualified interpreter, the process for requesting an interpreter or translation, and a checklist for working effectively with an interpreter. Staff told us they always looked at communication methods for people and how best to communicate with them before starting any work. They would look at advocacy, picture boards, Makaton and easy read documents to ensure the person could be involved in the Care Act process.

There was a corporate Translation and Interpreting Framework of preferred translation providers. There were direct contact details for all interpreter providers on the framework so that they could also be accessed in an emergency or out-of-hours. Leaders told us the local authority had translation services they used which staff had been trained on and knew how and when to access the service. They would translate all core documents and strategies into the most used languages. Staff told us the translation service was easy to use and had a positive impact on providing care and support. Partners told us the local authority could do more when it came to sharing equality diversity and inclusion work sharing data, to help stakeholders better understand the needs of the local community.

The local authority worked with people to develop accessibility of information. People told us they had been working in co-production with the local authority around their website and ensuring information on there was accessible and easy read documents were available for people. They told us they were looking at the removal of acronyms in documents so people could better understand information.

Staff told us data from people with protected characteristics was recorded to gain a deeper understanding of the needs of the county. Looking at communication needs and disabilities, this information could provide a better understanding of the population. An example was provided about the Ukrainian community. The data allowed the local authority to look at the needs of the Ukrainian community better and identify additional support that would be required.

BSL users were able to contact the local authority using a BSL interpreting service. This was a free of charge service that allowed people to connect via video call to an interpreter, who would then call the local authority and translate information between them. Staff gave us an example where a person had contacted the local authority and had used BSL interpreters. The use of this service allowed the person to fully express their needs to the local authority and make sure their voice was heard.

## Theme 2: Providing support

### Care provision, integration and continuity

#### Score:

2 - Evidence shows some shortfalls

#### What people expect:

I have care and support that is coordinated, and everyone works well together and with me.

#### The local authority commitment:

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

#### Key findings for this quality statement

##### **Understanding local needs for care and support**

The Joint Strategic Needs Assessment (JSNA) identified the current and future health and wellbeing needs and strengths of local communities. There were clear plans to improve local people's health and wellbeing and reduce health inequalities in East Sussex. The local authority had a much older population profile than the country as a whole and deprivation levels that varied significantly across the county. There were 5 JSNA priorities which had been agreed at the East Sussex Health and Wellbeing Board which were, building blocks of good health, importance of a life course approach, reducing health inequalities, improving healthy life expectancy and mental health and wellbeing.

There was an information service site that brought together research and analysis resources to provide information and intelligence statistics on the social, economic and demographic character of East Sussex. Data was divided into different areas, these included but were not limited to health and social care, deprivation, housing and crime and community safety. The local authority had detailed guidance about using the site and the different types of data available on it.

The local authority analysed data from several sources to look ahead and acknowledge emerging and future needs. This included data from the 2024 State of the County, Focus on East Sussex report, JSNA and the research site. The Market Position Statement highlighted data points around the following as of most interest to the adult social care market to help guide and influence service development, age, disability, population change, life expectancy, long term illness, dementia, people receiving long term support, deprivation and multi-morbidity and the adult social care workforce.

Partners told us the local authority had a good understanding of the needs of the local community and that they would seek input from stakeholders to understand local needs if there were any gaps in their knowledge. They considered the local authority to have good

insight into local health inequalities. They also confirmed the local authority provided translation services to people where needed.

Local authority data provided showed there were a total of 342 out of area placements. 60 of these were made in the last 12 months. Out of area placements for older people were nearly always made at the request of the person or their family, as market capacity locally was not an issue. For younger people, particularly where they had multiple complex needs, it could be the case that their needs may be more difficult to meet locally. This included specialist services for people with sensory impairments or specific health conditions. Sometimes, out of area placements for younger people were made at their request, a common reason being they wanted to stay living in an area where they had attended college or similar. The local authority had recognised specialist services as a gap within care provision and the local authority were looking to increase the market to support people.

Staff told us challenges identified were increasing in complexity of people's needs. Housing for specialist need was an unmet need, and they were currently offering interim support packages whilst they worked towards making longer term decisions and preparing providers to deliver necessary care. An example was provided where a person transitioning from children's services to adult services with challenges and they needed to prepare the new provider. They signposted the new provider to trauma informed training specifically to that individual and supported them to hire staff who spoke the same language.

### **Market shaping and commissioning to meet local needs**

The local authority Market Position Statement January 2025 told us that there were around 2,719 people in receipt of a homecare package. There were 3 'primary' homecare areas in East Sussex (Hastings and Rother, Eastbourne and Polegate and Seaford and Havens) with 2 Lead Providers covering each. There were a further 6 'secondary' homecare areas, with each having a single lead provider. The local authority reported that for the year 2023/24, capacity exceeded demand in the homecare market. This led to the approved list for care providers being closed to new applicants. ASCS 2024 data showed 74.30% of people who use services who feel they have choice over services, which is somewhat better than the England average of 70.28%.

Staff told us commissioning teams had oversight of commissioned services with providers after the contract was delivered and this added a lot of value. It provided on-going management, overview of quality and service delivery, and held providers to account for the contract. They provided advice and guidance to the provider market, particularly for supported living, setting expectations and understanding of needs, fitting with regulated services and good practice guidance. To ensure safe working conditions for staff, commissioners told us, the new contracts now have a clear statement about modern slavery, providers have been engaged with to ensure this is understood. Staff told us they were adaptive to changing markets. An example of this was the strategic mental health VCFSE provider that had flexibility built into the contract to adapt to future needs.

Partners told us the local authority's model of commissioning was accessible and supportive of all providers. There was good dialogue, and they met quarterly with the local authority contracts and commissioning team to look at Key Performance Indicators (KPI)

which were set at the beginning of a contract. KPIs set could be reviewed at any time, and they were able to be adjusted dependent on the service.

## **Ensuring sufficient capacity in local services to meet demand**

The local authority had identified there was a gap in provision for people with very complex and challenging needs and the lack of suitable provision presented a significant issue across partners, especially when placements broke down. Leaders told us there was a gap for services for young male autistic adults. The local authority Market Position Statement acknowledged there was a gap in provision in the county for people with particularly complex and challenging conditions. The local authority told us they had well established and positive relationships with the small number of providers who were able to support these individuals in very specialised placements, however, they said they were often only able to find appropriate accommodation out of the county. To try to address the demand for highly specialist placements within county, the local authority had partnered with system colleagues which included the Integrated Care Board, Mental Health Foundation Trust and District and Borough colleagues to plan a strategic approach to look at how they could collectively respond to this challenge.

There were 139 supported living accommodation services for people with a learning disability. The local authority was looking to work with providers to increase opportunities to meet the needs of younger adults, and to increase supported living accommodation for people with complex needs and behaviour that require specialist support. The local authority told us they were increasing capacity in the supported living market for people with a learning disability by reconfiguring 3 bungalows from residential care to supported living and remodelling another council site to create 7 self-contained flats.

There were 120 providers and 165 services for older people's residential and nursing care. 53 providers and 110 services for specialist residential and nursing care. Around 87% of placements were provided by independent operators or small groups, compared to the national average of 56% and occupancy levels averaged 80%.

Staff told us there were Staying Well hubs in Lewes, Bexhill, Hastings, Eastbourne and Uckfield that could offer support to those diagnosed with mental health conditions. There was a waiting list but referrals generally took 2-4 weeks. The local authority provided a range of community mental health support services which were free and available to any adults living in East Sussex who were living with mental health challenges. These services included but were not limited to, 7 Wellbeing centres providing community-based support, peer support services and staying well spaces.

Providers told us there was an emphasis on prevention, delaying the needs for people and as a result they had been involved in workshops around the prevention strategy. Providers thought more could be done between the local authority and VCFSE to get ahead, in order to prevent closure of services and support more prevention. There was not sufficient care and support available to meet demand. The number of referrals for supported living accommodation exceeded the number of available vacancies in the market, specifically for people with additional or complex needs or who were seeking a particular accommodation type or locality. Data provided by the local authority for the length of time people had waited for their homecare or supported living service to begin due to lack of capacity was 5 days. The total number of people on the waiting list was 4. The reason for waiting was one person required a care worker that could speak another language, one requested specific

call times and two were in rural locations, one of which required a small package that providers deemed commercially unviable.

Data provided by the local authority for the number of time people had waited for their residential or nursing home service to begin due to lack of capacity was 11.5 days for residential general, 10.9 days for residential dementia, 10.9 days for nursing general, and 12.8 days for nursing dementia. Some people may wait a little longer for more specialised services, for example if bariatric care is required (for people who are overweight or obese).

The local authority had 3-day services for people with a learning disability Beeching Park in Bexhill, Linden Court in Eastbourne and St Nicolas Centre in Lewes. People told us they had a choice out of day services they wanted to use, and the service was suitable for their needs. Transport was provided for people using the day service to and from their house.

Staff told us they had a contract hierarchy for homecare with 6 lead providers and 43 approved providers. They would approach lead providers first and subsequently go through approved list after that. Timescales for high priority support was 3.3 days and low priority 4.3 days. Individuals' choice of provider would overrule the hierarchy and could move to a direct payment option if that was required. The implementation of this provider framework had happened recently in recognition of changes necessary to ensure a sustainable market.

### **Ensuring quality of local services**

Partners told us they provided quarterly performance reports to the local authority as part of their quality assurance processes. They were able to provide information on trends, themes and concerns which could impact their work. The local authority had a risk assessment tool used for both working age and older people's residential and nursing care homes. The risk assessment tool drew on a range of data and intelligence sources and provided an appropriately weighted score for each service. The data covered a wide range of variables including CQC ratings, capacity and occupancy, placement activity, pricing and safeguarding or other concerns. This profile was used to inform the work and priorities of the Market Support Team and provided service level information impacts should a service move into a business continuity situation.

The Market Support Team supported 176 providers and services over 600 visits or virtual support calls and meetings during 2023. The team-maintained knowledge of the provider market and risks through CQC ratings, meetings with local CQC Inspectors, care home providers, and meetings with the Integrated Care Board (ICB) through the multi-agency Market Oversight Panel (MOP). CQC data showed 76.62% of Nursing care homes in East Sussex had been rated as good, 77.66% of Residential care homes had been rated as good, 72.63% of Home care service providers had been rated as good and 83.33% of Supported Living providers had been rated as good.

Partners told us there had been challenges when there was a change in need and an individual required a new assessment and uplift of support hours, resulting in the provider not being paid correctly for completing the extra support. Providers felt they had to go from team to team and in one example had waited 6 to 8 months for this to be rectified.



## Ensuring local services are sustainable

Local authority data provided showed there were 10 contract hand backs relating to service closures in the last 12 months of which 6 were residential care homes, 1 supported living service and 3 homecare services. A further homecare service decided it was no longer able to sustain a viable business due to its position on the contract hierarchy as they were lower on the list of suppliers that the local authority would approach.

The local authority told us they had transitioned from an actual care delivered to rostered care method of funding and operated a model with two lead providers in each main geographical area. Providers were previously paid based on specific call times logged by staff, now the local authority were paying what providers have rostered for care being delivered. The rationale behind this change was to ensure sustainability in the market and make sure that staff were paid appropriately with contracts including travel time for staff. Results of this change showed capacity in the home care market had increased, good supply, minor waiting lists and quick allocation of care. The rostered care model could be monitored using data and changes made where necessary for example if travel time needed to be extended.

A number of nursing homes had closed in the past 10 years and the majority of new homes opening had offered residential care. The local authority told us that a key element of pressure moving forward would therefore be the provision of affordable nursing care. They also identified a high concentration of services in the east of the county, which may impact on options and ease of access for people living in the north or west of the county, and that capacity in all areas would need to be increased to meet an increased demand for complex dementia nursing care and older age adults with alcohol or substance misuse issues.

The local authority told us that it provided a range of support to providers, including support from the Market Support Team, weekly provider e-bulletins with 4,500 subscribers, a range of sector specific groups and forums, learning disability, autism and housing partnership boards, support with recruitment and a free training offer. Adult Social Care Workforce Estimates 2024 data showed 50.94% ASC staff with care certificate in progress or partially completed, or completed, which was similar to England average of 55.53%.

There were 3 dedicated staff to support with recruitment of new staff into the care sector from the local authority, through promotion at careers fairs, colleges and universities, the Armed Forces Network, a website targeting people over 50's project, various charities and partnership with recruitment agencies. Candidates were supported with free training, interview preparation and coaching. Lead providers were also offered grant funding towards the costs of recruiting overseas workers. Adult Social Care Workforce Estimates 2024 data showed 5.82% adult social care (ASC) staff vacancy rate which was somewhat better than England average of 8.06% with a 0.28% ASC staff turnover rate which was similar to England average of 0.25%. Leaders told us the local authority did a lot of work around home care and overseas recruitment, over 200 people from Romania, Albania and the Far East were employed which resulted into a number of hours injected into the care market.

## Partnerships and communities

### Score:

3 - Evidence shows a good standard

### What people expect:

I have care and support that is coordinated, and everyone works well together and with me.

### The local authority commitment:

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.

### Key findings for this quality statement

#### **Partnership working to deliver shared local and national objectives**

The local authority was committed to improving services and worked in partnership to support this. Partners told us the local authority valued them, and they had strong links with adult social care and public health. They participated in developing local authority strategies through their involvement in the Adult Social Care Strategy Steering Group, Community Oversight Board, East Sussex Health and Care Partnership Board and the Financial Inclusion Group. The local authority had a plan setting out their ambitions and what they planned to achieve by 2027 for example, keeping vulnerable people safe and helping people help themselves. The plan clearly outlined working in partnership with local services to ensure the best outcomes for people living in East Sussex.

Partners told us they worked in partnership with the local authority and other providers to co-ordinate the provision of information and advice across the county. Partners met with the local authority regularly to share learning and ensure consistency as well as reporting activity to help inform their strategies. There was a Health and Social Care Partnership Executive Board that oversaw specific transformation programmes and the Better Care Fund (BCF). A Sussex wide integrated care strategy called Improving Lives Together provided a strategic approach for ensuring the BCF across all parts of Sussex was focused on delivery of key priority areas via a shared delivery plan. The BCF played a significant role in driving improvement in all the key areas through integration and pooling resources to support delivery of shared priorities. Partners told us senior leaders within the local authority were supportive and constructive. They worked together to align aims and goals.

