

Agenda

Health and Wellbeing Board

Wednesday, 15 March 2023 at 5.30 pm
At Council Chamber - Sandwell Council House, Oldbury

1 Apologies for Absence

2 Declarations of Interest

Members to declare any interests in matters to be discussed at the meeting.

3 Minutes

5 - 14

To confirm the minutes of the meeting held on 7 December 2022 as a correct record.

4 Additional Items of Business

To determine whether there are any additional items of business to be considered as a matter of urgency.

5 National Takeover Challenge of Sandwell Health and Wellbeing Board

15 - 60

To agree to provide an update on the recommendations to the young people who have taken part in the Health and Wellbeing Board takeover challenge through the SHAPE Team.



- | | | |
|---|--|----------|
| 6 | Sandwell End of Life Care Work - death, dying and bereavement | 61 - 80 |
| | To consider and comment on the Sandwell End of Life Care work. | |
| 7 | Proposed Refresh of Vision 2030 | 81 - 98 |
| | To consider and comment on the proposed refresh of Vision 2030. | |
| 8 | Children's Services Update | 99 - 104 |
| | To consider and comment on the update of issues and priorities across Children's Services. | |

Shokat Lal
Chief Executive
Sandwell Council House
Freeth Street
Oldbury
West Midlands

Distribution
Councillor Hartwell (Chair)
Councillors Fox, Hallan, Hackett, Padda, Piper, Mavi, Aslam, Carolan, Farmer, Muflihi, Griffin, E M Giles, Foster, Beeken, Davis, Taylor, Young, Bishop, Jarrett and McNally

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Sandwell Health and Wellbeing Board

7 December 2022 at 5.00pm

Held at the Council Chamber, Sandwell Council House.

Present:

Sandwell Metropolitan Borough Council (SMBC)

Councillor Suzanne Hartwell	Chair and Cabinet Member for Adults, Social Care and Health
Councillor Charn Singh Padda	Cabinet Member for Housing
Councillor Simon Hackett	Cabinet Member for Children and Education
Councillor Bob Piper	Deputy Leader and Cabinet Member for Finance and Resources
Councillor Elaine Giles	Chair of Health and Adult Social Care Scrutiny Board
Dr Lisa McNally	Director of Public Health
Michael Jarrett	Director of Children's Services and Education

Black Country Integrated Care Board

Dr Priyanand Hallan	Vice-Chair and Sandwell Locality Commissioning Board Representative
Michelle Carolan	Managing Director Sandwell
Dr Sameera Mavi	Sandwell Locality Commissioning Board

Healthwatch Sandwell

Phil Griffin	Chair of Healthwatch Sandwell
Alexia Farmer	Healthwatch Sandwell Manager

Sandwell Council of Voluntary Organisations (SCVO)

Mark Davis	Chief Executive
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Sandwell and West Birmingham NHS Trust

Richard Beeken	Chief Executive
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Officers and Invitees in attendance

Tammy Davies	Sandwell and West Birmingham NHS Trust
Chris Masikane	Black Country Partnership NHS Foundation Trust
Dr Lina Martino	Consultant in Public Health
Jason Copp	Senior Research Officer, Public Health
Cathren Armstrong	Health Protection Specialist, Public Health
Donna Roberts	Holiday Activity Food Marketing and Engagement Co-ordinator
Samantha Harman	Holiday Activity and Food Programme Manager
Sue Clark	Sandwell Safeguarding Adults Board
Deb Ward (remote attendee)	Sandwell Safeguarding Adults Board

40/22 Apologies for Absence

Apologies were received from Councillor Giles, Councillor Piper and Mark Davies.

41/22 Councillor Ann Shackleton

The Chair paid tribute to the late Councillor Ann Shackleton, who had sadly passed away on 16th November 2022.

Ann had been a member of the Board, in her capacity as both Cabinet Member for Adult Social Care, and more recently as Chair of Children's Services and Education Scrutiny Board.

Ann was an advocate for Adult Social Care, wanting the best care and services for the most vulnerable adults in our community to ensure that they were able to lead a fulfilling life. She also felt very passionate about Sandwell's children and young people having the best start in life and a great education and life choices.

41/22 Declarations of Interest

There were no declarations of interest made.

42/22 Minutes

Resolved that the minutes of the meeting held on 21 September 2022 are approved as a correct record.

43/22 Urgent Additional Items of Business

There were no urgent additional items of business.

44/22 Sandwell Parents For Disabled Children Presentation

The Board received a short presentation demonstrating the work that had been carried out by Sandwell Parents for Disabled Children (SPDC). Sandwell Parents for Disabled Children engaged with the parent carer community to provide help and support to ensure that all disabled children, young people and their families had access to a range of positive play and leisure opportunities enabling them to be safe, healthy and happy.

The SPDC provided a monthly programme of activity and events including breakfast and chat sessions, well-being sessions, exercise activities, support sessions and short breaks. Partnership working was in place with other services across the borough to ensure comprehensive provision. The Board heard personal accounts from parent carers on the struggles they faced as carers. The SPDC was described as life-life for carers, providing crucial guidance and support during difficult times.

Through the use of the National Lottery funding, the group had engaged an artist to help with the creation of a piece of art that represented what it was like to be a carer. The piece was on display at the Council House for the month of December and would be on display at various other public buildings thereafter. The image would also feature on the cover of the Sandwell Carer's Strategy.

45/22 Sandwell Better Care Fund Plan 2022-23

Retrospective approval was sought for the Better Care Fund Plan 2022-23.

The Sandwell Better Care Fund programme provided vital funding and protection for Adult Social Care and Community Health services, enabling the Council to support the most vulnerable individuals and communities as local health and care systems continued to manage the impacts of the COVID-19 pandemic, alongside the growing pressures resulting from increased demand and demographic challenges.

On 18 November 2022, the government had published an addendum to the BCF Policy Framework for 2022/23 to incorporate within the BCF Pooled Budget a further allocation of funding to support adult social care hospital discharges through this winter. This required a joint social care and health plan for utilising the funding.

The additional allocation for the Adult Social Care Hospital Discharges Funding announced on 18 November 2022 would be distributed to Sandwell through two routes. The first was an allocation to the Council of £1,539,040 via a grant and the second was a share of the £5,974,142 allocated to the Black Country Integrated Care Board (ICB).

The BCF Plan for 2022/23 had been developed in collaboration with partners from the Council, Black Country ICB, Sandwell and West Birmingham Hospitals Trust and Sandwell Council for Voluntary Organisations.

Resolved:-

- (1) that the Better Care Fund Plan 2022-23 is approved;
- (2) that, where time does not allow for the Health and Wellbeing Board to meet prior to submission deadlines, the Director of Adult Social Care is authorised to approve future Better Care Fund related documents, including joint plans for using pooled budgets to support integration, governed by

an agreement under section 75 of the NHS Act 2006.

46/22 Harvest View - New Integrated Social Care and Health Centre

The Board noted an update on the development of Harvest View. The facility provided a six-week structured support and rehabilitation programme, with specialist support from both social care and health services, for Sandwell residents leaving hospital and needing support to re-gain their independence, or those who required support and structure to avoid a stay in hospital.

The facility was fully funded by the Better Care Fund.

The facility had 80 ensuite rooms, spanning three floors, with communal spaces inside and out. The ground floor catered for those suffering from dementia, with specialist equipment and design. The middle floor provided nurse-led care, and the top floor was a social care residential unit.

