

# SE Area Outcomes Group Meeting Notes

25<sup>th</sup> May 2022

*Working together to improve outcomes for children and young people through integrated planning and commissioning*

Desired Outcome: Co-create a draft high-level action plan for 2022-24

Aims: Reconnect with each other and refresh our way forward

## Meeting Highlights

- ⇒ Connecting with people across organisations to align on regional priorities.
- ⇒ Co-creating a draft high-level action plan for the next two years.
- ⇒ Renewed focus and momentum to move forward.

Facilitator: Jenny McConnell

## 1. OPENING REMARKS

Barbara Campbell, Chair of SE Outcomes Group and Director of Children's Services, opened the meeting. She acknowledged the challenges and progress to date, and identified to this diverse group the opportunity we now have in coming together to make a positive difference to the lives of our young people.

## 2. Presentations on Priorities

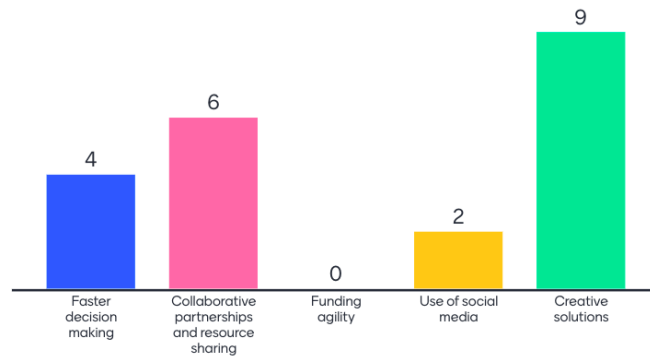
Úna Casey, Business Support Manager CYPSP, presented regional priorities.  
Nicola Cullen, Planning Manager SE Trust, presented SE Trust priorities.

### Regional Priorities 2021-2024

- I. Children's mental health and emotional wellbeing in particular but not exclusively children in the 5-10 age groups.
- II. Early intervention support for children with disabilities and their families.
- III. Support to children whose wellbeing is being affected by disruption to their schooling.
- IV. Contribution to strategic cross Departmental actions in response to food and fuel poverty, as well as locally based service responses.

## 3. Attendees reflected on their organisation's top learnings through Covid.

## What is your top learning from your organisation through Covid that you can bring to our collaboration?



#### 4. Strengths and Aspirations/Gaps.

Attendees reflected on perceived strengths in this group (what is already working well that is important to our shared purpose) and aspirations/potential gaps (what is not working so well that we can control or influence).

STRENGTHS	ASPIRATIONS/GAPS
Collaboration and shared learning	Systems for sharing
Shared goals, vision and willingness	Sharing knowledge and experience
Diverse organisations that can make a difference	Regional Requirements for services
Broad range of skills, knowledge and experience	Service user (children & family)
Motivation to work together	Education Authority
Energy	Primary Care
Willingness	PSNI, Justice
Partnership approach to delivering services	Council
Sharing Information	Smaller task and finish groups
Services for Children with Disabilities	Planned and agreed approach to data collection
Alignment with other strategies i.e. People & Places (DFC) ICS	Youth wellness self-directed help
Finance/Resources	Provide Roots of Empathy across schools
Early Years V Teens	Generational trauma impacts on Children and young people
Collective planning	Schools linked with Communities/Health/Education
	Scale up ambassadors and champions within communities
	Strategies DOE/DOH
	Service user perspective – children and parents/lived experience
	C&V sector partners
	Consistency and communications

	Multi-disciplinary/collaborative approach e.g. Grown the family Support hub
	Cost of living crisis being actively addressed
	Mental Health strategy recommendations are implemented and SEHSCT are proactive in addressing key themes
	Commissioning gaps are actively addressed

## 5. Priorities for High-Level Action Plan

### Priority #1: Children's mental health and emotional wellbeing in particular but not exclusively children in the 5-10 age groups.

- Identify the appropriate personnel to provide the right data.
- Collate baseline information – data is available on CYPSP website and on other sites.
- Collecting and collating data requires staff to do this.