The local authority had integrated aspects of its care and support functions with partner agencies where this was best practice and when it showed evidence of improved outcomes for people. The local authority worked with health partners on 2 section 75 agreements. A section 75 agreement is between local authorities and NHS bodies which can include arrangements for pooling resources and delegating certain NHS and local authority health-related functions to the other partners. The 2 agreements in place were



with the Community Equipment Service (ICES), which facilitated a fully pooled budget for community equipment and minor adaptations. A second was with the Sussex Partnership NHS Foundation Trust which funded posts within adult social care Forensic Teams. Leaders told us relationships with health were robust and provided a strong foundation for conversations about sensitive issues, for example continuing health care funding arrangements.

The local authority worked in co-production with people with lived experience to support the direction of adult social care services. People told us they had a lot of interaction with the local authority and had been involved with a co-production group who supported with staff training, interviews and produced easy read documents. The Involvement Matters Team (IMT) had completed campaigns around health inequalities with local providers and ran workshops which supported peers with staying safe online. The IMT was made up of adults with learning disabilities who used adult social care services. The IMT had a structured plan from 2023 to 2026 to improve the lives of people with a learning disability in East Sussex. People from the IMT were also members of the Learning Disability Partnership Board (LDPB) who met every 3 months. Partners told us work done by the LDPB helped people to socialise and connect with others in their community. For example, they had held a festive party for people to attend helping to prevent loneliness and isolation during December 2024.

Some people told us their experience of the commissioners at the Council was they were too focused with KPIs which measure the number of people accessing services but not the quality of the services delivered. The IMT were heavily involved in co-production and service development across the county. They delivered parts of adult social care training, supported peers to use digital tools safely and created specific questions and KPI's for tenders whilst sitting on tender panels.

The local authority recognised the vital role unpaid carers had in supporting people and had been working on a carer's partnership plan with a target of this being implemented in 2025. This was a 5-year plan and was being co-produced with unpaid carers, the Integrated Community Board (ICB) and partners. Previous negative feedback from some unpaid carers was received on the current carers offer which indicated the service could be improved. The carers partnership plan set out the priorities of a strategic, joined up approach to meet the needs of carers across the county which included future commissioning plans. Staff told us the carers partnership plan was the overarching commitment to unpaid carers from adult social care and the voluntary and community sector.

## **Arrangements to support effective partnership working**

The local authority used opportunities to pool budgets and jointly fund services with partners to achieve better outcomes. Leaders told us the BCF spend was jointly agreed by the NHS and the local authority. The Health and Wellbeing Board was attended by local authority leaders, NHS, public health, police and VCFSE. The board led on the Joint Strategic Needs Assessment (JSNA) development, the shared delivery plan and the BCF. The Better Care Fund provided a range of services through small grants for example dementia training, cookery, arts activities, targeted support for black and ethnic minority carers, carer support in hospices, digital support, and telephone befriending.

The local authority had a long-standing Section 75 agreement in place for the Integrated Community Equipment Service (ICES) which facilitated a fully pooled budget for community equipment and minor adaptations. They had joint funding agreements in place for S117 aftercare with the Integrated Care Board and a section 75 agreement, which funded posts in the adult social care forensic team. Forensic social work is the application of social work to issues and questions related to the law and legal systems.

The local authority is part of the Sussex Integrated Care System (ICS). The NHS Sussex Integrated Care Board (ICB) worked with the local authority as one of the three places in the Sussex ICS area and there was an East Sussex Health and Care Partnership that enabled joint working across organisations to deliver the Health and Wellbeing Board Strategy and associated plans and activities. Leaders told us relationships with the NHS trust were positive and that the local authority and NHS have a mature relationship where they could have difficult discussions and challenge each other. Partners told us they could have open conversations with the local authority and could challenge where needed within these discussions. Partners and the local authority both had a good working relationship with each other and were able to navigate difficult situations together.

People told us about the 'ladder of involvement' which listed from top to bottom, co-production, participation, consultation and information. People told us they had been working in co-production with the local authority for many years on a range of projects, for example, projects relation to wellbeing. This included their involvement in the retendering of the wellbeing services commissioned by the local authority and the Neighbourhood Mental Health Transformation project.

The local authority hosted the Autism Partnership Board, which met at least three times a year and worked to support autistic people and their carers to lead fulfilling and rewarding lives. In response to the National Strategy for Autistic children, young people and adults 2021 to 2026, adult social care and children's services initiated a cross-sector project to co-produce a partnership action plan to implement the strategy in East Sussex. Key development and delivery partners included the Autism Partnership Board, NHS, Autistic people and the Police.

The local authority provided regular and sufficient support working in partnership with care providers. The local authority met regularly with the local registered care association, to support providers. Examples of the support provided were recruitment of staff, regular newsletters and a market support service. The Market Support service was a team within the local authority who would offer support and strengthen the independent care and support market, improve and sustain quality improvements, prevent business failure or service deterioration and identify and address business continuity and sustainability concerns.

Partners told us a 2-year Commissioning Excellence Programme had started from April 2023, which delivered workshops based on practical peer-led learning. The multi-partnership programme aimed to develop East Sussex as a centre of excellence for VCFSE commissioning. This would be done by improving communication, dialogue, trust and understanding between statutory commissioners and VCFSE organisations, to enable the culture shift necessary to achieve sustained change.

## **Impact of partnership working**

The local authority monitored and evaluated the impact of its partnership working on the costs of social care and the outcomes for people. This informed ongoing development and continuous improvement. The local authority listened to feedback from people to create better outcomes. People told us in they felt listened to and their feedback was implemented and acted on. An example was provided where people on the East Sussex Lived Experienced Advisory Group questioned the Mental Health Oversight Board why they had not been asked what priorities should be taken over the next year. People told us this was immediately taken on board, and priorities were implemented in consultation with them with immediate effect.

Partners told us they worked jointly with adult social care on discharge and admissions avoidance. They were working together to look at how they could support people in the community where they were ready for discharge, to avoid delays. There was a Discharge to Assess model which saw 80 beds jointly funded by the local authority and health. People could access this support through either health or adult social care led assessments, with the target length of stay being 28 days. Local authority data showed average length of stay was currently 27 days. Staff told us capacity within this model fluctuated and the hospital team was working on different approaches, for example, discharging people with a higher package of care at home to facilitate earlier discharge.

The local authority had Joint Commissioning Teams in place which enabled an integrated approach to commissioning support for people across the health and social care system. They hosted the Adult Social Care and Health Joint Commissioning Team, and the Mental Health Joint Commissioning Team. Jointly commissioned services were available to people whether their support needs were being met by the local authority or the NHS. This avoided unnecessary hand-offs and silo working.

East Sussex Care Homes Plan was a joint plan between the local authority and NHS Sussex which showed the commitment to integration. The plan set out 15 different areas which provided actions, outcomes and timelines for the development of the Enhanced Health in Care Homes service (EHCH). East Sussex Care Homes Group (ESCHG) would oversee the EHCH rollout locally and bring together all care homes related work in the county. Membership of the ESCHG included ICB, local authority commissioners, providers, GPs, Ambulance, Healthwatch, and care home managers.

The local authority was in the process of developing a Carers Partnership Plan which had been coproduced with carers. This would incorporate key themes identified in a Carers Partnership Plan workshop held in February 2024. They were also using previous feedback from a range of surveys and Census data.

## **Working with voluntary and charity sector groups**

The local authority had effective relationships with VCFSE groups. Partners told us they were involved with a group which was a committee of statutory providers and VCFSE members. The local authority DASS co-chaired this with the agency who supported unpaid carers. The meeting provided space for strategic conversations and to co-produce solutions. VCFSE had influence in strategic decision making and Partnership Plus were seeking to strengthen their relationships with the Health and Wellbeing Board. Partnership

Plus was jointly initiated by the local authority and VCFSE to reset the relationship between them to work more collaboratively.

In partnership with the East Sussex VCFSE partners and NHS Sussex the local authority had established the East Sussex Commissioning Excellence Programme, which was aimed to develop East Sussex as a centre of excellence for VCFSE commissioning. Partners told us the commissioning excellence programme had led to changes in how things were commissioned and led to delegation of commissioning. For example, mental health services now had a lead provider model in place which was recognised and actioned through the programme.

Some people told us they had participated in the mental health experts by experience work for a couple of years, and the local authority was passionate about promoting the voices of people with lived experience. An expert by experience is a person who has personal, lived experience of a type of health or care service, or who cares for somebody receiving a service. The local authority had 2 main mental health experts by experience groups. The first group was a dedicated participation service delivered by voluntary care sector partners and the second was their own Experts by Experience Programme who ran workshops to help people develop their skills and confidence to get more involved in co-production opportunities and focus groups for the experts by experience to feed into.

Leaders told us they supported the VCFSE sector and helped them to develop in East Sussex. The local authority had worked hard on relationships with VCFSE and done a lot of collaborative work which they were proud of. Leaders told us they could see the value of the VCFSE as for example, they had supported the rehoming of 2000 Ukrainian migrants in East Sussex. The local authority had commissioned a social consultancy service to carry out a review of voluntary sector activity across the county, to help them understand the support that was available and identify any potential gaps.

Partners told us there were approximately 3500 voluntary sector stakeholders who worked across the county. The VCFSE alliance received some local authority funding to focus on supporting any strategic work. The alliance had been able to provide good support to local authority commissioners to inform them of what was needed locally. They also told us they had supported the local authority to improve working conditions across the sector which had reduced competition and improved collaboration between VCFSE providers.

## Theme 3: How the local authority ensures safety within the system

### Safe pathways, systems and transitions

#### Score:

2 - Evidence shows some shortfalls

#### What people expect:

When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place. I feel safe and am supported to understand and manage any risks.

I feel safe and am supported to understand and manage any risks.

#### The local authority commitment:

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

#### Key findings for this quality statement

##### **Safety management**

There was a case risk management policy which was aimed at all operational staff. This was supported by practice standards, case monitoring documentation and training. Staff told us they had a policy in place when looking at referrals. The team would look at high risk which would be contacted immediately or within 48 hours, medium risk which would be contacted within 1 week and low risk which would be contacted within 2/3 weeks with a contact letter also sent out.

The local authority had quality assurance oversight of the independent care sector ensuring risks to people were minimised, and the care sector was supported. The local authority had a Market Oversight Panel (MOP) which was multi-agency two-weekly forum chaired by adult social care staff. The forum shared information about the independent care sector to identify potential risks to people, understand risks and impacts on the wider market and providers and was a coordinated support to the market. The MOP could make recommendations to suspend a service, which would then be ratified by Departmental Management Team. Other decisions such as the provider agreeing to a voluntary embargo were also considered by the MOP.

There were 2 acute hospitals within the local authority area and 5 community hospitals placed in, Bexhill, Lewes, Crowborough, Uckfield and Rye. There was a hospitals pathway acute in-patient assessments process map for people who were admitted to an acute hospital ward. Useful good practice reminders to staff were outlined on top of the process map for discharge such as; ensure carers are identified and assessed, safeguarding concerns identified and reported, case notes recorded of all conversations and equipment

identified for discharge to be assessed by OTs in hospital. Clear actions outlined for discharge pathways 0 to 3.

Some partners told us they had handed care home contracts back to the local authority and robust procedures and support was in place for them. They received weekly meetings with the local authority to safeguard and manage risks of the closure. Each person had an allocated social worker and partners worked closely with the brokerage team to find suitable alternative placements for people. Partners told us the support was unprecedented for people and staff throughout.

## **Safety during transitions**

The local authority had suitable processes in place to support people with transitions to adult social care. They had a transitions charter in place which set out what young people could expect from the transition service. It highlighted they would be respected, recognised and valued, and their views and opinions would be considered and responded to. People told us they transitioned from children's services to adult services around the age of 18 to 19. They had a social worker visit them every few weeks during the transition period and throughout the process it was clearly identified what was important to the person. Choices of placements and options were offered, with the opportunity to explore care provisions with social workers before agreeing to support.

Services and processes supported a young person with support needs or young carer to prepare for and move successfully from using children's services to using adult services. The Care Act required a local authority's adult social care to carry out a child's needs assessment, known as a transition assessment, for young people approaching their 18th birthday who are likely to have needs for care and support after they reach 18. Staff told us link workers would start working with a person at 14, they would attend all statutory meetings and provided information around the transition. The team would then work with a person who was 17 1/2 years old giving 6 months for the full transition from children services to adult services. Once the core assessments were completed brokerage would start sourcing placements when the person became 18.

There was also a transition service pathway process map which outlined the key age and school years when the transition service or the Children Disability Service support young people in transition to adult social care needs. It had clear information for staff to follow when a Young Person is 17.5 years old in terms of referral and process as well as post education aged 19-25 years.

Hospital discharge was not always completed in a timely manner for people and there were delays with discharging people. Staff told us of the challenges faced by Discharge to Assess (D2A) capacity. The local authority was discussing with system partners capacity in D2A beds. Leaders told us there was an impact on people being delayed in hospital, the ambition was to get people out as soon as possible. Delayed discharge position was discussed monthly within leadership meetings. There had been more than a 10% reduction in hospital delays and there were low delays in terms of NHS community services. The local authority was working with partners to find a solution to the delays with discharge; however, this issue had not yet been resolved at the time of assessment.

Staff told us the discharge to assess team tried to keep consistency of social workers allocated to homes that have D2A beds, to build better relationships with nursing staff and management. This supported joined up care for people to achieve better outcomes. They would aim to complete assessments within 28 days to make longer term plans. Partners told us the D2A assessment bed capacity was reduced which had affected discharge planning.

There were clear processes for practitioners to follow for when a person was discharged from an acute hospital and there were discharged to assess teams from the local authority within the hospitals. There were 4 pathways for discharge called pathway 0,1,2 and 3. Pathway 0 was discharging home with no support, pathway 1 was for a person to return home with care and support, pathway 2 was for reablement at home or intermediate care and pathway 3 would be for people needing to go to D2A beds for further assessment.