All social care staff were employed by the Council's Adult Social Care directorate and all nursing staff were employed by the Sandwell and West Birmingham NHS Hospitals Trust. GP cover was provided by Your Health Partnership. Admissions and discharges were planned and recorded through an integrated hub, with involvement of the resident's family carers, and the key focus being on person-centred care.

Harvest View had opened on 24 November 2022 and had received excellent feedback from service users. There were currently 19 residents staying there.

The Board welcomed the update and cited it as an excellent example of joint commissioning, that deserved national recognition as the first facility of its kind.

47/22 A Multi-Agency Social Emotional Mental Health Competency Framework for Staff Working with Children and Young People in Sandwell

The Board noted an update on the development of a Multi-Agency Social Emotional Mental Health Competency Framework for Staff working with Children and Young People in Sandwell.

The Framework would be aimed at all staff, including caretakers, teachers, community transport drivers and youth workers and would encourage collaborative working to support children and young people across Sandwell.

The Sandwell Wellbeing Charter Mark had been supporting schools to adopt a whole-school approach to mental health and wellbeing since 2018. The Charter Mark had now been extended to support Early Years Settings and Community Voluntary Sector Organisations to adopt a whole-organisation approach to mental health and wellbeing. This work had identified a need to improve learning and development opportunities for the whole place-based workforce, not just those in education settings, to support the emotional health and wellbeing of our children and young people in Sandwell.

The Framework set out separate competencies for those working with children and young people at different ages - early years, primary school, secondary school and college - with clear enhancements included where necessary for children and young people with additional needs. Consideration was also being given to applying the Framework in community hubs. The competences were not new and were aligned to the Safeguarding Partnership's competences. The expectation was that they would be embedded in one to one and appraisal processes.

The purpose of the Framework was not to make everyone an expert in children and young people's mental health, but to give confidence to increase their ability to recognise need and signpost, and reduce the number of risk-averse referrals into mental health services.

It was proposed to disseminate the framework from January 2023. It would be reviewed on an annual basis.

Resolved that the Multi-Agency Social Emotional Mental Health Competency Framework for Staff working with Children and Young People in Sandwell is approved and disseminated to relevant organisations.

48/22 Sandwell Drug and Alcohol Strategy

The Board received the Sandwell Drug and Alcohol Strategy 2022 which had been developed in conjunction with the Sandwell Drug and Alcohol Partnership (SDAP).

The Strategy had been informed by the 2022 Sandwell Drug and Alcohol Needs Assessment, which had reviewed local drug and alcohol needs, and aligned to the Government's 10-year plan "*From Harm to Hope*". Three core elements of the plan were to break drug supply chains, deliver a world class treatment and development service and reduce the demand for recreational drugs. It was noted that although the two strategies were very similar, an extra "alcohol strand" had been added to the local strategy to specifically address the circumstances faced in Sandwell. Local partnerships utilising proactive oversight of the strategy was key to addressing the concerns.

It was highlighted that due to pro-active treatment services already based in the borough, the severe increases seen in other areas had not been experienced in Sandwell. Two national awards had already been received for Sandwell's approach to vulnerable drinkers and the borough's excellent approach to community care. Young people's hospital admissions were well below the national and regional average, however, alcohol related deaths and unmet drug and alcohol need required further development and attention.

A local needs assessment had been completed during April-June 2022 with over 30 partner organisations. Focus groups were held for young people and adults with living experience of drug and alcohol abuse. Wider consultation had also taken place obtaining a further 420 Responses. Many people had been

identified who were either too unwell or ashamed of the stigma associated with asking for assistance with drugs and alcohol.

The SSDAP would be the main driver of the Strategy with oversight of governance arrangements. Targets and outcome monitoring would be set, and additional working groups would be created. A single town model would be used to better understand hotspots in the borough.

Although more work was needed around prevention, it was highlighted that young people's services did already undertake education and prevention work throughout primary schools. The Police also worked with a range of partners to drive early help.

The Board welcomed the Strategy and endorsed the associated Action Plan and delivery plans.

49/22 Joint Strategic Needs Assessment (JSNA) - Approach

Approval was sought to the proposed approach to the production of Sandwell's Joint Strategic Needs Assessment.

The production of the Joint Strategic Needs Assessment (JSNA) was a joint statutory duty for local authorities and Integrated Care Boards (ICBs); discharged through the Health and Wellbeing Board.

The key principle is for the Local Authority, NHS partners, the voluntary sector, the community and service users to work together in the local area.

The aim, in co-operation with NHS partners, the voluntary sector and community service users, was to research and agree a comprehensive picture of local health and wellbeing needs and develop local evidence-based priorities to improve the public's health and wellbeing. The strategy would remain adaptable to ensure that quick changes could be made in response to the ever-evolving cultural and economic landscape.

The proposed approach for Sandwell followed two parallel activities. The first activity was the data analysis approach, this

would provide overarching data for key topic areas. The second activity was a “deep dive”, that would examine need in more detail for specific topic areas.

Resolved that the proposed approach to the development of Sandwell’s Joint Strategic Needs Assessment is approved.

Meeting ended at 8.03pm.

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Sandwell Health and Wellbeing Board
15 March 2023

Report Topic:	National Takeover Challenge of Sandwell Health and Wellbeing Board
Contact Officer:	Neesha Patel - neesha_patel@sandwell.gov.uk
Link to board priorities	<p>Please include in your report how your work links to one or more of our board priorities:</p> <ol style="list-style-type: none"> 1. We will help keep people healthier for longer 2. We will help keep people safe and support communities 3. We will work together to join up services 4. We will work closely with local people, partners and providers of services
Purpose of Report:	To highlight the issues raised by children and young people in Sandwell within the annual SHAPE Survey through the Health and Wellbeing Young People's Takeover Challenge.
Recommendations	<p>That the Health and Wellbeing Boards consider and comments upon the SHAPE Survey 2022 results, listens to the voices of young people and decides on a set of recommendations for the board to address the needs of the young people.</p> <p>It is also recommended that the Health and Wellbeing Board agrees to provide an update on the recommendations to the young people who have taken part in the Health and Wellbeing Board takeover challenge through the SHAPE Team.</p>
Key Discussion points:	<p>Outlined below are key findings from the SHAPE Survey Report (Appendix 1) which link to the 4 board priorities:</p> <p>We will help keep people healthier for longer The topics that young people are least happy about included their confidence, appearance, caring for the environment and how to communicate with people</p> <p>Young people keep themselves physically fit and healthy through exercising and eating healthy food and the reasons why they keep themselves fit and healthy, are to get stronger and to help with long term health conditions</p>

such as diabetes. Young people who were victims of bullying stated that their physical appearance and the way they looked were the reasons for why they were being bullied.

Although the numbers of young people using substances were low, around 11-20% had used a substance, alcohol, vapes or drugs. There was acknowledgement that substances are now more accessible, and it was a current issue for young people today.

We will help keep people safe and support communities

Young people’s perception of Sandwell as a Borough remains negative, due to high levels of crime and deprivation. A greater emphasis needs to be made on the positives and ensuring regeneration and town plans are responsive to the needs of the future generation, making Sandwell a more attractive place to live for all.

From all the surveys conducted over the years, the common issues include gangs and youth violence, knife crime and getting bullied. Issues encountered not only happen face to face but online too through social media from cyberbullying including racist, sexist and homophobic comments to sending sexually explicit photos or videos.