Evidence of need – range of organisations that are already providing services

Karen Otley Priority 1  
John Hunsdale Priority 1  
Consultant Nurse CAMHS Karen  
Referrals Co-ordinator (Child Health)

Prevention & Population Health 1,2,3,

#### Who

Quantify what is available/what they do

Partnerships approach to agreeing actions and outcomes measures

#### What

Need to scope what is happening regionally

- Collect data on need and on referral pathways on flowing areas:

SLT consider scaling up Help Kids Talk, counselling services provided by GP practices, Schools support via school counselling services, Roots of Empathy. MDT's

- Partnership work with Health, EA Comms/Volume partners to get baseline data
- Quantify to target resource
- Co-ordination of services available / resources available

#### Priorities

- What resources we have and what is happening regionally
- Collate data on the need
- Working in partnership to deliver a range of resource

Support the roll out of a community mentoring programme for young girls aged 10-14 years who experience poor emotional health/wellbeing (action by Pauline McMullen)

Support the roll out of Help Kids Talk package of support (action by Mabel Scullion)

Deliver a shared learning event on the impact of implementing ambassador and champions within the community by Nov 2022 (action by Mabel Scullion)

#### How will we know we have made a difference?

Service Users know how to access single point of entry when needed

- Strong communication
- Drop in community presence

#### **Priority #2: Early intervention support for children with disabilities and their families.**

- Consider changing language, i.e. instead of "child with disability" change to "child with additional needs" in the statutory sector
- Involvement of family should be key priority – Parent/guardian being the lead person
- Key worker or navigator for support - link with community navigators and other connectors already in post
- Peer support
- Signs of safety approach
- "Labelling" and review criteria diagnosing disability

#### Comments & Questions

- Are there enough Early Intervention services available?
- Front of house structure to establish point of entry to services
- Parent/guardian is lead person
- Support to commence even before diagnosis i.e. assessment
- Pre-conceptual alcohol advice to prevent neuro-development delay post-birth

#### Recommendations:

- Health Development Specialist to link with each of the four priority areas
- Lorraine Noade HOS Learning Disability and Kate Fleck LCG requested to link with Priority 2 going forward
- Bronwyn Campbell SPPG will compile stats across SET and comparative to regionals support provided across all of the five Trusts Family Support Hubs

**Priority #3: Support to children whose wellbeing is being affected by disruption to their schooling.**

- Shared vision/principles between education and health and wellbeing

Action by: Outcomes Groups/Barbara Campbell on identify principles/values. Needs to be raised at CYPSP meetings.

- Scope examples of excellence, pre/primary/post/HE, e.g. Operation Encompass, Solihull schools, use peer influence, i.e. principals sharing experiences with others

Action by: Locality Planners to lead on this through LPGs. Scope examples of good practice and how it links to identified need.

- Continue to ensure children have access to early intervention support when awaiting assessment.

Action by: Marie-Louise, Julie, Jason, Barbara, Lynda to continue to lead work on structure of SPOE.

- Strengthen connections between schools and communities

Action by: Locality Planners to demonstrate engagement and LPG connections with local schools.

Comments/questions

This feeds into priority 1, 2 and 4 also

What is operation encompass?

Point 4 needs to connect to home

EWO?

Alternative to main school systems, e.g. home-schooling network

**Priority #4: Contribution to strategic cross Departmental actions in response to food and fuel poverty, as well as locally based service responses.**

What we'd like to see in 2024:

Less reactive – more proactive

Clear pathways – less blockages and better communications

Have data resources – evidence of success

Integrated Care Service – Impact better outcomes in 2024

Success of multi-disciplinary teams

Vol/com services exist in communities

Increasing capacity building Stat + Community + succession planning  
New ways of working – universal messaging

Priorities for action

- I. Better joined up links and resourcing relating to poverty across the Trust
- II. Access to community-based services for all families, including Tier 3 families.
- III. Access to universal messages.
- IV. Development of 'Helping Children Talk'.
  - Free access to help - phone lines/ parking/travel, e.g. use of WhatsApp for communication with Trust.
  - Use of social media to inform public of useful resources and apps.
  - Develop support and education on recycling and food waste
  - Develop plans to increase capacity in health visiting and universalism.

Comments

- Need to stop short-term funding for hardship funding
- Quicker decision making across all departments
- Take positive actions from Covid and embed into normal practice

Commitments

Catherine Truesdale	Planning, SEHSCT	Support standardisation of approach and drive forward momentum
Barbara Porter	PHA	Bring back details of today to PHA. Work collaboratively to influence PHA to support actions.
Wendy McKimmie	AFC	Compile food journey resources. Define process on how to maintain list.
Joanne Neill	Bryson	
Noelle Hollywood	Community Health Development, SEHSCT	Write and implement plan (including measures of success), to increase use of social media to spread school uniform re-cycle, e.g. through increased use of 'Next door' app.

**6. Closing remarks**

Lynda Vladeanu thanked everyone for participating and gave a special word of thanks to those who played an active role in presenting and organising this meeting.

**NEXT MEETING WILL BE IN JUNE (DATE TBD)**