## **Contingency planning**

Contingency planning was recorded within people's care plans for either the individual being supported or their unpaid carer. There was a section within support plans which referred to 'Dealing with Risk and Contingency Planning' where local authority staff could record specific contingency plans and risks for people. Some people told us they had not needed support from the local authority for contingency planning, however, they felt the local authority would be supportive if contingency planning was needed such as if care was needed at short notice. Whilst other people had told us they relied on family members support in the event of an emergency.

The local authority had a Business Continuity Plan which covered adult social care essential services for vulnerable adults within the community. The plan covered a range of areas including what to do in the event of staff shortages, loss of a building, technological failure and loss of an external service provider. There was a business continuity manager assigned to each department who was responsible for liaising with the business continuity team and planning coordinating department. The business continuity manager would ensure all staff were aware of the business continuity plans and how they worked.

A Business Continuity Group took overall ownership of the actions of the Business Continuity Plan. In the event of business issues with providers, the Service Solutions Team would negotiate the transfer of care for individuals to alternative service providers.

The Procurement Team would support the service providers with concerns regarding TUPE and contract terms. The Market Support Team would support service providers in addressing disruption or closure and prevent further closures.

The local authority had contingency measures in place to support providers in exceptional circumstances. They had supported services in business continuity situations, including illness, fire, flood and reduced staffing. They initially focused on providing expert advice and supporting the development of an action plan, however, in exceptional cases where time-limited additional help could be provided. Examples included emergency provision of meals, cleaning and hygiene services and support to access temporary care staff. Partners told us where they had supported emergency placements for people the local authority were supportive and kept in close contact with partners to ensure the person remained safe.



The local authority operational teams had Business Impact Assessments which incorporated business continuity plans. There were clear processes in place to manage a council wide incident and there was a volunteer list of Major Emergency Team (MET) responders who had volunteered to support in emergencies.

There was a risk management plan to mitigate and minimise disruption in the event of an emergency such as, loss of buildings, technological failure or staff shortages. The plan covers the impact for critical services and allowed them to explore ways to mitigate risk to protect individuals. There was a departmental emergency plan to support in the identification of vulnerable people and would actively work with families, volunteers and the community to support people in need of support. The DASS and Health were the strategic leads in event of an emergency and were the main leads to co-ordinate and determine the response level from the local authority. The role of adult social care in the event of an emergency was to ensure that adult social care services were delivered within the available resources. All the initial notifications of an emergency went to the departmental emergency manager and then down through the hierarchy of adult social care.

The local authority utilised a flow diagram which provided directions on what actions should be undertaken if a regulated care and support provider reports disruption or closure. The procedure stipulated that client safety and continuity of care for the individuals should be primary with regular meetings to manage the issues. When the local authority received a notification from a provider highlighting future closure there were several actions which must be implemented to manage the risk to the service users accessing the service. The first meeting with the provider would identify a few issues including the timescales of closure, circumstances and gather a full client list. They would ensure that meetings with providers in the event of a closure covered the following subjects, a full situation update, services issues including staff and communication and client management with key information and risks.



## Safeguarding

### Score:

3 - Evidence shows a good standard

### What people expect:

I feel safe and am supported to understand and manage any risks.

### The local authority commitment:

We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.

### Key findings for this quality statement

#### **Safeguarding systems, processes and practices**

Safeguarding is the process of ensuring that adults at risk are not being abused, neglected or exploited, and ensuring that people who are deemed to be unsuitable do not work with them.

There were effective systems, processes, practices to make sure people are protected from abuse and neglect. Safeguarding referrals were received and triaged by HSCC. There was a dedicated safeguarding team within HSCC called the safeguarding hub. Safeguarding concerns could be raised to HSCC via telephone, email or through an online form. An Emergency Duty Team (EDT) were in place to address urgent issues outside of normal working hours to ensure 24/7 coverage.

Safeguarding enquiries were undertaken by neighbourhood teams and the ethos of 'safeguarding is everyone's business' was embedded across the local authority. Staff told us neighbourhood teams completed safeguarding enquiries to ensure consistency for the person subject to the enquiry as the professional was already known to the person. Adult Social Care Survey 2024 data showed 70.73% of people who use services who feel safe, which was similar to the England average of 71.06%. 84.38% of people who use services who say that those services have made them feel safe which was somewhat worse than the England average of 87.82%.

SACE 2024 data showed 85.43% of carers who feel safe, which was somewhat better than the England average of 80.93%. Within the process of the local authority's client and carer satisfaction survey, Listening to You, there was a unique code to identify people where there may be a safeguarding issue, or if the individual made it clear they wanted a response. Each survey was screened, and if action was needed this was referred to the appropriate team.

The local authority had effective processes for quality assurance oversight of safeguarding. A Safeguarding Development Team (SDT) led on strategic development and improvements to safeguarding for the local authority. The SDT undertook and reported on safeguarding audits and provided support to neighbourhood teams on all areas which related to safeguarding. The team also led on managing allegations against people in positions of trust and had close links to the Safeguarding Development Board Manager and Safeguard Adults Board (SAB).

A case allocation tool had been developed by the SDT which would assess the complexity of a case and identified the level of experience a practitioner undertaking the Lead Enquiry Officer (LEO) role would need. Leaders told us there was a clear business plan and set of priorities for safeguarding. Each neighbourhood team had a member of the SDT. Safeguarding audits were key assurance around practice, and they had increased the number of audits being undertaken as part of quality assurance.

The local authority worked closely with the Safeguarding Adults Board (SAB). There was a clear outline of the role and purpose of the Safeguarding Adults Board and how they worked together with the local authority. There was a plan in place which shared both the local authority and SAB's vision, areas of partnership working and five strategic priorities, which continued unchanged from the 2024-2027 plan. Leaders told us the vision for safeguarding was clear and collectively owned, with an ethos of making sure everyone is safe.

Data provided in the Adult Social Care Workforce Estimates 2024 showed 55.52% of independent/local authority staff completed Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS) training. This was significantly better than the England average of 37.58%. 65.11% of independent/local authority staff completed safeguarding adults training, this was significantly better than the England average of 48.70%.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental ability to do so for themselves. When people in care homes and hospitals are deprived of their liberty in a safe and correct way, to receive care and treatment. This is legally authorised under the Mental Capacity Act 2005 and is only done in the person's best interests and when there is no other way to look after them.

## **Responding to local safeguarding risks and issues**

The SDT recorded learning activity that took place in neighbourhood teams following the publication of a Safeguarding Adult Review (SAR). The SDT used a safeguarding learning checklist to monitor how and when learning had been disseminated. They were working to increase learning opportunities for each future SAR. Learning was disseminated across the local authority and partners through learning briefings at meetings, podcasts and SAR action plans.

Multi Agency Risk Management (MARM) meetings were set up because of feedback from SAR's where it was identified that there had been insufficient opportunities for partners to jointly discuss complex, high risk situations. The MARM brought professionals together to ensure that there was a forum to do this. The MARM meetings had been reviewed and decided to continue to effectively manage risks across the county. The Safeguarding

Adults Board (SAB) would support to identify homelessness needs and there was also a rough sleeping coordinator as part of the MARM.

There was a commissioned SAR's tracker in progress on actioning recommendations. Evidence provided by the local authority on their SAR's tracker showed all the actions rated across nine Safeguarding Adults Reviews were green or amber, this showed actions were actively being worked on and completed. Actions were RAG rated and provided a clear and consistent snapshot of current progress towards publication. Timescales and lead officers were included within the action plan, with expected sign-off dates.

Leaders told us the common themes from SAR's were mental health, substance misuse, alcohol and self-neglect. We were told these needed a focus moving forwards, however, informing other partners was not done in a systemic way currently. The local authority had developed a multi-agency working policy and had recognised the need for more effective partnership working, with a focus on this over the next few years. When there were multiple different SAR's of a similar nature these would be placed into 8 themes, which management would have oversight of and focus on. There was a safeguarding steering group for adult social care actions where oversight was provided of these taking place. The SAB also produced reports drawing together themes. Staff told us there was an increasing complexity of safeguarding which had resulted in increased focus of reflective practice. This has improved team confidence and capability.

There was an organisational safeguarding pathway in place at the local authority which told us how they managed suspected organisational abuse. It took the form of an algorithm in four stages, concern, decision making and enquiry, planning and review, and closure. The local authority gave past examples of where suspected organisational abuse took place and the decision-making processes around them, the planning of actions, the use of Independent Chairs and the importance of professional curiosity and proportionality. The guidance was currently under review, following feedback from a Local Government Association peer review regarding large scale enquiries.

The local authority had carried out reviews following deaths from domestic violence. In lessons learned they found that there was always a focus on people to manage the risk and keep themselves safe. The review found that agencies must do more to reinforce measures against perpetrators. This included continuing to assess risk, particularly when new information came to light and ensuring professionals had awareness of support options. It also recognised raising awareness for informal carers and health partners, as well as the need to raise awareness of cuckooing across all agencies and safeguarding teams. Cuckooing is a practice where people take over a person's home and use the property to facilitate exploitation resulting in them losing control of their property. It's an illegal practice that often involves exploiting individuals who are more vulnerable, isolated or struggling. The property may then be used for criminal activity, including drug dealing, sexual crimes and storing weapons.

## **Responding to concerns and undertaking Section 42 enquiries**

The local authority responded appropriately and in a timely manner to safeguarding concerns. Local authority data told us the number of safeguarding concerns which had developed to section 42 safeguarding enquiries were 1815 in a 12-month period. All section 42 enquiries would be allocated to an LEO within 5 days and there were no waiting lists for allocation. A section 42 enquiry is the action taken by a local authority in response

to a concern that a person with care and support needs may be at risk of or experiencing abuse or neglect.

The local authority identified that their safeguarding conversion rate from concern to section 42 enquiry was high, compared to regional comparisons. The local authority Safeguarding Steering Group undertook an audit and found out of 37 cases only 1 should have been logged as a concern. Local authority data showed an audit by the Safeguarding Steering Group concerning the conversion of concerns into general safeguarding enquiries and Section 42 enquiries. The overall conversion rates from February 2023 to January 2024 was 54.2% for general enquiries and 40.2% for Section 42 enquiries. These were higher than the national average, at 33% and 29%. Areas for learning and improvement were identified and recommendations made following the conclusion of the summary report. These included investigating the reasons why the rate of contacts and enquiries were rising and to consider convening staff briefings to improve communication.

Staff told us that safeguarding referral rates could fluctuate with no month looking the same. Staff would look at if cases required additional support from other areas before progression to a S42 enquiry. If issues could be resolved from input from other areas for example, housing, they would try to resolve these first. Managers had oversight of all cases and supported staff with the direction cases needed. If staff decided that a section 42 enquiry was not appropriate and a manager disagreed, the manager would override the decision. There was a safeguarding pathway in place for staff at the local authority. Where safeguarding concerns were not progressed to a section 42 concern the safeguarding pathway would support staff to identify if other support is needed.

The local authority had a high number of people awaiting a DoLS authorisation. Data provided by the local authority for DoLS applications showed there were 961 people on the waiting list. The median wait time was 13 days and maximum wait time was 332 days. The highest risk applications were prioritised for a rapid response. DoLS applications that were prioritised with a 7-day response were for people that did not have a potential Relevant Person Representative (RPR), people that had a Paid RPR or the person had a short-term DoLS in place. Where requests did not meet the above criteria, they were allocated based on the length of time that they had been on the waiting list. To address the waiting times for DoLS and to reduce wait times, the Departmental Management Team (DMT) had agreed to the recruitment of an additional 2.5 posts within the DoLS service to address the backlog. Progress was monitored through the monthly Steering Group for waiting times and reviews, and through the fortnightly Operational Management Team (OMT) meetings.

Relevant agencies were not always informed of the outcomes of safeguarding enquiries when it is necessary to the ongoing safety of the person concerned. Partners told us they did not always receive a response from the local authority when submitting safeguarding concerns. This left providers assuming low level safeguarding's had not been accepted or closed. We also heard when section 42 enquiries were carried out the response from the local authority was inconsistent. In some cases, there had been regular safeguarding meetings between the provider and local authority along with visits from the Market Support team, but this had not happened consistently. They told us whilst there were robust procedures in place, they had found the communication from the local authority regarding the outcomes of referrals to be poor at times. They told us they did not always receive constructive feedback from the local authority when referrals did not meet section 42 criteria and told us there had been some challenges with their relationship due to this.

## **Making safeguarding personal**

Making Safeguarding Personal (MSP) was embedded across the local authority and was included in relevant training. The local authority provided training to their own staff as well as staff working for provider organisations, with training based around safety and safeguarding. A specific training offer of Making safeguarding personal enquiries was offered to LEO's.

The local authority told us auditing was used in relation to safeguarding enquiries. The audit would identify certain areas such as, evidence of the empowerment of people, the protection of people, prevention, proportionality, partnership and accountability. The local authority had audited 37 safeguarding cases for the year 2023/24. The audit's identified MSP was evidenced within safeguarding cases, for example, MSP was at the centre of decision making. People's views were accounted for whilst ensuring the right balance of risk reduction.

The safeguarding adult's pathway in the local authority had an emphasis on the need to ensure that the person subject to enquiry or their representative were kept informed where appropriate. Safeguarding Adults Collection (SAC) 2024 data showed 98.77% of individuals lacking capacity who were supported by an advocate, family or friend which was significantly better compared to the England average of 83.38%.

## Theme 4: Leadership

### Governance, management and sustainability

Score:

3 - Evidence shows a good standard

The local authority commitment:

Key findings for this quality statement

#### **Governance, accountability and risk management**

There were clear and effective governance, management and accountability arrangements at all levels within the local authority. The local authority used Adult File audits to understand how practitioners, teams and services had worked with adults and their family. Each member of staff who completed Care Act assessments would have at least two case files audited each year, completed by the Practice Managers or Senior Practitioners of the person they supervise. Staff told us this was a positive process for quality assurance, accountability and to see where improvements could be made in their practice.