We will work together to join up services

Professionals often talk about peer to peer support or mentoring, however in terms of mental health, young people want to talk to a professional to get advice. The young people stated they would not discuss these issues with another young person with the they fear their peers may tell others or teachers who they don’t trust, and young people feel it’s their personal business and like to deal with it themselves. They want to choose a trusted adult they feel comfortable with.

One of the issues raised by secondary aged young people surveyed was what to do after GCSEs. 47% stated they did feel as though school provided them with the advice and guidance they needed to make informed decisions about their future and 20% felt they didn’t provide the advice and guidance on post-16 options. Services and providers would benefit from linking more with educational institutions to provide non-curriculum activities and life skills such as money management, self-defence and planning for their future.

We will work closely with local people, partners and providers of services

Young people feel their voice is not heard, and when they are listened to, their opinions are not valued by adults. They appreciate having someone to talk to about their problems that could offer them the support they need.

	<p>In Sandwell there are a range of services available to support your emotional health and well-being. The secondary pupils were asked which services they were aware of. Sandwell Council’s Youth Service and pastoral support were the services that they were most aware of. In terms of partner and external services, Kooth and School Health Nursing along with DECCA were most known. The Just Youth website has recently been relaunched and is now also becoming more known to young people.</p> <p>Young people also raised that they wanted services to make them feel safe and build their confidence and self-esteem. They stated they felt services should provide more health and wellbeing education in schools as well as local diversionary activities out of school settings.</p>
<p>Implications (e.g. Financial, Statutory etc)</p>	
<p>There are no implications financially or legally. Young people having their voices heard increases social value.</p>	
<p>What engagement has or will take place with people, partners and providers?</p>	<p>The SHAPE Programme continually engages with a variety of young people. The SHAPE Survey which is sent to all schools for young people to complete. The questions are all based around the SHAPE topics: Staying safe, Being healthy, Enjoying and Achieving, Making a positive contribution and Economic wellbeing. The most recent SHAPE survey received 795 responses.</p> <p>The survey report has been shared with local partners and providers in Sandwell through key strategic boards and the children and young peoples’ voluntary sector forum.</p>



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SHAPE

"Where every child's voice matters in Sandwell"

Sandwell's SHAPE Programme is a Child's Voice Initiative designed to listen to children and young people in Sandwell. It focusses on the 5 Every Child Matters Outcomes:

Staying Safe **Being Healthy** **Enjoying & Achieving** **Making a Positive Contribution** **Economic Wellbeing**

Some of our key events throughout the year include:

- **Anti- Bullying Roadshow** - a week event during anti-bullying week in November where SHAPE, Youth Services and West Midlands Police visit Primary and Secondary schools in Sandwell to raise awareness about Bullying
- **Takeover Challenges** - Children and young people takeover council and partner agency board meetings to challenge senior officers on a variety of issues affecting young people
- **Make Your Mark** - Young people aged 11-18 in the UK get the chance to vote on the biggest issues facing young people in today's society
- **SHAPE Our Future Conferences** - Annual school conferences for children and young people, based on issues relating to the 5 key areas of SHAPE
- **Annual SHAPE Survey** - Annual online survey sent to schools and colleges for children and young people aged 9 – 18 to consult with them on SHAPE topic areas
- **SHAPE Your Talent** - A talent competition for 8-19 year olds (Up to 25 for disabilities) to showcase their talents in music, dance and entertainment with a chance to win £500
- **SHAPE Youth Summer Festival** - An outdoor community event for young people showcasing what services are available to young people during the summer holidays.
- **SHAPE Youth Forum** - Young people aged 11 – 21 meet on a bi-weekly basis to discuss issues affecting them. They are an engagement group for Sandwell Council and partners to consult with, on any service changes within their organisation, which affect young people. Two Youth Commissioners and two Members of Youth Parliament are also part of the forum.

For more information about SHAPE, please visit: www.justyouth.org.uk/shape



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2. We will help keep people safe and support communities
3. We will work together to join up services
4. We will work closely with local people, partners and providers of services

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Sandwell MBC

SHAPE

Survey Results 2022

Final Report

Neesha Patel
11-11-2022

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1. Executive Summary

The SHAPE Survey has been conducted since November 2014, when the SHAPE Programme was first introduced as a child's voice initiative. It is a means to consult with young people on the five SHAPE themes:

- Staying Safe
- Being Healthy
- Enjoying and Achieving
- Making a Positive Contribution
- Economic Wellbeing

In 2022, the online survey was developed for Primary School children from years 5 and 6 and Secondary School children from years 7 – 13. The link to the survey was distributed to all Primary, Secondary, Special Schools and Pupil Referral Units (PRUs) in Sandwell. The total number of survey participants was 795.

The questions were devised and developed by a number of stakeholders who deliver services to young people and broken down further into these specific areas: demographics, mental health and wellbeing, support services, social media, gaming and communications, local area, education and learning, youth activities, child's voice and future.

The main findings from the report portray that children and young people are finding life challenging with the pressures of school work and exams and fitting into society in an environment of increasing crime and bullying incidents.

Children and young people need to be listened to, so they can be supported adequately, and their needs can be met, particularly to improve their mental health and wellbeing. They need to gain trust in adults for them to share their concerns and they need to be aware of and gain confidence in services to support them.

Social media has become part of daily life for children and young people starting from primary school age and the influences of social media remain a concern.

The perception of Sandwell as a Borough remains negative, due to high levels of crime and deprivation. A greater emphasis needs to be made on the positives and ensuring regeneration and town plans are responsive to the needs of the future generation, making Sandwell a more attractive place to live for all.

Finally, further work needs to be done to improve communication for young people especially youth in secondary schools, so they have a wealth of information they need to support them and their families.

This report provides a detailed account of all the survey results along with a set of recommendations which internal and external stakeholders will adopt to address the needs and issues identified by children and young people.

2. Objectives and Purpose

The purpose of the SHAPE Survey is to consult with children and young people ranging from the age of 8 – 18 years. It allows council members, senior leaders, officers and partner agencies should be able to understand the experiences, needs, issues and views of young people in Sandwell.

The information from this study will enable stakeholders to reflect on the services they offer to young people and identify from the responses in the survey if any changes need to be made based on the consultation results.

National surveys such as Ditch the Label, Make Your Mark and the Ofcom Survey collect data from young people on specific issues like bullying, views on what national changes should be made by Government and media use and attitudes. However, on a local level, the SHAPE Survey offers a cross-section of consultation on a number of topics affecting the lives of young people and is the only consistent survey that is sent to every school in Sandwell on a regular basis.

3. Methodology

There were 2 participant groups for the survey, these included the following:

- Primary School Pupils from years 5 and 6
- Secondary School Pupils from years 7 to 13

An online survey was developed by the Public Health Intelligence Team with the questions formulated by the SHAPE Team and internal and external partners who had an interest in consulting with young people on their services. The following topics cover all the SHAPE themes of staying safe, being healthy, enjoying and achieving, making a positive contribution and economic wellbeing, and were used to devise the questions asked:

- General – demographic information e.g. age, school year, town
- Coronavirus
- Mental Health & Wellbeing
- Social media, gaming and communications
- Your local area
- Education & learning
- Youth Activities
- Child's Voice
- Your Future

The survey was developed with similar questions for the two groups. Many open-ended questions were included to ensure the children and young people were able to express their views and opinions freely. The survey questions can be found on Sandwell Trends.

Once the survey was developed and tested, the links were sent to all schools through the regular school's communication bulletin to Head Teachers. Head Teachers were asked to distribute the survey for pupils in their schools to complete, as well as staff.

There were no restrictions in the amount of young people from each school who could take part in the survey, however, schools were offered the incentive that if 25% of pupils on their school roll completed the survey, they would be provided with their school's individual results.

Each group was also offered the chance to enter into a prize draw to win vouchers, as an incentive for more participants to take part in the survey.

The survey was active from April 2022 to July 2022.

4. Results

The total number of participants that took part in the survey was 795, the total for each group were as follows:

- Primary school pupils –341 (3% of the borough population in years 5 and 6)
- Secondary school pupils – 454 (2% of the borough population in years 7 to 13)

The following pages provide a breakdown of the results of all the surveys based on the topic areas.

4.1 Demographics and Limitations

Of the 94 primary schools in Sandwell, 6% of schools were represented through participants. The number of participants from a single institution varied from 1 to 117.

Of the 20 secondary schools in Sandwell there was a representation of 30%. The number of participants from a single institution from this age range varied from 1 to 290.

The number of responses from both groups were considerably higher than 2020. This is likely to be as children and young people were back into school, enabling schools in the borough to ensure participation.

Figure 4.11 provides a breakdown of the age of the participants. For the primary age the largest category was age 11. For secondary, the largest category was 13. There was representation from all ages however the 16 to 18 age group responses were low and therefore it must be noted that it is difficult to offer definitive conclusions when analysing the results of the survey for this age group.

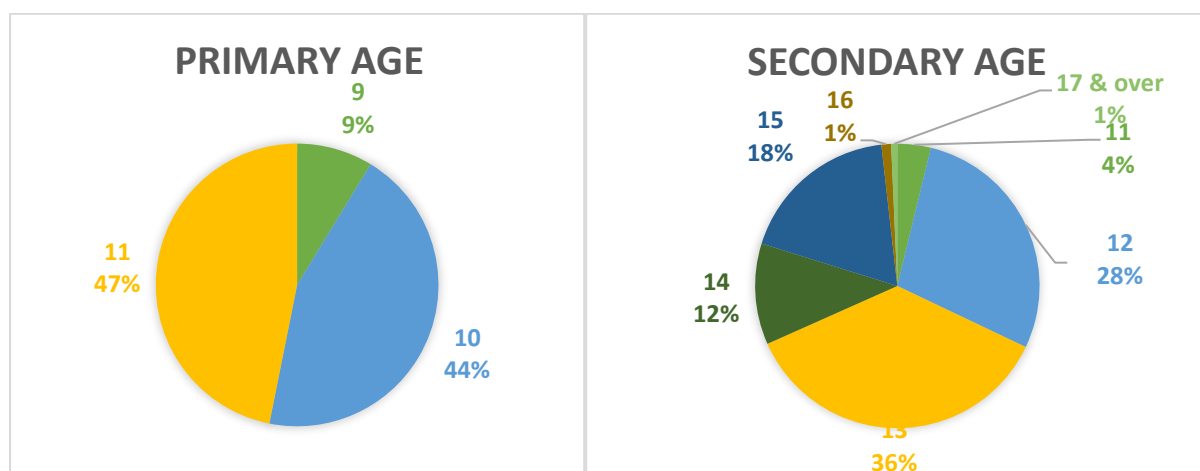


Figure 4.11 – Breakdown of the age respondents of survey respondents

The male/ female and ethnicity breakdown are shown in Figure 4.12. The proportion of female responses was slightly higher for both groups.

Please note primary pupils were not asked about their ethnicity but for secondary the majority were non-white respondents.

Participants	Male	Female	Other or prefer not to say
Primary	48.4%	51.3%	0.3%
Secondary	44.7%	51.5%	3.8%

Participants	White	Mixed, Asian or Black	Other
Secondary	38.3%	58.4%	3.3%

Figure 4.12 – Gender and ethnicity breakdown of survey respondents

The participant groups were asked which town they lived in. The breakdown is provided in Figure 4.13. In terms of primary, Wednesbury was the highest with 34% of respondents from the town. For secondary however Wednesbury was the one town not represented and Oldbury proved to be the highest with 58% of respondents.

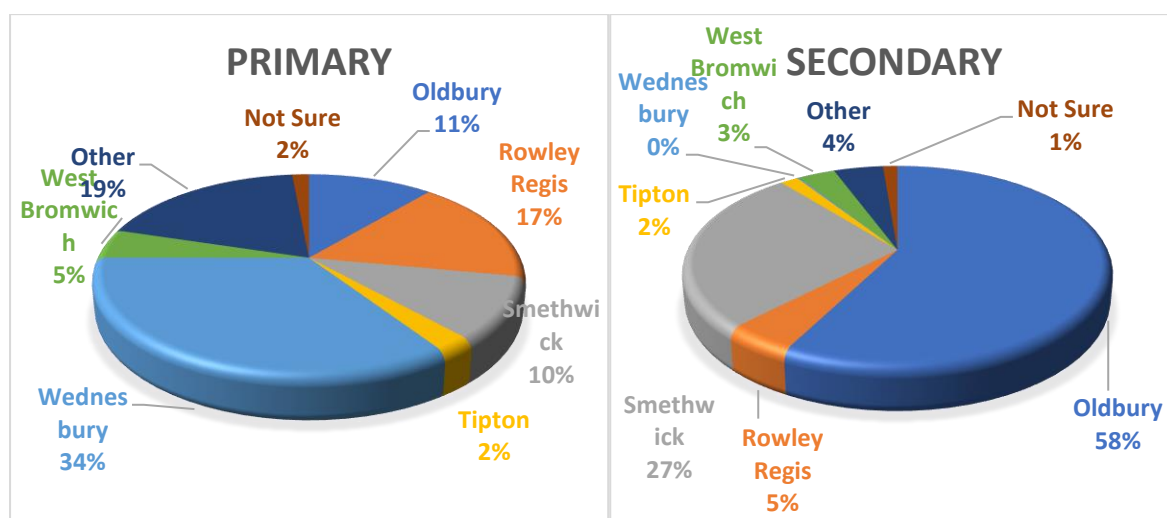


Figure 4.13 – Breakdown of where survey respondents live

5. Coronavirus

The questions within this section explored whether young people were still feeling the impact of the pandemic. 83.2% of the primary aged children felt happy that all the coronavirus restrictions had ended, compared to 72% of secondary age young people but over a third of secondary children felt that the effects of the pandemic were still having an impact on their education. The reasons they gave for this were due to the time not spent in school during the pandemic, a lot of problems were incurred during online learning as well as many teachers being unavailable due to Covid. Some young people made references to forgetting a lot or just becoming lazier whereas others felt missing out on education increased their stress levels. Comments from young people included:

- “I feel as though all content was either rushed, missed or simply interrupted”
- “Remote learning wasn't as effective as in person learning”
- “I lost the majority of my secondary school education and there's now gaps in my knowledge. With starting GCSEs next year adds to the stress”

Young people stated that not just their education, but social isolation has affected their mental health, and this ultimately also affects learning as well, “I have noticed that I have developed social anxiety and anxiety in general. I feel anxious when in class and it affects my learning”.