The Quality Practice and Assurance Framework aimed to provide a range of resources to help support service delivery for example, manage risk, monitor and review practice within teams and ensure the voice of the person accessing the service was central. The framework consisted of five components, standards, staff competencies, supervision and appraisal and case file audits. The local authority had quality assurance and resource panels. The purpose of these were to ensure adult care assessments were robust and strength based and that support plans had considered prevention wellbeing and choice. Staff told us the previous audit system had been old and not fit for purpose, prompting the creation of a new quality practice assurance framework and a temporary role, within the Principal Social Worker team, for them to oversee its implementation and develop improved auditing practice. They reported this had been a positive process with good opportunities to share learning and good practice across teams.

There was a stable adult social care leadership team with clear roles, responsibilities and accountabilities. Leaders were visible, capable and compassionate. The Principal Social Worker hosted and supported a range of forums where professional development materials and opportunities were promoted, and practice issues could be discussed. The local authority had an internal scheme of authorisation by the Director of Adult Social Care dated April 2024. This was a formal document which set out clear lines of delegation from the Director of Adult's Social Care and health to Departmental Management Teams. Staff told us leaders were approachable and supportive at the local authority.

There were clear risk management and escalation arrangements. These included escalation internally and externally as required. There was a Risk Management Framework which set out the local authority's policy on risk management and its strategy for effective identification, assessment and management of risks. Management and

leaders regularly reviewed the register and where appropriate de-escalated or escalated risks. The register included key measures associated with discharging their duties under the Care Act. Each year they had an Internal Audit Strategy and Annual Audit Plan which takes account of identified risk areas.

Performance on waiting times was reported monthly and formally reviewed 6-weekly at the Waiting Times Steering Group. Staff told us they had monthly KPI's that were monitored within the management data pack and that information fed into the performance board. New guidance had been launched on how to manage waiting times and waiting lists. There was a real emphasis on ensuring teams knew the importance of data and accurate recording of data is everyone's role. Leaders told us waiting lists were a key risk area with regards to the management and assurance in relation to keeping people safe. There were mechanisms in place to identify those at risk and manage risk appropriately. The local authority was working to reduce the waiting lists and used data to help them identify challenges that may arise.

## **Strategic planning**

The local authority uses information about risks, performance, inequalities and outcomes to inform its adult social care strategy and plans. The local authority collected data about ethnicity and communication preferences which was collated and analysed to inform strategic planning within their EDI strategy, for translation and interpreter services. The local authority's EDI ambition was to create fair, safe, accessible and inclusive care and support services. There was a scrutiny review of equality and inclusion in the local authority adult social care. The review looked at a range of evidence such as, information provided by the department, internal data, external reports and case studies. The review board found that there were several groups which could have better engagement and several barriers which may be preventing people within these groups from accessing services. The review identified who seldom heard groups were, what some of the barriers were to accessing services, and potential solutions to remove these barriers and increase engagement. Recommendations were made by the board and an action plan formed, which was being worked on at the time of assessment.

The local authority's political and executive leaders were well informed, and the scrutiny process was effective. The scrutiny committee would receive regular data from adult social care and had regular contact with adult social care leaders. Leaders told us there was a robust scrutiny process, however, members felt breadth of remit within this was too broad. For example, Children's and Adults' Services have been amalgamated so a review for children's transport takes place in the same meeting as adult social care, meaning they would not be able to go into depth. There were no plans for a scrutiny process change at the time of assessment.

The local authority had a co-production group in place who were able to support with strategic planning. The local authority had an adult social care strategy called 'What Matters to You' which had been driven by what people's priorities were and had been developed in co-production with the Citizens Panel. The panel would continue to work with the local authority beyond the launch of this strategy to review the impact of changes and holding the local authority to account.



The local authority told us the IMT were involved within the Strategic Commissioning Framework. The IMT was facilitated by the local authority but made up of adults with learning disabilities who drew on services. The IMT were heavily involved in co-production and service development across East Sussex. For example, creating specific questions and Key Performance Indicators (KPI's) for tenders, sitting on tender panels and the production of easy read documents. A member of the IMT also co-chaired the Learning Disabilities Partnership Board.

The local authority was developing a Prevention Strategy. The strategy had a clear focus on prevention and wellbeing to reduce care and support needs. However, this strategy was not a final document and was currently a planning and discussion document. Some leaders told us they were making a good start with the prevention strategy. Records showed the amount of prevention schemes and funding was the challenge. They told us covering statutory duties and providing services in line with the Care Act was priority. Other leaders told us further work is required to achieve collective understanding with members of the prevention strategies.

### **Information security**

The local authority had a secure database which could share case management data if needed, as well as data feeds from key partners like community health. Adult social care data was available to health colleagues and access to health data for local authority staff was being progressed.

Partners told us there was no one system that both health and social professionals could access. They did have an integrated data set that provided summary notes and basic information to social care professionals, but this did not give details. This was primarily used for people with Section 117 funding or CHC funding. Staff told us although there was no shared data system due to close partnership working information was accessible from partner colleagues where needed.

There were multiple data policies in place such as, Data Protection and Information Security Policy which covered the standards and procedures staff should follow when handling personal data, Data in Transit Policy which covered guidance on appropriate security measures when transferring information between secure locations and Special Category Data Policy which outlined standard and procedures staff should follow when handling sensitive data.

Safeguarding data from HSCC was sent to quality assurance weekly. The data system also allowed for safeguarding enquiries to be linked which staff could see a holistic picture of themes and trends of safeguarding.

Leaders told us the cabinet received quarterly data on adult social care and could ask for data at any point. The DASS would also cover performance data in weekly meetings with the Lead Member.



## Learning, improvement and innovation

### Score:

3 - Evidence shows a good standard

### The local authority commitment:

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

### Key findings for this quality statement

#### **Continuous learning, improvement and professional development**

There was an inclusive and positive culture of continuous learning, improvement and development. Local authority staff had ongoing access to learning and support so that Care Act duties were delivered safely and effectively.

Staff told us about the numerous opportunities for career progression and staff development. The local authority had an in-house team that delivered adult social care training for council staff, as well as for staff in a broad range of independent care sector settings. The training offer included, Care Act duties, Learning on Specific Conditions, Mental Capacity Act, Equalities, Diversity and Inclusion, and Safeguarding Adults.

Training requirements were identified in supervisions and team events, with the in-house team who designed and deliver bespoke training on request. As well as e-Learning courses the local authority offered professional development sessions and reflective practice sessions.

The local authority shared learning, best practice and innovation with peers and system partners to influence and improve how care and support was provided. Staff were encouraged to bring case studies to reflective practice sessions and discuss learning from past case experiences. This promoted shared knowledge and experience amongst the wider teams and allowed professional best practice discussions, which benefited not only the more experienced professionals but also the newly qualified social workers who were at the beginning of their careers. Staff told us they were encouraged to join networks with other professionals both locally and nationally, widening that level of peer support beyond the local authority team.

The local authority provided a workstream summary around steps they had taken to maintain knowledge and awareness of relevant legislation. The objective of this work stream had been to provide long term assurance about the staff's legal literacy, for staff to understand key legislation in particular the Care Act and for them to demonstrate how to apply it to practice

Staff demonstrated a good understanding of the legislative frameworks in which they worked under including the Mental Capacity Act 2005, they provided examples of how to use this legislation when working with people who lacked capacity to make their own

decisions. Staff demonstrated their understanding of a person's right to make unwise decisions and how they would support a person to remain safe if a decision they had made was deemed to be unwise and risky.

The local authority had a Competency Framework relating to safeguarding and mental capacity that formed part of a social workers annual appraisal to ensure competencies in both are met and training needs identified around issues of capacity.

There was support for continuous professional development. The local authority recognized that people would seek support when in crisis. Many of the calls the contact team received could be emotionally challenging for the professional taking the call. People may be at crisis point unable to cope in their caring role or be physically unable to look after themselves. People may be dealing with a mental health crisis and feel isolated or suicidal. Staff told us that they received a lot of calls from people feeling emotionally low and suicidal. Having emotive calls regularly could impact on the worker and therefore the local authority has provided workers with emotional resilience training and emotional support allowing workers to recognize their own feelings when taking calls that may provoke an emotional response.

Staff told us that they received a robust 6-month induction training programme. Staff had a 2-week training package before shadowing other professionals in their roles. This allowed new staff members to learn and ask questions in a supportive environment.

Staff told us that it was vital new staff had a clear understanding of the local authority pathways, process and policies before they have their own workload to complete. This training package allowed staff to learn in a classroom training environment and be supported with more hands-on work with real people requiring local authority support.

Staff could have additional supported supervision sessions in their first few months until they were confident in their roles. Staff had access to learning courses and could seek guidance and support from more experienced team members and managers. Staff told us that the senior leadership team were very visible within the local authority and staff could approach senior leaders if they required support.

The local authority advocated a strengths-based practice (SBP) model with a strong emphasis on wellbeing, choice and self-direction. SBP training was launched in East Sussex in 2019 with an 18-month training schedule covering: Strengths-Based Approaches, Support Planning and Positive Risk Enablement.

Staff recognised the importance of language and how they used language when assessing people under the Care Act. Many unpaid carers might not acknowledge themselves as a carer or wish to be identified as a carer especially if they were a young carer for a parent or sibling. Therefore, tailoring the language used when completing carers assessments such as asking, "what tasks do you help with" instead of asking "what caring responsibilities do you have", could provide the carer with a more personalised approach to their assessment making it seem a less formal process giving the assessor the opportunity to focus on the strengths of person being assessed.

The local authority worked collaboratively with people and partners to actively promote and support innovative and new ways of working that improve people's social care experiences and outcomes. Partners told us how the Principal Social Worker within adult social care had requested the organization share their expert knowledge and experience in a training

session with local authority staff. The training session centred around the role of advocacy within the Care Act and the local authority duties. The awareness raising session improved practitioners' knowledge of how advocacy could be used to support individuals through a statutory process and how and when to refer into the advocacy organisation.

Coproduction was embedded throughout the local authority's work. Experts by Experience informed us that they had been involved in a co production project with the local authority named "What Matters Most to You" which resulted in 6 topics being identified that matter to service users. Right care, Right place, Right time, Information and Communication, Cost of Living now and in the Future, Suitable Home, Personal Connections, Group Activities, Hobbies and Volunteering were topics identified from the local authorities co production work.

A piece of co production work took place where the local authority wrote to all recipients of direct payments for feedback of the service. They looked at what things were important to people and it was a focused piece of co-production with individuals of lived experience. Staff told us they met with people every month to discuss what the new model would look like before this was created and implemented. A strategic partner was commissioned because of this new system and the local authority continued to work with them. They worked alongside the Direct Payments team to support individuals and the growth of direct payment.

The local authority had also used Experts by Experience in their staff training programs, as part of their interview panels for recruitment. We heard how Experts by Experience had been used to produce easy read documents and this work was that successful that the Experts have been approached by other organisations to complete easy read documents for them. Easy read documents are documents produced for people who may struggle to read and understand complex language, they include no jargon and straightforward language with a mix of pictures.

The local authority had also contributed to an article for learning disability week on this topic. They highlighted the importance of access to easy read documents and training to professionals about issues people with learning disabilities experienced.

Staff and leaders engaged with external work, including research, and embedded evidence-based practice in the organisation. The local authority promoted the use of their membership to research into practice in order to support newly qualified social workers NQSW's, continual professional development and evidence for competencies.

The local authority also held events to inform practice, promoting social care events to staff on their intranet site for such training as trauma-informed practice, self-neglect and promoting live events which were relevant to their practice. During World Social Work Week, the local authority promoted their celebrations of world social work week on their intranet which included them hosting a social work matter drop in and presentations relating to various themes such as safeguarding practice and strengths-based practice.

## **Learning from feedback**

The local authority learned from people's feedback about their experiences of care and support, and feedback from staff and partners. This informed strategies, improvement activity and decision making at all levels.

In 2023/24 the local authority received their biggest number of complaints in relation to assessments (80 complaints). This accounted for 24% of all the complaints. Of these 80 complaints 10% were in relation to social care, 11% were in relation to financial assessments and 3% were in relation to blue badges. The most common issue was about delay in assessments. Leaders told us waiting lists had been raised within scrutiny committee. The local authority had implemented changes to support with waiting times, such as, regular communication with people whilst waiting and signposting to services who may be able to support in the meantime.

The local authority used complaints to help them to improve services and they had 258 recorded actions for these. Actions from complaints have included, individual staff development, team development and service and organisational development. This had been actioned through policy reviews, improvement projects, training and communication. Examples included a review of the direct payments process to provide information at an earlier stage and develop how teams worked together.

**Report to:** People Scrutiny Committee

**Date of Meeting:** 20 November 2025

**By:** Director of Adult Social Care and Health

**Title:** Reconciling Policy Performance and Resources (RPPR) - Adult Social Care and Health 2025/26 savings update.

**Purpose:** To update People Scrutiny Committee on the outcomes and impact of the Adult Social Care and Health savings initiatives, that were agreed by Cabinet in February 2025.

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## Recommendations

**The People Scrutiny Committee is recommended to consider and comment on the report.**

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### 1. Background and Supporting Information

- 1.1 In September 2024, as part of the Council's Reconciling Policy, Performance and Resources (RPPR) process, ASCH put forward 11 savings proposals requiring public consultation. Many of these proposals were significantly amended as a result of the consultation process which ran during the autumn of 2025.
- 1.2 On 20 February 2025, the People Scrutiny Committee considered the revised savings proposals that would be presented to Cabinet. The views of the People Scrutiny Committee were taken into account when Cabinet made decisions on the proposals at their meeting on the 25 February 2025. Appendix A shows the original summary of the forecast savings amount and the summary impact for all the savings initiatives that were agreed by Cabinet.
- 1.3 Subsequently, two of the Cabinet decisions relating to Linden Court Day Centre and the Housing Related Floating Support Service were called-in. The Call-in related to two areas of concern and how these were taken into account in the decision making process:
  - Whether the impact of the proposal on Districts and Borough Councils was sufficiently considered; and
  - Whether the interests of a future unitary authority were explicitly considered.
- 1.4 Following the call-in, the decisions on Linden Court and the Housing Related Floating Support Service were considered again by the People Scrutiny Committee on 17 March 2025 and were referred to Full Council on 20 May. At Full Council, it was agreed that the decision taken in February regarding the Housing Related Floating Support service should be enacted. It was agreed that further work with affected families should be undertaken regarding the Linden Court proposal. A revised savings proposal to retain a day service at Linden Court for Adults with Learning Disabilities, at the current maximum occupancy level of 25 adults per day was agreed by Cabinet on the 15th of July 2025.