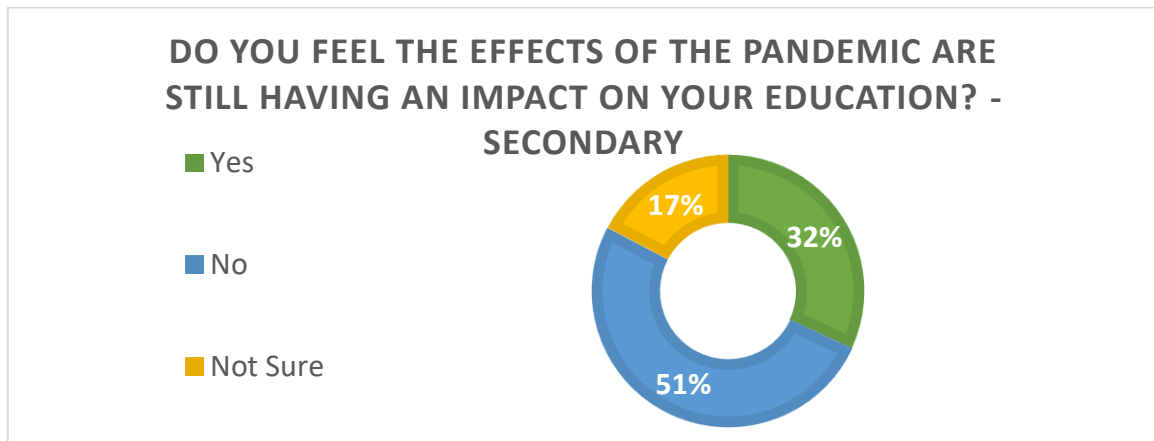


Figure 5.1

6. Mental Health & Wellbeing

Mental health and wellbeing questions covered many different aspects including issues affecting young people today and how the topic is dealt with in an educational setting.

One of the questions asked consistently in all SHAPE surveys to date is, what is the top issue affecting young people in today's society. Figure 6.1 shows the top 5 issues from 2015 to 2022.

From all the surveys conducted over the years, there are obvious reoccurring themes, such as school work and exams which you would expect to see for this age group. However, the more serious issues include gangs and youth violence, knife crime and getting bullied. Comments made from this year's survey by young people on why they chose these issues, include:

- “People consider being in a gang cool. Being accepted is hard as thing like being gay is seen as a joke”
- “I don't feel accepted because I don't feel good enough and I dislike the way I look”
- “Many teens worry about their future after school and end up getting into violence because of stress”

Highlighted in red is 2020, the year of the pandemic, which during lockdown saw less crime taking place in Sandwell therefore knife crime and gangs were not featured.

However, being bullied was ranked third with physical appearance second which young people tend to give as one of the reasons why they are bullied. The increased usage of social media during the pandemic increased cyberbullying incidents with young people.

	2022	2020	2019	2017	2015
1	Gangs & Youth Violence	School/College work & Exams	Knife Crime	What to do after year 11	School work and exams
2	Knife Crime	Physical Appearance	School/College work & Exams	School work and exams	Gangs & youth violence
3	School/College work and exams	Being Bullied	Gangs & Youth Violence	Getting college course/apprenticeship	What to do after year 11
4	Drugs and substance abuse	Impact of covid 19	Being Bullied	Gangs and youth violence	Being Bullied
5	What to do after GCSEs Being Bullied	What to do after GCSEs	What to do after GCSEs	Nothing worries me	Being Healthy

Figure 6.1 – Issues affecting young people from 2015 to 2022 SHAPE survey - Secondary

In figure 6.2, young people were asked to rate their happiness in different categories, for secondary aged children, they were most happy about their home, family and hobbies which was the same in the 2020 survey results. However, what they were least happy about, has changed with this year including their confidence, appearance, caring for the environment and how to communicate with people, compared to 2020 where they were least happy with their community, other relationships and local area.

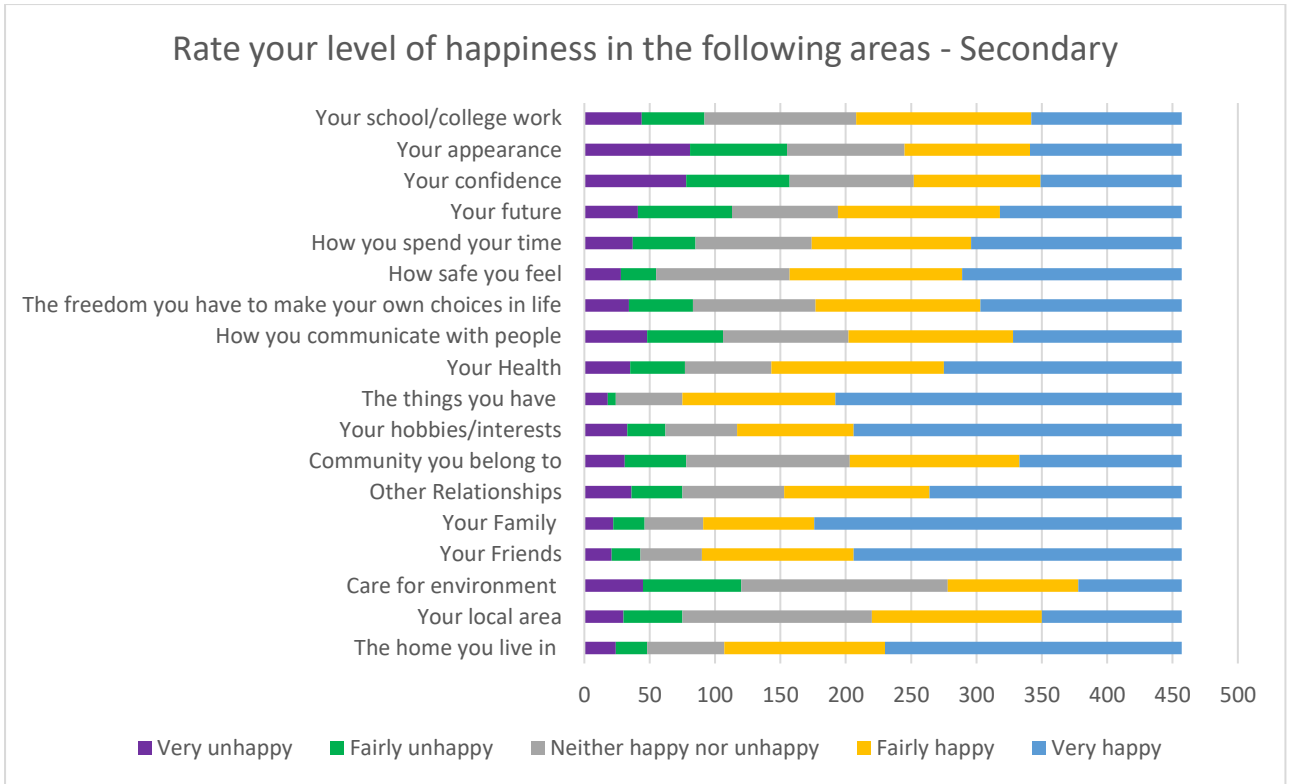


Figure 6.2

Primary aged children portrayed a similar picture in figure 6.3, however they were least happy with their school work.

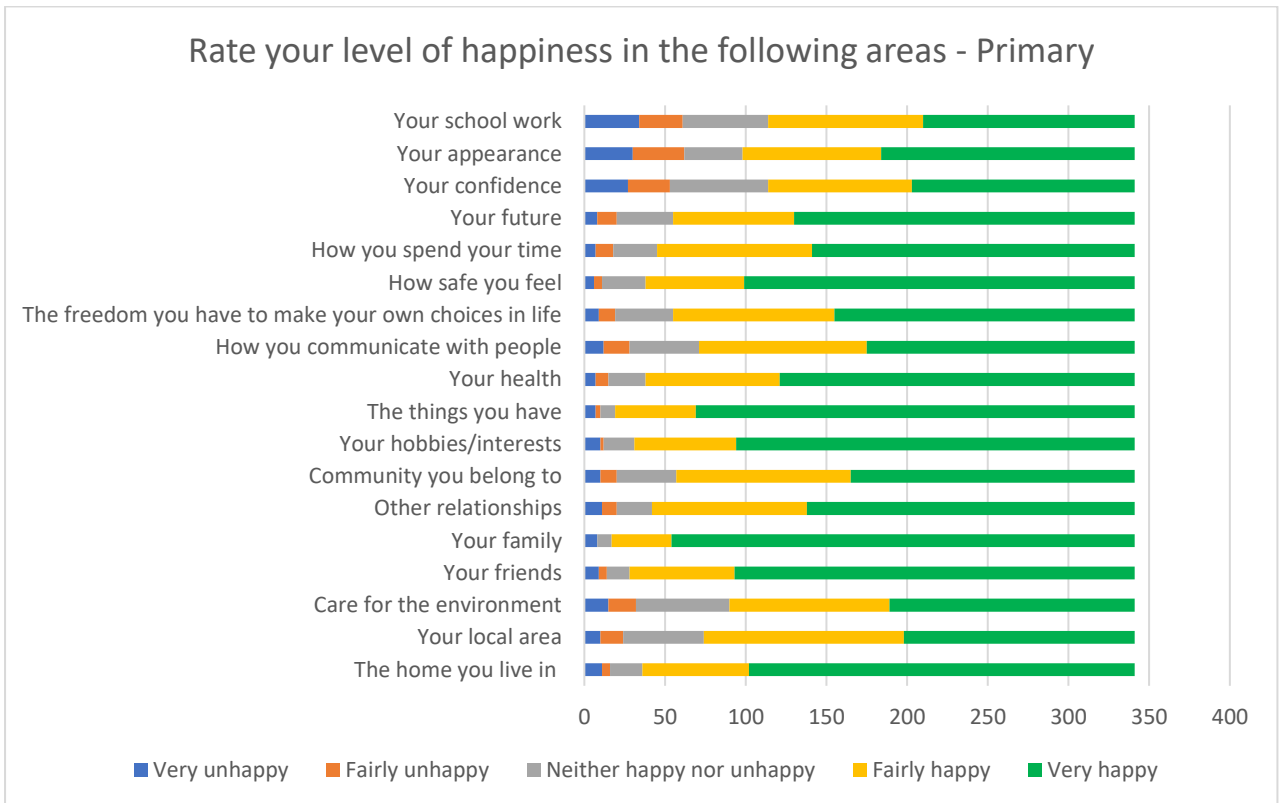


Figure 6.3

In figure 6.4, a large proportion of primary school children, 75%, did feel happy about their life at the moment which was positive. This is significantly higher than 2020 which provided a result of 40.2%, with many reasons being due to the pandemic. Therefore, coming out of the pandemic for this age group, proved to be beneficial for their mental health and wellbeing.

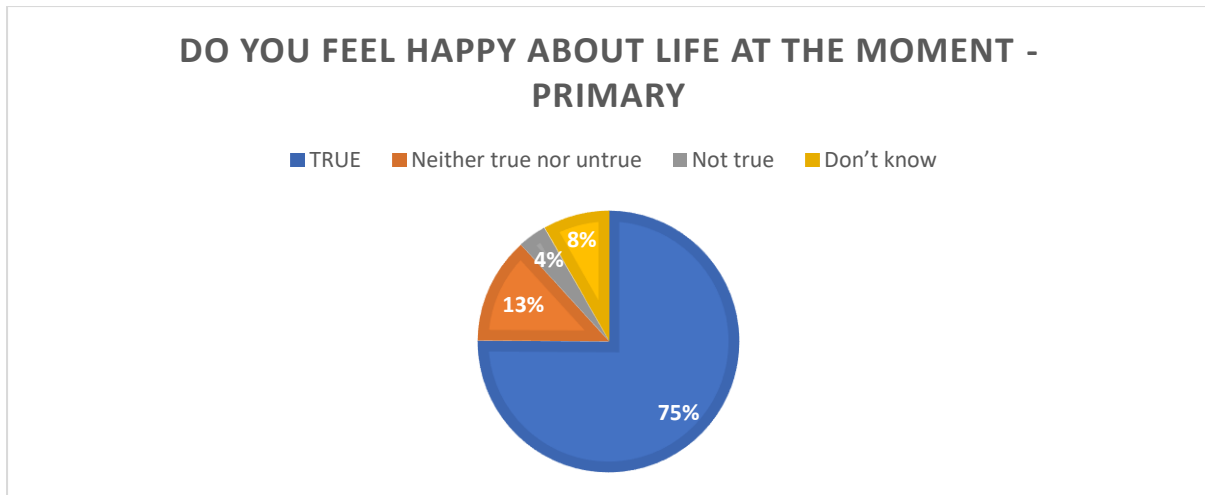


Figure 6.4

Secondary pupils were asked further about mental health and education in school. 57% of students did not know if they had a mental health ambassador or champion in school. However, when asked if they would approach a young person in this role if they had issues, over 50% said no. Professionals often talk about peer to peer support or mentoring, however in terms of mental health, this is clearly not welcomed by young people and often when it comes to mental health, a lot of young people want to talk to a professional to get advice. The young people highlighted reasons in the survey for why they would not discuss these issues with a young person from their school and trust was a big contributor, they fear their peers may tell others or teachers who they don't trust, and young people feel it's their personal business and like to deal with it themselves. They want to choose to talk to who they feel comfortable with.

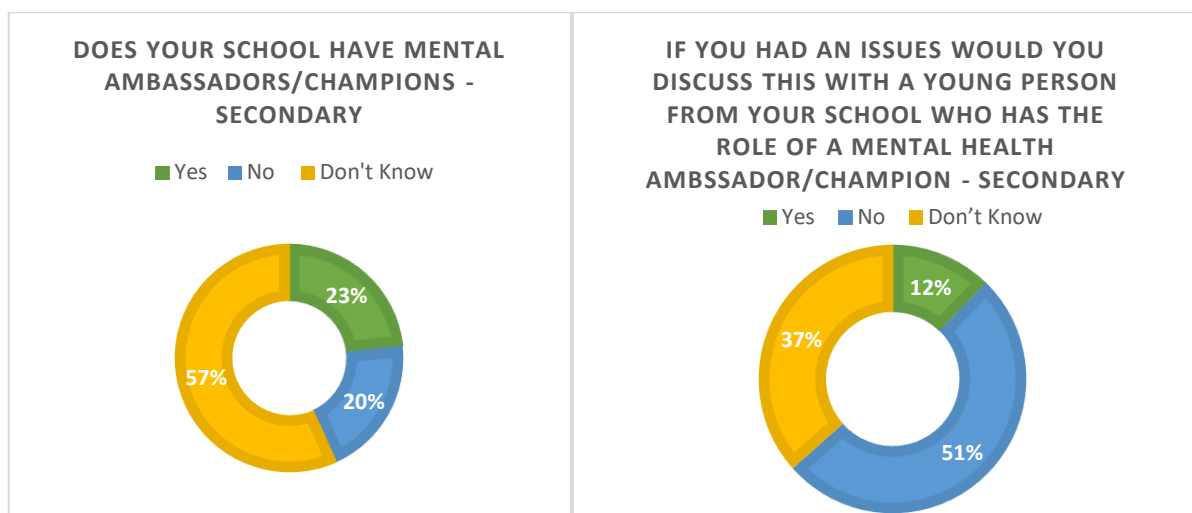


Figure 6.5

Both groups were asked what would improve their mental health and wellbeing. There were many different answers provided by each age group, but the most popular ones are listed here. Some are common between both age groups, such as having someone to talk to when you have a problem and being able to voice views and opinions freely

For primary, they highlighted that helping with the transition to secondary school, which 25% of the children surveyed were not looking forward to, is important, as is tackling bullying issues. They also recognised supporting families who may have financial difficulties was important too.