- 1.5 This report provides an update on the following areas (as applicable) for each of the 11 savings initiatives considered by People Scrutiny Committee earlier this year:
- a) **Progress** – what has been achieved to enact the agreed saving and any work still required.
  - b) **Impact - Adults and Carers** - the impact of the change on adults using the service, their carers and families.
  - c) **Impact - ASCH Staff** - the impact of the change on ASCH staff working in the service.
  - d) **Impact - Property** – The position regarding ESCC buildings/property.
  - e) **Impact - Other** - Any other known impacts, actions or outcomes relating to the change. These may relate to progress on actions identified in the Equality Impact Assessment and any impacts on wider social care and health system.
  - f) **Actual / revised estimate of savings** - the current actual / estimated saving compared to the original savings forecast in the February 2025 Cabinet papers and the reasons for any variance.
- 1.6 The savings initiatives considered in this report are:
1. Linden Court – Learning Disability Day Service
  2. Hookstead and St Nicholas - Learning Disability Day Services
  3. Steps to Work - Learning Disability Support into Employment
  4. Community Support Service (for people with a learning disability)
  5. Supported Accommodation for People with Additional Needs
  6. Supported Accommodation for People with Mental Health Needs
  7. The Phoenix Centre Older People's Day Service
  8. Milton Grange Older People's Day Service
  9. Mental Health Community Outreach Service (Older People's Directly Provided Services)
  10. Housing Related Floating Support Service
  11. Drug and Alcohol Recovery Services
- 1.7 The Committee is asked to note that both of the Supported Accommodation proposals are covered in this report under section 6. A summary of the actual number of adults, carers and ESCC staff impacted by the changes is provided in Appendix B; and a summary of the actual (or current forecast) savings is provided in Appendix C.
- 2. Linden Court**
- 2.1 Cabinet agreed to close the Linden Court Day Service for people with a learning disability and merge it with Beeching Park day service on 25 February 2025. This decision was called-in on 4 March 2025 by People Scrutiny Committee Members Councillor Cross, Councillor Field, Councillor Lambert and Councillor Webb. The Call-in related to two areas of concern and how these were taken into account in the decision making process:
- Whether the impact of the proposal on Districts and Borough Councils was sufficiently considered; and

- Whether the interests of a future unitary authority were explicitly considered.
- 2.2 Following the call-in, this decision was then considered by the People Scrutiny Committee on the 17 March 2025 and was referred to Full Council on the 20 May 2025. Following further work, a revised savings proposal to retain a day service at Linden Court for Adults with Learning Disabilities, at the current, actual, maximum occupancy level of 25 adults per day was agreed by Cabinet on 15 July 2025.
- 2.3 The revised decision to retain the service at Linden Court reduced the savings forecast in the original proposal by £182,000.

#### Progress

- 2.4 Linden Court has continued to operate four days per week with the adults attending continuing to receive the same core provision as that prior to the consultation. Current average actual attendance at Linden Court is 22 people per day.
- 2.5 Twilight sessions are no longer offered at Linden Court. These sessions had historically had low attendance, and ASCH were unable to run them earlier in the year due to a lack of staffing capacity created by uncertainty over the future of the service. Due to the low levels of demand the twilight service has not been reinstated.
- 2.6 The Service Manager for Hastings and Rother Learning Disability Day Service has taken on lead responsibility for Linden Court, supported in the management responsibility by a new Deputy Service Manager and Team Leaders. This mirrors the management structure in the west of the county across Hookstead and St Nicholas. The arrangement provides greater opportunity for working across services, has a positive impact on quality and creates an overall saving in management costs.

#### Impact - Adults and Carers

- 2.7 As above, all of the adults who were attending Linden Court before the savings proposals were made have continued to receive the same core service (other than twilight sessions) where they wished to do so.
- 2.8 Six adults have stopped attending Linden Court Day Service since the proposals were put forward due to changes in their care and support needs, for example, they now require residential care.
- 2.9 All the adults attending Linden Court have had a Care Act Review within the last 12 months.
- 2.10 For parent/carers, 20 carers assessments were offered with 14 people taking up that offer.

#### Impact - ASCH Staff

- 2.11 No staff have been made redundant as a result of the revised proposal. The existing staff team at Linden Court have showed commitment and resilience throughout what has been a prolonged period of uncertainty and anxiety for them, the adults they work with and their parents/carers.

#### Impact – Property

- 2.12 The revised proposal and continuation of service at Linden Court means that there are no property impacts.

Impact - Other

- 2.13 There have been no other impacts on the wider system or to adults and parents/carers as the service has remained open.

Actual / revised estimate of savings

- 2.14 The original annual revenue savings target, for a full year, for closing Linden Court and re-provisioning services through Beeching Park and a satellite centre in Eastbourne was £327,000:

**Original Linden Court Savings Proposal (February 2025)**

	Budget	Revised Budget		Total Savings
	2024/25	2025/26	2026/27	
	£'000	£'000	£'000	£'000
Expenditure budget	692	482	355	
Income budget	(40)	(30)	(30)	
<b>Net budget</b>	<b>652</b>	<b>452</b>	<b>325</b>	
<b>Net savings</b>	<b>0</b>	<b>200</b>	<b>127</b>	<b>327</b>

- 2.15 The modified proposal that has been implemented i.e. to keep the service at Linden Court open will achieve savings of £145,000 in 2025/26, leaving a deficit in the original saving proposal of £182,000.

**Current Position - Linden Court savings forecast:**

Savings Target £'000			Forecast Savings delivery 2025-26 £'000			Variance from forecast savings to savings target 2025-26 £'000		
2025/26	2026/27	Total	2025/26	2026/27	Total	2025/26	2026/27	Total
200	127	327	145	0	145	(55)	(127)	(182)

- 2.16 Initially the £145,000 saving was forecast to be achieved over two financial years 2025/26 and 2026/27. Current performance indicates that the total saving of £145,000 will be achieved by the service within this financial year. This is being monitored and reported quarterly.

**3. Hookstead and St Nicholas day services**

- 3.1 Cabinet agreed to retain day services at Hookstead but with a 25% reduction in capacity. The St Nicholas centre would remain open with the same number of places available, but the session times would be revised.

Progress

- 3.2 The modified proposal to retain Hookstead with a reduced capacity reflected the attendance at the service and the staff team in post. Therefore, the new model was



enacted without disruption to adults using the service and avoided the need for changes to staffing.

- 3.3 St Nicholas Day Service continues to operate four days a week as it did prior to the consultation. The session times were amended to ease the pressure at the start of the day, extending the amount of time available for lunch. This change has been well received.

#### Impact - Adults and Carers

- 3.4 The adults who were attending day services at Hookstead and at St Nicholas have continued to do so. Two people have stopped attending Hookstead since January 2025 due to a change in their circumstances.
- 3.5 As there was no significant change in service there was no need for an unscheduled review for the adults attending Hookstead and St Nicholas.
- 3.6 Seven parents / carers took up the offer of a Carer's Review (primarily due to the changes to session times) and these have all now been completed and new arrangements put in place where required.

#### Impact - ASCH Staff

- 3.7 There have been no changes to the staff team at Hookstead or St Nicholas as a result of the reduction in funding. The existing, already reduced, staff teams have continued to deliver the revised service models.

#### Impact – Property

- 3.8 There have been no impacts on ESCC property.

#### Impact – Other

- 3.9 The changes at the day centres have had no wider impacts on the social care and health system and there are no outstanding actions from the EqIA.

#### Actual / revised estimate of savings

- 3.10 The forecast annual revenue savings, for a full year, for the changes to service at Hookstead and the St. Nicholas centre were £68,000.

#### **Revised saving proposal for Hookstead and St Nicholas**

	Budget	Revised Budget		Total Savings
	2024/25	2025/26	2026/27	
	£'000	£'000	£'000	
Expenditure budget	1,116	1,043	1,043	
Income budget	(121)	(116)	(116)	
<b>Net budget</b>	<b>995</b>	<b>927</b>	<b>927</b>	
<b>Net savings</b>	<b>0</b>	<b>68</b>	<b>0</b>	<b>68</b>

- 3.11 The savings of £68,00 are forecast to be achieved in this financial year.

#### 4. Steps to Work

- 4.1 Cabinet agreed to close the Steps to Work Service, including Shine Car Valet based at County Hall, in its current format and implement a revised supported employment offer. The re-modelled service would retain four job coaches to work as part of the Adult Social Care and Health Learning Disability, Directly Provided Services day services offer; re-provisioning the employment support internally whilst still achieving the cost savings.

##### Progress

- 4.2 Steps to Work, including the Shine service, ceased at the end of May 2025. The new Supported Employment Service commenced immediately so there was no gap in provision.
- 4.3 The new service is county wide with Job Coaches working out of St Nicholas Day Service in Lewes and Beeching Park in Bexhill. There are currently two job coaches in post with further recruitment planned, within the financial envelope, to meet demand.

##### Impact - Adults and Carers

- 4.4 There were 63 adults identified as potentially impacted by the re-provisioning of the employment support service. Of these, 12 were settled in other provision which met their eligible needs, before the changes to the Support Employment Service were made, and therefore did not require an ASCH review.
- 4.5 51 adults required an ASCH review and a revised support plan to be drawn up in order to meet their eligible needs in a different way. Of these people:

Service Type	Number of People
Working with new job coaches	5
Continued in paid employment	10
Continued volunteering	6
Attending day service instead	1
College	2
Employment support - other provider	4
Support through supported accommodation provider	23

- 4.6 It was identified that 10 parent/carers should be offered a Carers Assessment / Review as a result of the changes. Of these, seven people took up the offer of a Carers Assessment and new support is in place where required.

##### Impact - ASCH Staff

- 4.7 Originally there were nine members of staff potentially impacted by the savings proposed, but only three were in post at the time of the consultation. Of these three staff:
- 2 were re-deployed within Learning Disability Directly Provided Services
  - 1 person was made redundant (costs below).

### Impact - Property

- 4.8 The Shine service vacated the car park and storage facilities at Westfield House and the entire building and car park is now occupied by the Coroner's Service.
- 4.9 Space at the Phoenix Centre in Lewes was also vacated allowing the whole building to be handed back as an asset to ESCC property as the older peoples' day service in the Phoenix Centre was also closed.
- 4.10 A small amount of space was also vacated at the Bellbrook Centre in Uckfield. This space has been utilised by Occupational Therapy to deliver clinics (previously delivered at the Phoenix Centre).

### Impact – Other

- 4.11 There is no known impact on the wider health and social care system. All adults received reviews to ensure that their eligible needs continue to be met. Similarly, Carers assessments were offered to mitigate any negative impact from the closing of Steps to Work.

### Actual / revised estimate of savings

- 4.12 The planned annual revenue savings, for a full year, for ceasing the existing Steps to Work service, including the Shine service, and providing employment support in a different way was £194,000:

### **Original Supported Employment Savings Estimates (February 2025):**

	<b>Budget</b>	<b>Revised Budget</b>		<b>Total Savings</b>
	<b>2024/25</b>	<b>2025/26</b>	<b>2026/27</b>	
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
Expenditure budget	427	224	224	
Income budget	(9)	0	0	
<b>Net budget</b>	<b>418</b>	<b>224</b>	<b>224</b>	
<b>Net savings</b>		<b>194</b>	<b>0</b>	<b>194</b>

- 4.13 It is forecast that £31,000 of the savings will not be realised in 2025/26. This is due to the initial forecast being for a full year saving and the timescales for decision making and enacting the changes meant that Steps to Work did not close until the end of May. The remaining £31,000 saving will be achieved in 2026/27:

### **Current forecast savings Steps to Work:**

Savings Target £'000			Forecast Savings delivery 2025-26 £'000			Variance from forecast savings to savings target 2025-26 £'000		
<b>2025/26</b>	<b>2026/27</b>	<b>Total</b>	<b>2025/26</b>	<b>2026/27</b>	<b>Total</b>	<b>2025/26</b>	<b>2026/27</b>	<b>Total</b>
194	0	194	163	31	194	(31)	31	0

- 4.14 One member of staff was made redundant. The redundancy cost was £31,065 with an additional cost of £22,736 of pension strain. These costs were met from corporate ESCC reserves.

## **5. Community support services (CSS) for people with a learning disability**

- 5.1 Cabinet agreed that the existing Community Support Service (CSS) offer would be ceased. The support for these adults would be re-provisioned under a more cost effective model within Learning Disability Directly Provided Services through establishing a new Community Outreach offer operating from the existing day service hubs at Beeching Park and St Nicholas.
- 5.2 The new model would provide services from Monday to Friday between the hours of 9am and 6pm. CSS had been delivering services between 9am and 5pm on weekdays and therefore within the hours of the new Community Outreach offer. This would ensure that the assessed care needs of most of the adults impacted by the proposed closure of CSS would continue to be met.
- 5.3 There were, however, five adults accessing some of their support at weekends and these people would be impacted by this proposal. These adults were offered an ASCH review and supported to either change the day they receive support or to identify an alternative form of support for them at weekends.

### Progress

- 5.4 The Supported Living Services have been re-structured, as above, to provide support from within Learning Disability Day Services. The majority of existing CSS staff were re-deployed into these services.
- 5.5 The change was implemented on a phased basis for adults as reviews were undertaken and new packages of support implemented. All of these reviews have been completed and the 'old' CSS model ceased in August 2025.
- 5.6 The new model is providing better coordinated support for the adults living in our supported living settings.