For secondary, there was a focus on their future, and exams and school work often came up as an issue. They felt that extra support during exam season would help them as would planning for their future. In order to relax and spend time with their friends, they have also identified that they need more places to hang out.

	Primary	Secondary
1	Having someone to talk to when you have a problem	More support to plan for my future
2	Making my move to secondary school easier	Extra support during exam season
3	Being able to voice your views and opinions freely	More places where I can hang out with my friends
4	Family support for families who have issues with money	Having someone to talk to (e.g. mentor)
5	Tackling bullying issues	Being able to voice your views and opinions freely

Figure 6.6 –Top 5 responses to “What would improve your mental health and wellbeing”

The secondary aged young people were asked what services could do specifically to support young people’s mental health and wellbeing and as this was a free text box. There was a large number of answers referring to some of the improvements raised in figure 6.6 such as providing them with someone to talk to, listening to young people and helping them by giving them better advice. Providing them with more things to do also was mentioned, such as more sporting activities and facilities to do them in.

However, they also raised that they wanted services to make them feel safe and build their confidence and self-esteem. They stated they felt services should provide more health and wellbeing education in schools, examples given were that there should be dedicated assemblies, wellbeing lessons and just simply regular check ins with young people to see if they are ok. Figure 6.7 below shows that only 44% of young people

stated that they have lessons promoting emotional health and wellbeing, with 27% stating they didn't know if they had any, demonstrating there may be a lack of understanding of what emotional health and wellbeing is. 29% stated they didn't have any lessons.

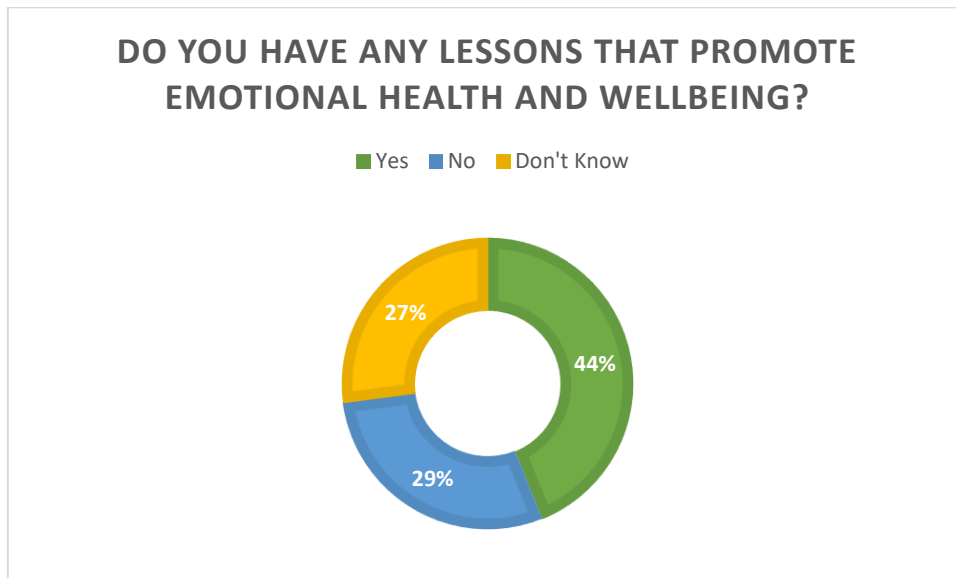


Figure 6.7

7. Keeping Physically Fit & Mentally Fit

When asking young people how they keep themselves physically fit and healthy, for both age groups, exercising and eating healthy food were the most popular ways in keeping physically and mentally fit.

However, the vast array of answers in figure 7.1 shows how many different things young people like to do and what they associate with keeping physically and mentally fit, including keeping a positive mindset, reflecting and focusing on themselves which enhances their wellbeing.

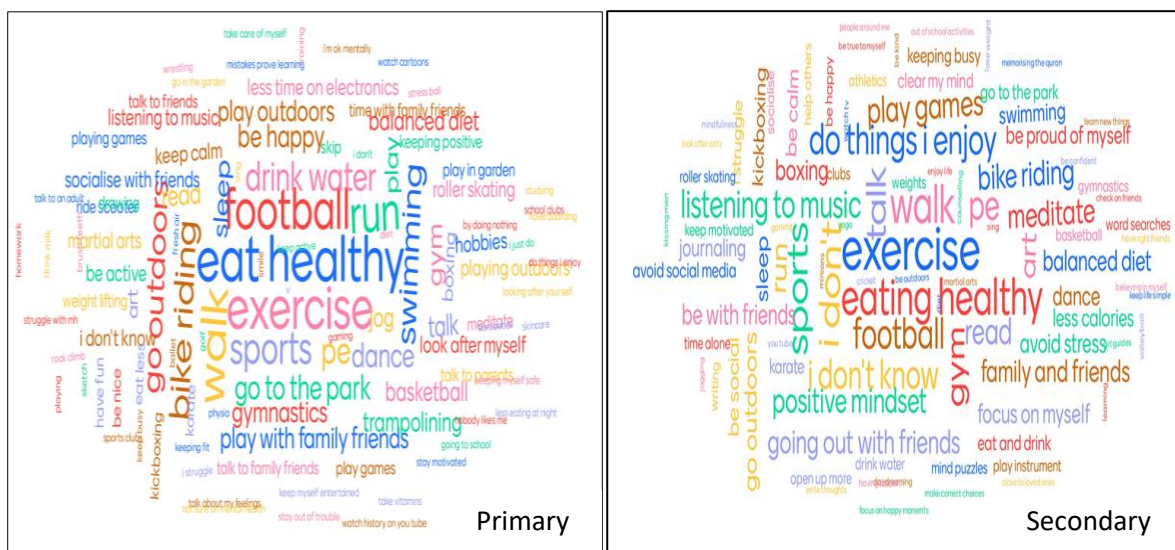


Figure 7.1 – Responses to “How do you keep yourselves physically and mentally fit?”

The young people were asked if they like to take part in PE/sporting/physical activities in and/or out of school, and although the results were positive, the primary age group enjoyed sporting activities more than the secondary age group as figure 7.2 shows.