### Impact - Adults and Carers

- 5.7 There were 30 adults potentially impacted by the change to CSS. All of these adults had a social care review to identify their current care and support needs and adjust their support plan if necessary. Of the 30 adults reviewed:

<b>Service Type</b>	<b>Number of People</b>
Transferred to new Community Outreach provision	10
Assessed as no longer requiring support	3
Chose to have support via Personal Assistant	11
Support via existing care agency / housing provider	5
Moved into residential care due to change in needs	1

- 5.8 Of the five people who accessed support at the weekend the revised support plans, following review, saw:

- 2 adults now receiving support at the weekend provide by Personal Assistants
- 2 adults receiving support at the weekend via alternative providers
- 1 adult identified as no longer requiring community support services

5.9 It was identified that four carers assessment should be offered with three being accepted and completed. There were a relatively low numbers of carers identified as the CSS supported people who were living independently in the community.

#### Impact - ASCH Staff

5.10 Initially it had been anticipated that 22 staff could be impacted by the change to the CSS. In the event 20 staff were directly impacted by the change as two staff members were contracted to a specific piece of work which meant they were not affected. Of these 20 staff:

Outcome	Number of Staff
Re-deployed into other posts in ASCH Directly Provided Services	15
Resigned during process	4
Made redundant (costs below)	1

#### Impact – Property

5.11 There have been no impacts on ESCC property.

#### Other Impacts - EqIA actions and wider system impact

5.12 All adults had a social care review that ensured that all of their assessed care needs were being met. Whilst there was some short-term disruption for some people, there have been no lasting negative impacts reported. No complaints have been made about transitioning to the new service delivery models.

#### Actual / revised estimate of savings

5.13 The forecast annual revenue savings, for a full year, for ceasing an element of CSS and providing a re-modelled Community Outreach service was £342,000. This was £56,000 above the initial proposal put forward of £286,000. The additional £56,000 saving enabled Hookstead to remain open.

#### **Savings summary forecast for revised CSS proposal:**

	Budget	Revised Budget		Total Savings
	2024/25	2025/26	2026/27	
	£'000	£'000	£'000	
Expenditure budget	712	285	285	
Income budget	(75)	0	0	
<b>Net budget</b>	<b>637</b>	<b>285</b>	<b>285</b>	
<b>Net savings</b>	<b>0</b>	<b>342</b>	<b>0</b>	<b>342</b>

- 5.14 The full saving of £342,000 will not be achieved in 2025/26 as the CSS did not close fully until August 2025. To ensure a safe and effective transfer of care and support the provision had to remain operational, at a reduced level, for three months.

**Current Forecast Savings CSS:**

Savings Target £'000			Forecast Savings delivery 2025-26 £'000			Variance from forecast savings to savings target 2025-26 £'000		
2025/26	2026/27	Total	2025/26	2026/27	Total	2025/26	2026/27	Total
342	0	342	230	112	342	(112)	112	0

- 5.15 Current performance indicates that a saving of £230,000 can be achieved in 2025/26 with the remaining £112,000 delivered in 2026/27.

- 5.16 There was a redundancy cost of £27,099 and a Pension Strain of £25,416. These amounts were met from the corporate redundancy reserve.

**6. Supported Accommodation for Vulnerable Adults with Additional Needs and Supported Accommodation for Adults with Mental Health Needs.**

- 6.1 In February 2025, Cabinet agreed that the contract for Supported Accommodation for both Vulnerable Adults with Additional Needs, and Adults with Mental Health needs who are homeless or at risk of homelessness, should be ceased on 31 December 2025.

- 6.2 This meant the contracts for on-site support services with Sanctuary Supported Living would not be extended when the contracts reached their natural end, and the contract with Salvation Army Homes would be terminated early.

- 6.3 The services impacted are outlined below:

**Vulnerable Adults with Additional Needs:**

Service/Area	Provider	Number of Residents
St. Aubyn's- Eastbourne	Sanctuary Supported Living	9
Priory Avenue- Hastings	Sanctuary Supported Living	19
	Total residents	28

**Adults with Mental Health Needs:**

Service/Area	Provider	Number of Residents
Hyde Gardens- Eastbourne	Sanctuary Supported Living	19
Pathways- Bexhill	Salvation Army Homes	14
Bal Edmunds- Hastings	Sanctuary Supported Living	12
	Total residents	45

Progress

- 6.4 Confirmation of the cessation of funding was given to providers in February 2025. Since then, regular meetings have been held between ASCH Commissioning and

providers. Both providers have been supported with exit planning arrangements for the contracts.

- 6.5 Resident meetings were held for residents in each of the properties in November 2024 before Cabinet's decision, and then again following Cabinet's decision in February 2025. The meetings were chaired by Adult Social Care Commissioning and attended by representatives from ASCH Operational teams and Housing Options teams from the relevant District and Borough authorities.
- 6.6 Residents and staff were provided with updates and a range of options set out in information packs which the staff at the services were able to use to support resident decision making. For example, whether to request an Adult Social Care needs assessment, Housing assessment or signposting for other support.
- 6.7 At the time of the residents' meetings, the future of the accommodation e.g. service model and criteria for residence were not yet confirmed. Residents were reminded that the services were not intended as permanent accommodation, but transitional services aimed at developing the skills to transition into independent long-term housing. Residents were therefore encouraged to seek alternative housing options to secure their transition into long term housing in a planned way, over the coming months, to avoid potential evictions at the end of the contract.
- 6.8 Negotiations have been ongoing between local stakeholders, and providers are now finalising new support contracts with the District and Borough Housing Authorities which will allow new services to continue operating and accepting new referrals from 1 January 2026. It is therefore not possible to provide information on all of the eventual impacts of the removal of ESCC funding at this time as these outcomes are not known. However, we are able to give a snapshot of progress as of 31 October 2025.

#### Impact - Adults and Carers

- 6.9 There has been extensive, positive, joined up work between providers, ASCH and District and Borough authorities to support the planned move-on for those who were living in the services when the decision to remove ESCC funding was taken. Progress on planned moves is being tracked and coordinated by fortnightly meetings with Housing Options teams from each District and Borough and ASCH Operational teams.
- 6.10 Colleagues from Sussex Partnership Foundation NHS Trust have been notified of the work being undertaken and where required additional support from Mental Health Services is being sought.
- 6.11 No new people have moved into the services since June 2025 to minimise the number of people who will need to move into different accommodation after a short period of time.
- 6.12 The following tables summarise the position for residents that have moved on from the services as of 31/10/2025:

#### **Vulnerable Adults with Additional needs**

<b>Move on destination</b>	<b>People</b>
Social Housing	4
ESCC funded Young People Service	1

Long-Term alcohol Rehabilitation	1
Moved in with Partner	1
Sentenced to Prison	1
<b>Total</b>	<b>8</b>

- 6.13 Four residents with additional needs are still living in the service but have a move-on plan in place.
- 6.14 16 residents with additional needs are still living in the service pending a confirmed move-on plan. Six of these residents have been put forward for a Private Rental Sector pilot scheme so are more likely to be offered PRS properties.

#### **Adults with Mental Health needs**

<b>Move on destination</b>	<b>People</b>
Social Housing	5
Private Rental Sector	3
Sheltered Accommodation	1
Long-term Supported Accommodation	1
Charity Accommodation	1
Employment abroad with accommodation	1
Returned to own accommodation	1
Evicted	1 <i>(due to high risk to staff and residents).</i>
<b>Total</b>	<b>14</b>

- 6.15 20 residents with mental health needs are still living in the service but have a move-on plan in place. Six of these residents have been assessed by ASCH as having eligible care needs and are moving into ASCH funded Supported Accommodation. The remaining 14 people will be moving into a range of accommodation options in the social housing and private rental sectors.
- 6.16 11 residents with mental health needs are still living in the service pending a confirmed move-on plan.
- 6.17 The main challenges for people moving into alternative accommodation are:
- challenges in the availability of suitable housing (particularly in Hastings)
  - the affordability of Private Rental Sector options
  - deterioration in people's mental health and/or non-engagement with the move on process.
- 6.18 For anybody remaining living in the services as of 1 January 2026, the following options could apply:
- a) A formal arrangement with the new commissioning body to remain living in the service whilst further move-on options are pursued.
  - b) Notice being served for formal eviction. In this instance, the Local Housing Authority may have a duty to house the person under 'priority need' and the individual could be entitled to be housed in Temporary Accommodation.
- 6.19 At 31 October, there were estimated to be 27 people (35%) where it may be particularly challenging to achieve a move into permanent settled accommodation by



the 31 December 2025 deadline. These people are mainly from the 'single homeless' cohort.

- 6.20 ASCH Care Act assessments will continue to be undertaken where tenants are eligible, and carers will be offered carers assessments where required. Where individuals find it difficult to secure affordable accommodation options, local Housing Authorities are supporting with this, including enabling access to additional finance to access Private Rented properties.
- 6.21 A Memorandum of Understanding has recently been drafted to set out our ongoing work across adult social care, housing and provider partners when the contracts formally end. The aim of the Memorandum of Understanding is to avoid (or minimise) any requirement for formal evictions. At the time of writing it is not yet known whether all partners will sign up to the Memorandum although it is anticipated that they will.

#### Impact - ASCH Staff

- 6.22 There were no ASCH staff working in the service and no ASCH staff have been impacted by the savings initiative. However, there has been increased assessment activity for ASCH operational staff:
- Vulnerable Adults with Additional needs: Of the 28 residents, 21 requested and received an Adult Social Care assessment. (75%)
  - Adults with Mental Health needs: Of the 45 residents, 29 requested and received an Adult Social Care assessment. (64%)

#### Impact – Property

- 6.23 There are no impacts for ESCC property.
- 6.24 All parties are working to ensure that the properties continue to be used to house adults at risk of harm due to homelessness. Where District and Borough Councils are able to take on responsibility for the units, the services will be retained within the wider system, meaning that many of the impacts identified in the EQIA will be minimised. Agreements in place as of 31 October are:

#### **Eastbourne:**

<b>Service</b>	<b>Current status</b>
Hyde Gardens- Eastbourne	Agreed that Eastbourne and Lewes District and Borough Housing will take on responsibility for the units from 1 January 2026. Will continue to be primarily for residents with mental health needs.
St. Aubyn's- Eastbourne	Future model not yet confirmed. The provider is committed to trying to keep the scheme operational and is considering operating on a 'spot purchase' basis if one of the East Sussex Local Housing Authorities do not block commission all of the available units. However, this is yet to be confirmed.

**Rother:**

Service	Current status
Pathways	Agreed that Rother District Council Housing will take on responsibility for these units from 1 January 2026. Will continue to be primarily for residents with mental health needs.

**Hastings:**

Service	Current status
Priory Avenue	Agreed that Hastings Borough Council Housing will take on responsibility for the units from 1 January 2026.
Bal Edmund	Agreed that Hastings Borough Council Housing will take on responsibility for the units from 1 January 2026

Actual / revised estimate of savings

- 6.25 As the services are continuing until the end of the contract period for on-site support, the actual savings will not come into effect until 1 January 2026. However, it is forecast that both savings will be fully achieved as planned:

Vulnerable Adults with Additional Needs				
	Budget	Revised Budget		Total Savings
	2024/25	2025/26	2026/27	
	£'000	£'000	£'000	
Expenditure budget	258,000	193,000	0	
Income budget	0	0	0	
<b>Net budget</b>	<b>258,000</b>	<b>193,000</b>	<b>0</b>	
<b>Net savings</b>		<b>65,000</b>	<b>193,000</b>	<b>258,000</b>

Adults with Mental Health Needs				
	Budget	Revised Budget		Total Savings
	2024/25	2025/26	2026/27	
	£'000	£'000	£'000	
Expenditure budget	356,000	267,000	0	
Income budget	0	0	0	
<b>Net budget</b>	<b>356,000</b>	<b>267,000</b>	<b>0</b>	
<b>Net savings</b>		<b>89,000</b>	<b>267,000</b>	<b>356,000</b>

**7. Phoenix Centre**

- 7.1 Cabinet agreed to cease to provide day services for older people at the Phoenix Centre in Lewes and look at alternative options for meeting the assessed care needs of the people using the service.

Progress

7.2 Services at the Phoenix Day service ceased on 25 April 2025.

7.3 The building closed on 27 May 2025.

#### Impact - Adults and Carers

7.4 At the time Cabinet agreed the proposals, 32 adults were attending the Phoenix Centre. Some adults left the service prior to closure and therefore 25 adults required an ASCH review of their needs and a new support plan created. The outcomes for all of the 25 adults are summarised below:

Outcome	Number of adults	Notes
Will attend Milton Grange	11	New transport schedule organised with ESCC Transport to support attendance at Milton Grange by 30 April
Will attend independent/VCSE provision	8	Transferred to Sussex Support Service, Uckfield Pavilion
Long Term residential care	2	As a result of declining health, not as a consequence of closure of Phoenix Centre
Family making own arrangements	1	Adult attending an independent art group arranged by her family
Personal Assistant support	2	One person increased their use of Direct Payments for Personal Assistant hours and one person began using Direct Payments
Independent home care agency	1	

7.5 As part of the adult reviews mentioned above, carers were offered a carer's assessment or a review, to determine whether support packages continue to meet their assessed needs. We identified 22 carers, five of whom took up the offer of an assessment or review in light of the closure of the Phoenix Centre. The carers' eligible needs were met by signposting to services and support and/or through the provision of a carers personal budget.

7.6 Since Cabinet agreed the proposals to close the Phoenix Centre, no clients or carers have invoked the ASCH complaints process. There were two specific Members' enquiries relating to the Phoenix Centre following the Cabinet decision. There were also two general enquiries relating to the reduction in ASCH services and facilities and these have been responded to by either the Leader of the Council or the Director for Adult Social Care and Health.

#### Impact - ASCH Staff

7.7 When the ASCH proposals went to Cabinet in February 2025, 12 staff (8.26 full time equivalent) staff were working at the Phoenix Centre. When the staff consultation process commenced on the 5 March, 11 ASCH staff (7.97 full time equivalent) were working at the Phoenix Centre.

7.8 The staff consultation process began on 5 March 2025 and was completed on 31 March 2025. The outcomes for the impacted staff are summarised below:

Outcome	Number of staff	Notes
---------	-----------------	-------

Started working in other part of ASCH	8	One person became a Resource officer in the ASCH Countywide Reviewing Team; seven people remained within ASCH directly provided services (older people and learning disability)
Redundancy	3	One cook One housekeeper One support worker

7.9 Costs for these staffing changes are provided below.

#### Impact – Property

7.10 In addition to the day services run at the Phoenix Centre the services below also used the space. All have been found alternative accommodation (many by ESCC Property Services):

- Talking Post - moved to Sackville House, Lewes
- ASC Occupational Therapy clinics – moved to Sackville House, Lewes and Bellbrook Centre, Uckfield.
- Care for the Carers Counselling service – confirmed they have an alternative venue
- One You – confirmed they have an alternative venue
- Foundry Healthcare Dementia Carers Support group – will use rooms at the Riverside Lodge Surgery, Lewes (next door to the Phoenix Centre)

7.11 The building was closed and handed back to the Council's Property Division on 27 May 2025. Future use of the Phoenix Centre was considered by the Lead Member for Resources on 12 August 2025 - [Decision - Phoenix Centre, Lewes - Options for next steps | East Sussex County Council](#) . The Lead Member will consider the offers made at a future meeting, before which they will be considered and scored by a panel of ESCC officers. ASCH is represented on that panel. The property is currently being marketed as ESCC look for a future tenant of the building.

#### Impact – Other

7.12 There have been no known impacts to the wider social care and health system or other organisations, other than those listed above, caused by closing the Phoenix Day service.

7.13 An Equality Impact Assessment Review has been completed and all mitigations put in place to reduce the known impacts as a result of closure of the Phoenix Centre. This included providing information and signposting adults and carers to a range of alternatives services which included careful consideration of transport options and journey times to new services.

#### Actual / revised estimate of savings

7.14 The proposal to close the Phoenix Centre Day Care service forecast an annual full year saving of £191,000 as set out in the table below:

Budget	Revised Budget		Total Savings
2024/25	2025/26	2026/27	
£'000	£'000	£'000	£'000

Expenditure budget	383	158	158	
Income budget	(110)	(76)	(76)	
<b>Net budget</b>	<b>273</b>	<b>82</b>	<b>82</b>	
<b>Net savings</b>	<b>0</b>	<b>191</b>	<b>0</b>	<b>191</b>

7.15 The full saving is forecast to be achieved in year.

7.16 Additional budget pressures identified are summarised below:

- Redundancy costs - £9,000
- Pension strain - £3,600.
- Residual costs (staff left or redeployed during this financial year) - £26,500

7.17 The budget pressure relating to staffing of £26,5000 has also been met within budget. For the 2025/26 RPPR saving it was agreed that redundancy costs and pension strain would be met by corporate budgets not by ASCH.

## 8. Milton Grange Day Service

8.1 Cabinet agreed to continue to offer day services at Milton Grange but to operate the service for five days a week (Monday to Friday, excluding bank holidays) and to no longer offer services on a Saturday. The service was remodelled to maximise the efficiency of the existing staffing and vehicles, thereby reducing transport costs.

### Progress

8.2 Day services at Milton Grange ceased to be provided on a Saturday from 1 April 2025. The number of available spaces for attendees on weekdays was increased from 35 per day to 40 per day (200 places maximum per week except bank holidays), to enable people who had previously attended on a Saturday to attend on weekdays instead, and to create capacity for those adults who had been attending the Phoenix Centre to transfer to Milton Grange if they wished.

8.3 Since June 2025 the number of people attending per week on average is 190. The average occupancy for August and September 2025 was 96%.

### Impact - Adults and Carers

8.4 87 adults who regularly attend day services at Milton Grange were identified as potentially impacted by the change. Of these, c.11 adults attended on a Saturday. By creating the additional capacity at Milton Grange, the majority (76) of the usual attendees could continue with their current pattern of attendance and were not impacted.

8.5 All of the 11 adults who usually attended on a Saturday required an ASCH review to understand how best to meet their needs given the changes at Milton Grange. During March and April 2025, all of these reviews were completed, new support plans were agreed and a revised pattern of services, at Milton Grange, began for every adult.

8.6 The table below summarises the outcomes for each of these adults following their review and re-planning of their support:

Outcome	Number of adults	Notes
Attending Milton Grange on other days	10	One person decided to simply attend Mon-Fri and cease attending on Saturday.
Ceased services at Milton Grange - Long term residential care	1	The person was already in respite care due to declining health and is planning to move into long term residential care

8.7 As part of the individual service reviews mentioned above, all carers were offered a carer's assessment, or a review of their assessment, to determine whether support packages continue to meet their assessed needs. We identified three carers who required an assessment or review in light of the change to Saturday opening. The carers reviews identified that the change to daycare attendance days did not impact on the care they provide.

8.8 During May 2025 follow up reviews were completed with all the people affected by the service closing provision on Saturdays. All 10 people continue to attend the service and reported no negative impacts as a result of the new pattern of attendance.

8.9 No adults or carers invoked the ASCH complaints process in relation to the change to opening times at Milton Grange Day Services. There were no Member enquiries relating to Milton Grange following the Cabinet decision.

#### Impact - ASCH Staff

8.10 A total of 20 ASCH staff (16.2 full time equivalent) excluding vacancies, who work at Milton Grange were potentially impacted by the change in operating hours.

8.11 A staff consultation process began on the 5 March 2025 and was completed on 8 April 2025. The outcomes for the impacted staff are summarised below:

Outcome	Number of staff
Remained at Milton Grange with revised contracts / working patterns	15
Remained at Milton with same working pattern	5

#### Impact – Property

8.12 There was no significant impact on ESCC property portfolio through the change to weekday only opening.

#### Impact – Other

8.13 There have been no impacts to the wider social care and health system caused by ceasing to provide day services at Milton Grange on a Saturday or on Bank Holidays.

8.14 An Equality Impact Assessment Review has been completed and all identified mitigations put in place.

#### Actual / revised estimate of savings

- 8.15 The annual revenue savings, for a full year, for closing day services at Milton Grange on a Saturday and ceasing provision on bank holidays, were forecast as £203,000:

	Budget	Revised Budget		
	2024/25	2025/26	2026/27	Total Savings
	£'000	£'000	£'000	£'000
Expenditure budget	767	526	526	
Income budget	(212)	(174)	(174)	
<b>Net budget</b>	<b>555</b>	<b>352</b>	<b>352</b>	
<b>Net savings</b>	<b>0</b>	<b>203</b>	<b>0</b>	<b>203</b>

- 8.16 The full year savings are forecast to be achieved. An additional pressure of £6,500, due to pay protection costs, has also been met from within the revised budget in year.

## 9. Mental Health Community Outreach

- 9.1 Cabinet agreed that the existing Mental Health Community Outreach service would be ceased in its current format; and to provide alternative support specifically via the Council's Joint Community Rehabilitation Service (JCR) and the Milton Grange Mental Health Intermediate Care beds (part of existing Older People Directly Provided Services).

### Progress

- 9.2 The Mental Health Community Outreach service was formally ceased on 1 April 2025 and all staff were redeployed or reassigned by 23 June 2025.
- 9.3 The referral pathway for people previously eligible for the Mental Health Community Outreach Service is now via the Joint Community Re-ablement service (JCR).
- 9.4 The existing service criteria for JCR is being formally amended to recognise that JCR will accept referrals for a new group of adults with a mental health condition as the primary reason for referral. Where people require an assessment over 24 hours, JCR refer to Milton Grange Mental Health Beds for this assessment to take place. The person may be suitable to go home with JCR support following that assessment.
- 9.5 During the transition period between April and June 2025, referral numbers to the service have continued to be low with only 18 referrals; of which 4 people were eligible and commenced with the JCR provided service.
- 9.6 The following developments have taken place within JCR and Milton Grange Intermediate Care beds to ensure that the same type and level of service has continued to be offered and upscaled:
- Detailed analysis of referral sources and activity.
  - A new referral pathway into JCR was established for people who would previously have been referred into the Mental Health Community Outreach service.
  - Research with similar services across Sussex to improve their offer to this cohort of adults and relevant training identified.

- Engagement has taken place with key stakeholders including the top referrers to the Mental Health Community Outreach Service such as Adult Social Care Mental Health Teams, Adult Social Care Neighbourhood Support Teams, East Sussex Healthcare Trust, Sussex Partnership Foundation Trust and Commissioners to promote the new service provision model.

9.7 There has been no impact on waiting times for services with all referrals followed up within 5 working days or less.

9.8 The next planned milestones for JCR to be completed by December 2025 are:

- Required paperwork, in accordance with Care Quality Commission regulations, to be updated in light of the expanded JCR offer.
- New training offer for a wider pool of staff.
- Revised JCR referral criteria published.
- Second round of service promotion with key stakeholders

#### Impact - Adults and Carers

9.9 The Mental Health Community Outreach service provided short-term, time limited support to adults and their carers. As such, the service applied a tapered approach whereby the service ceased for existing people being supported as planned, at the end of the intervention. No one had their service ceased during an intervention.

9.10 Since Cabinet agreed the proposals to cease the Mental Health Community Outreach Service in its current format, no adults or carers have invoked the ASCH complaints process. There were no specific Members' enquiries relating to the Mental Health Community Outreach Service, following the Cabinet decision, however there were two general enquiries relating to the reduction in ASCH services and facilities and these have been responded to by either the Leader of the Council or the Director for Adult Social Care and Health.

#### Impact - ASCH Staff

9.11 Seven staff (6.2 full time equivalent) worked in the service. A staff consultation process began on 5 March 2025 and was completed on 31 March 2025. The outcomes for the affected staff are summarised below:

Outcome	Number of staff	Notes
Started working in other part of ASCH Older Peoples Provider Services	3	1 moved to JCR 2 moved to Milton Intermediate Care Unit
Started working in other part of ASCH	2	1 moved to Older Peoples Mental Health Team 1 moved to Eastbourne Occupational Therapy Service
Resignations	2	

#### Impact – Property

9.12 There were no significant property related impacts or savings created by the closure of the Mental Health Community Outreach services. It was a small peripatetic service that used minimal space in the Milton Grange building.



### Impact – Other

- 9.13 There are no known changes or negative impacts on the wider health and care system.
- 9.14 An Equality Impact Assessment Review has been completed and all identified mitigations put in place as part of the new service mode being offered. Following completion of planned milestones highlighted in 9.8 there will be a second promotion of the new JCR service. The new service offer under JCR will also provide a more equitable service across the county as it is a much larger service than the previous service.

### Actual / revised estimate of savings

- 9.15 The annual forecast revenue savings, for a full year, for ceasing to provide services through the Mental Health Community Outreach team were £318,000:

	<b>Current Budget</b>	<b>Revised Budget</b>		<b>Total Savings</b>
	<b>2024/25</b>	<b>2025/26</b>	<b>2026/27</b>	
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	
Expenditure budget	318	0	0	
Income budget	0	0	0	
<b>Net budget</b>	<b>318</b>	<b>0</b>	<b>0</b>	
<b>Net savings</b>	<b>0</b>	<b>318</b>	<b>0</b>	<b>318</b>

- 9.16 The full savings are forecast to be achieved including an additional budget pressure of £2,000 relating to pay protection.

## **10. Housing-Related Floating Support**

- 10.1 Cabinet agreed to reduce funding for this service from £4.3 million to £0.5m per year on 25 February 2025.
- 10.2 This decision was called-in on 4 March 2025 by Councillor Cross, Councillor Field, Councillor Lambert, Councillor Shing and Councillor Webb. The Call-in related to two areas of concern and how these were taken into account in the decision making process:
- Whether the impact of the proposal on Districts and Borough Councils was sufficiently considered; and
  - Whether the interests of a future unitary authority were explicitly considered.
- 10.3 Following the call-in, the decision was then considered by the People Scrutiny Committee on 17 March 2025 and was referred to Full Council. On 20 May, at Full Council, it was agreed that the decision taken in February should be enacted.
- 10.4 The Call-in process was completed in timescales that did not impact on the forecast savings amount being realised.

### Progress

- 10.5 All the necessary work was completed in order that the ASCH funding for the Housing Related Floating Support Service was reduced from £4.3 million to £0.5m on the 30 September 2025 as planned.

#### District and Borough Funding

- 10.6 The District and Borough councils agreed to match ASCH funding and allocated a total of £0.5m. This will be used to fund 10 full time equivalent, co-located, housing support posts based within their housing teams from 1 October 2025.
- 10.7 All of the Districts and Boroughs (except for Wealden) are funding these posts through the annual Homeless Prevention Grant (HPG). This means that monies are only committed until 31 March 2026. Further funding levels will only be confirmed once the HPG allocations for subsequent years are known.

#### Revised and reduced service offer

- 10.8 New eligibility criteria for the reduced Housing Related Floating Support offer were introduced from 7 July 2025. This was three months before the reduction in funding took effect and was in recognition that the service had to begin changing as it had already lost a significant number of staff due to the impending reduction in funding.
- 10.9 ASCH worked with external partners and within the County Council to agree the best possible new criteria for referrals to the reduced service. These are set out below and reflect the preventive focus of the service going forwards:

<b>Pathway 1) all referrals via HSCC and self-referral for people aged 60+</b>
Referrals are triaged by HSCC and all appropriate referrals then sent to BHT Sussex, and support delivered by Floating Support Officers
<b>Eligibility criteria</b> Referrals can be made for people who: <ul style="list-style-type: none"> <li>• have, or are likely to develop care and support needs because of their age, disability, health or substance misuse</li> <li>• are experiencing <b>one or more</b> housing-related issues</li> <li>• are not receiving social care support</li> <li>• are not living in accommodation with support</li> </ul>
<b>Pathway 2) for use by District and Borough Housing Teams only</b>
Criteria to be agreed at a local level by District and Borough Housing teams. Referrals are made directly from the housing teams to the co-located Floating Support Officers across the housing teams.
<b>Pathway 3) via Children's Services</b>
Referrals are made directly from Children's Services to the two co-located Floating Support Officers based in Children's Services.
<b>Eligibility Criteria</b> <ul style="list-style-type: none"> <li>• Households including dependent children who are at risk of, or have received, an intentionally homeless decision as part of or following a homelessness application.</li> <li>• Households including dependent children who are losing or are at risk of losing their accommodation.</li> </ul>

#### Impact – Adults and Carers

- 10.10 The Floating Support service provides short-term, time limited interventions. Therefore, we have been able to reduce the level of service whilst ensuring that all individuals using the service continued to receive the support they required to

achieve agreed outcomes. No person's service has been ceased midway through working with them as a result of the changes.

10.11 During 2024/25 5,333 individuals used the service. Going forward the annual target in the new contract will be for:

- 900 individuals to receive a service who have been referred via East Sussex County Council, by HSCC and Children's Services; and
- a further 1,000 people receiving a service who have been referred in by the Districts and Boroughs.

10.12 This means that there will a reduction of around 3,400 people receiving housing related support in this way – a 64% reduction in the level of service.

10.13 The retention of self-referrals for people aged 60+, co-located workers in Children's Services and co-located workers in the District and Borough housing teams will offer some mitigation to the negative impacts identified in the EqIA in relation to age particularly. However, the restriction of referrals to those who are not in receipt of Adult Social Care support will have an impact, particularly in relation to age and disability.

#### Impact – ASCH and other services

10.14 Although it is early days for the new model and the reduced level of service, referrers are expressing concern about the loss of this service. As was documented in the consultation process in 2024, alternative services will not always be available to provide housing related support and in future there are expected to be frequent instances where people will not be able to access housing related support in the county. However, it is not possible to capture actual data on these instances or the impact for individuals.

10.15 ASCH staff report that, as part of their core duties, they are undertaking more housing related support tasks with the people they are working with. Examples include, helping to fill in welfare benefits forms, help with dealing with energy or rent arrears, supporting people who do not have access to or do not have the skills to use digital platforms.

#### Impact – Property

10.16 There was no impact on ESCC property or buildings.

#### Actual / revised estimate of savings

10.17 The savings from reducing funding for the Floating Support service are summarised below:

	<b>Current Budget</b>	<b>Revised Budget</b>		
	<b>2024/25</b>	<b>2025/26</b>	<b>2026/27</b>	<b>Total Savings</b>
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
Expenditure budget	4,373	2,283	500	
Income budget	0	0	0	
<b>Net budget</b>	<b>4,373</b>	<b>2,283</b>	<b>500</b>	

<b>Net savings</b>	<b>0</b>	<b>2,090</b>	<b>1,783</b>	<b>3,873</b>
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10.18 The savings are forecast to be fully achieved as planned.

## **11. Drug and Alcohol Service**

11.1 Additional external funding from Government, through the Drug and Alcohol Treatment and Recovery Grant (DATRIG) became available in late 2024/25. This enabled Cabinet to agree to continue to fund drug and alcohol recovery services but at a reduced level. The decision was:

- (i) to continue funding a reduced carers drug and alcohol recovery service for an additional year to June 2026; and
- ii) the two services delivered by the Seaview Project to be combined into a reduced, single contract, allowing for cost savings and better efficiencies.

### Progress

11.2 The remodelled Carer's Drug and Alcohol Recovery Service began, as planned, on 1 July 2025 and is currently funded by the DATRIG until 30 June 2026. We expect an indication of future DATRIG funding in December 2025.

11.3 The combined Seaview service started on 1 July 2025, as planned, and is currently funded by the DATRIG until 30<sup>n</sup> June 2026. We expect an indication of future DATRIG funding in December 2025.

### **Impact - Adults and Carers**

11.4 The DATRIG funding enabled us to minimise the reduction in drug and alcohol recovery services. However, both of the services now operate at a reduced level:

- For the Carers Drug and Alcohol Recovery Service the main impact is on the duration of service offered rather than the number of carers supported. The maximum annual capacity is now 100 referrals per annum (currently at 80 referrals). In 2024/25 87 carers used the service. However, the service now operates on a more time limited basis with a maximum of 6 sessions per carer; the previous offer was open ended depending on need.
- The Seaview service is a drop-in service model so it is not possible to provide exact numbers of adults using the service. However, the previous service saw over 100 people per quarter and in the first quarter of the re-modelled service approximately 45 people have used the service. The approximately 50% reduction in those using Seaview has resulted in an increased demand for other services. Whilst we do not have accurate data on this, partners within the community, notably Change Grow Live, Warming Up the Homeless and Matthew 25 have reported an increase in demand. The reduction in funding also led to the provider reducing staffing for the service, from 5.7 full time equivalent to 3.5 full time equivalent staff.

### Impact - ASCH Staff

11.5 As a result of the savings and changes to the contracts, the Safer East Sussex Team was reduced by one member of staff (1 FTE). The member of staff was re-deployed into a new role within ASCH. There were therefore no redundancy costs.

#### Impact – ESCC Property

- 11.6 There was no impact on ESCC property.

#### Actual / revised estimate of savings

- 11.7 The forecast annual revenue savings in a full year for this proposal were £319,000 across 2025/26 and 2026/27:

	<b>Current Budget</b>	<b>Revised Budget</b>		<b>Total Savings</b>
	<b>2024/25</b>	<b>2025/26</b>	<b>2026/27</b>	
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	
Expenditure budget	319	248	163	(156)
Income budget	0	(163)	(163)	(163)
<b>Net budget</b>	<b>319</b>	<b>85</b>	<b>0</b>	<b>(319)</b>
<b>Net savings</b>	<b>0</b>	<b>(234)</b>	<b>(85)</b>	<b>(319)</b>

- 11.8 All of the forecast savings are on track to be delivered.

#### Impact - Other

- 11.9 At the current time, despite the reduction in the levels of service offered, there has been no formal feedback or representation regarding the impact on other services.

#### Progress on EqlA Actions

- 11.10 All of the actions identified in the EqlA have been progressed as summarised below:
- 11.11 We have ensured that drug and alcohol related service listings are up to date on 1space and promoted across services.
- 11.12 We continue to work with the Lived Experience Recovery Organisation (LERO) who are delivering a range of harm reduction initiatives, peer support and recovery support. This includes a service specifically for women affected by drug and alcohol issues offered by Coastal Routes for Recovery.
- 11.13 A mapping exercise is underway to look at how we can better engage with seldom heard people and take-up of people with protected characteristics will be monitored in services where appropriate.
- 11.14 A joint working protocol between drug and alcohol treatment services and ASCH and NHS mental health services is in the process of being implemented.
- 11.15 Further work on pooled budgets is currently paused pending the outcome of new NHS Integrated Care Board (ICB) arrangements for Surrey and Sussex.
- 11.16 Psychosocial Interventions (PSI) have been built into the new treatment contract and we are currently in the process of evaluating bids to provide this service.

## **12. Conclusion and Recommendations**

- 12.1 ASCH has made good progress on delivering the savings proposals agreed by Cabinet. The total savings target for the 11 proposals was £6,449,000. ASCH is on target to deliver savings of £6,267,000 across 2025/26 and 2026/27– representing 97.2% of the original estimate. In many instances, ASCH has also been able to absorb additional costs relating to pay protection, for example.
- 12.2 The variance below the forecast saving is due to the alternative arrangement put in place for Linden Court. Whilst ASCH is working hard to reduce this variance it has not been possible to identify alternative proposals to make up the shortfall.
- 12.3 ASCH has undertaken all of the required adult and carer reviews or assessments necessitated by the savings proposals and there have been no complaints reviewed regarding the enactment of the proposals (excluding the feedback received during the consultation processes).
- 12.4 The report to Cabinet in February 2025 estimated redundancy costs of £350,00 to £500,000 which would be met from the Redundancy Reserve. The actual redundancy costs have been £67,164, with a further £51,752 in pension strain.

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### **Appendices:**

Appendix A – Financial summary of ASCH revised savings proposals including numbers of adults and staff affected

Appendix B - Summary of Adults and Staff Impacted

Appendix C – Summary of Actual Savings Against Forecast

# Appendix A – Financial summary of ASCH revised savings proposals including numbers of adults and staff affected

	Revenue Budget £'000	Savings Target £'000			Forecast Savings delivery £'000			Variance from forecast savings to savings target £'000					
	2024/25	2025/26	2026/27	Total	2025/26	2026/27	Total	2025/26	2026/27	Total	Potential number of full-time equivalent ASCH staff affected	Potential number of ASCH staff affected	Potential number of adults using services affected
Linden Court	652	200	127	<b>327</b>	200	127	<b>327</b>	0	0	<b>0</b>	10.8	19	47
Hookstead Day Service	995	124	0	<b>124</b>	68	0	<b>68</b>	-56	0	<b>-56</b>	7	13	38
Steps To Work	418	194	0	<b>194</b>	194	0	<b>194</b>	0	0	<b>0</b>	9	9	63
Community Support Services (CSS)	637	286	0	<b>286</b>	342	0	<b>342</b>	56	0	<b>56</b>	15.8	22	35
Supported Accommodation (Additional needs)	258	129	129	<b>258</b>	65	193	<b>258</b>	-64	64	<b>0</b>	0	0	28
Supported Accommodation (Mental Health Needs)	356	178	178	<b>356</b>	89	267	<b>356</b>	-89	89	<b>0</b>	0	0	45
Phoenix Centre	273	191	0	<b>191</b>	191	0	<b>191</b>	0	0	<b>0</b>	8.26	12	32
Milton Grange day service	555	203	0	<b>203</b>	203	0	<b>203</b>	0	0	<b>0</b>	19.56	22	87
Mental Health Outreach	318	318	0	<b>318</b>	318	0	<b>318</b>	0	0	<b>0</b>	6.2	7	0
Housing - Related Floating Support	4,373	1,937	1,936	<b>3,873</b>	2,090	1,783	<b>3,873</b>	153	-153	<b>0</b>	0	0	5,064
Drug and alcohol Service	319	234	85	<b>319</b>	234	85	<b>319</b>	0	0	<b>0</b>	2	2	400
<b>Total</b>		<b>3,994</b>	<b>2,455</b>	<b>6,449</b>	<b>3,994</b>	<b>2,455</b>	<b>6,449</b>	<b>0</b>	<b>0</b>	<b>0</b>			

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## Appendix B – Summary of Adults and Staff Impacted

	Potential number of full-time equivalent ASCH staff affected	Potential number of ASCH staff affected	Potential number of adults using services affected	Actual number of full-time equivalent ASCH staff affected	Actual number of ASCH staff affected	Number of ASCH staff resigned	Number of ASCH staff moved to other roles in the dept	Number of ASCH staff made redundant	Actual number of adults using services affected
Linden Court	10.8	19	47	0	0	0	0	0	0
Hookstead Day Service	7	13	38	0	0	0	0	0	0
Steps To Work	9	9	63	3	3	0	2	1	51
Community Support Services (CSS)	15.8	22	35	15	20	4	15	1	30
Supported Accommodation (Additional needs)	0	0	28	0	0	0	0	0	28
Supported Accommodation (Mental Health Needs)	0	0	45	0	0	0	0	0	45
Phoenix Centre	8.26	12	32	7.97	11	0	8	3	25
Milton Grange day service	19.56	22	87	16.2	20	15 - Remained at MG with revised contracts/working patterns 5 - Remained at MG with same working pattern			11
Mental Health Community Outreach	6.2	7	0	6.2	7	2	5	0	0
Housing - Related Floating Support	0	0	5,064	0	0	0	0	0	3400 less adults supported
Drug and alcohol Service	2	2	400	1	1	0	1	0	Approx 200 less adults supported
<b>Total</b>	<b>78.62</b>	<b>106</b>	<b>5839</b>	<b>49.37</b>	<b>62</b>	<b>6</b>	<b>31</b> (plus 20 who remained working at Milton Grange)	<b>5</b>	<b>3790</b>

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## Appendix C – Summary of actual ASCH savings against original forecast

Adult Social Care and Health - Proposed Savings	Revenue Budget £'000	Savings Target £'000			Forecast Savings delivery Q2 2025-26 £'000			Variance from forecast savings to savings target at Q2 2025-26 £'000		
	2024/25	2025/26	2026/27	Total	2025/26	2026/27	Total	2025/26	2026/27	Total
Linden Court	652	200	127	<b>327</b>	145	0	<b>145</b>	(55)	(127)	<b>(182)</b>
Hookstead Day Service	995	68	0	<b>68</b>	68	0	<b>68</b>	0	0	<b>0</b>
Steps To Work	418	194	0	<b>194</b>	163	31	<b>194</b>	(31)	31	<b>0</b>
Community Support Services (CSS)	637	342	0	<b>342</b>	230	112	<b>342</b>	(112)	112	<b>0</b>
Supported Accommodation (Vulnerable Adults)	258	129	129	<b>258</b>	65	193	<b>258</b>	(64)	64	<b>0</b>
Supported Accommodation (Adults with Mental Health Needs)	356	178	178	<b>356</b>	89	267	<b>356</b>	(89)	89	<b>0</b>
Phoenix Centre	273	191	0	<b>191</b>	191	0	<b>191</b>	0	0	<b>0</b>
Milton Grange day service	555	203	0	<b>203</b>	203	0	<b>203</b>	0	0	<b>0</b>
Milton Grange Outreach	318	318	0	<b>318</b>	318	0	<b>318</b>	0	0	<b>0</b>
Housing - Related Floating Support	4,373	1,937	1,936	<b>3,873</b>	2,090	1,783	<b>3,873</b>	153	(153)	<b>0</b>
Drug and alcohol Service	319	234	85	<b>319</b>	234	85	<b>319</b>	0	0	<b>0</b>
<b>Total</b>		<b>3,994</b>	<b>2,455</b>	<b>6,449</b>	<b>3,796</b>	<b>2,471</b>	<b>6,267</b>	<b>(198)</b>	<b>16</b>	<b>(182)</b>

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