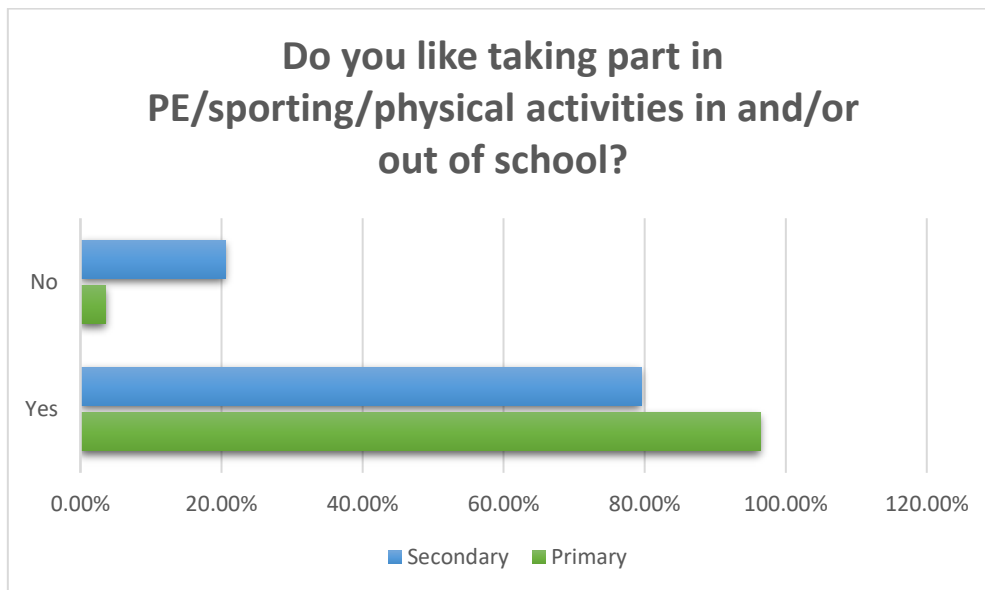


Figure 7.2

Figure 7.3 shows that when asking why they exercise; the top reasons were to get stronger and to help with long term health conditions such as diabetes. The ‘other’ category that primary children chose included reasons such as to help them mentally, to lose weight, to generally be healthy and to have fun.

Primary	Secondary
To get stronger	To help with long term health conditions eg diabetes
To help with long term health conditions eg diabetes	To get stronger
Other	To lose weight
To lose weight	To improve my mood
To improve my mood	To have better stamina
To have better stamina	To look good
To get more energy	To make more friends when you take part
To make more friends when you take part	To get more energy

Figure 7.3 – Responses to “Why do you Exercise?”

Young people at secondary age were asked if the council could do more to help direct them to available sporting/physical activity facilities, with 33.1% agreeing that the council could do more.

8. Support Services

A range of support services exist in Sandwell and this section of questions aimed to find out whether young people were aware of these services.

Two questions were asked about policing, these were whether the pupils knew who their local/link police officer was, and secondly would they know how to report something. The results are shown below and are significantly lower than last year's survey.

	Do you know who your local/link Police Officer is?		Would you know how to report something to the Police?	
	Primary	Secondary	Primary	Secondary
Yes	5.4%	8.4%	60.5%	59.9%
No	94.6%	91.6%	15.7%	21.2%
Not Sure	N/A	N/A	23.7%	18.9%

Figure 8.1

The results show that although many pupils are unaware of their local police officer, positively, around 60% are aware of reporting something to the Police.

Both age groups were asked questions on the school nursing service. In terms of awareness as shown below, over 50% of both groups are aware of the school nurse service which is a higher percentage than 2020.

	Primary	Secondary
Yes	55%	58%
No	45%	42%

Figure 8.2 – Results to “Are you aware that your school has a school nurse?”

68.2% of secondary age young people knew how to contact the school nurse, but only 45.3% of primary age group knew who their school nurse was.

For the secondary students' further questions were asked. Even though over half the students were aware of the school nurse only 37.3% of these knew what services the school nurse offers. 45.2% of the students who were aware had visited the school nurse for a number of reasons in figure 8.3, but the main ones being injury and accidents and illnesses. As NHS School nurses do not provide first aid, this suggests that students are confusing their role with the role of the school first aider/pastoral support. Over 82.9% accessed school nurses through a drop-in session at school.

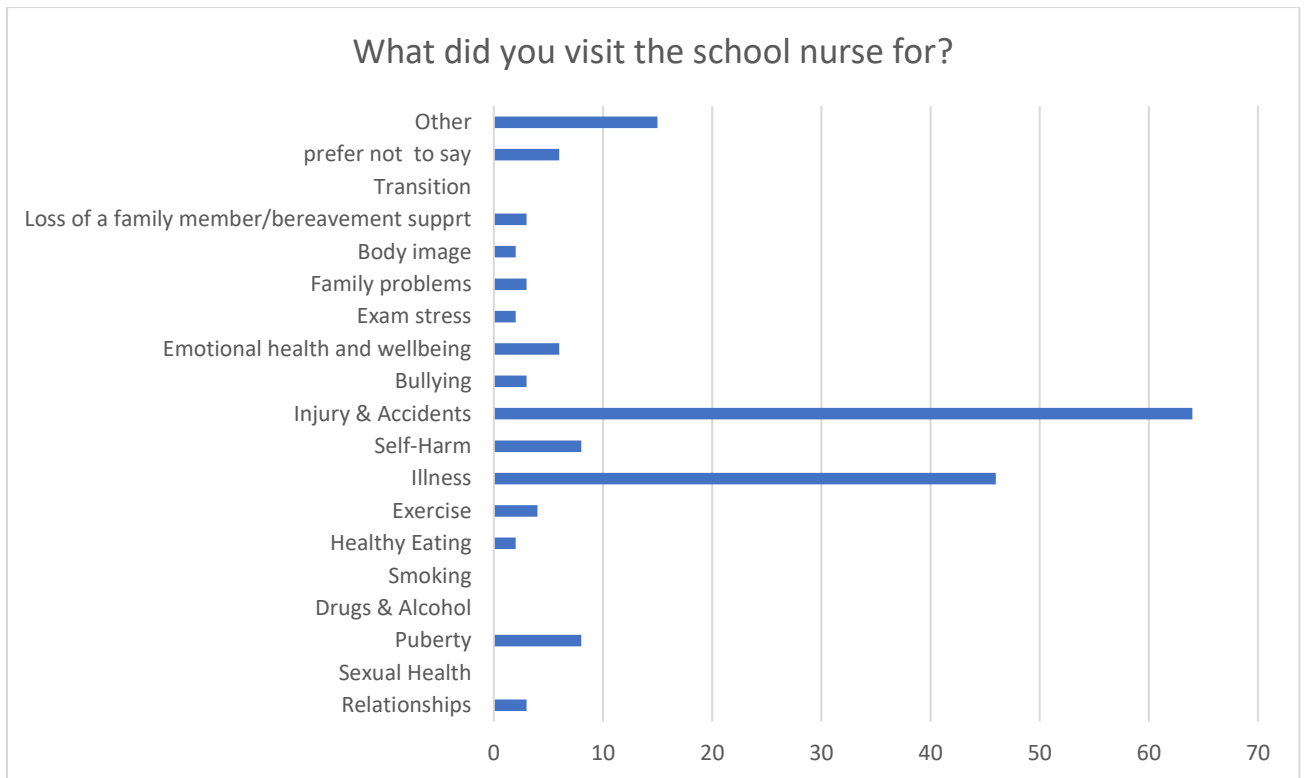


Figure 8.3

Young people were asked if they had a problem at home that they couldn't talk to their parents or carer about, who if anyone would they talk to about it or ask for help from. Figure 8.4 shows they would choose their friends (particularly secondary age students), teacher or an adult at school.

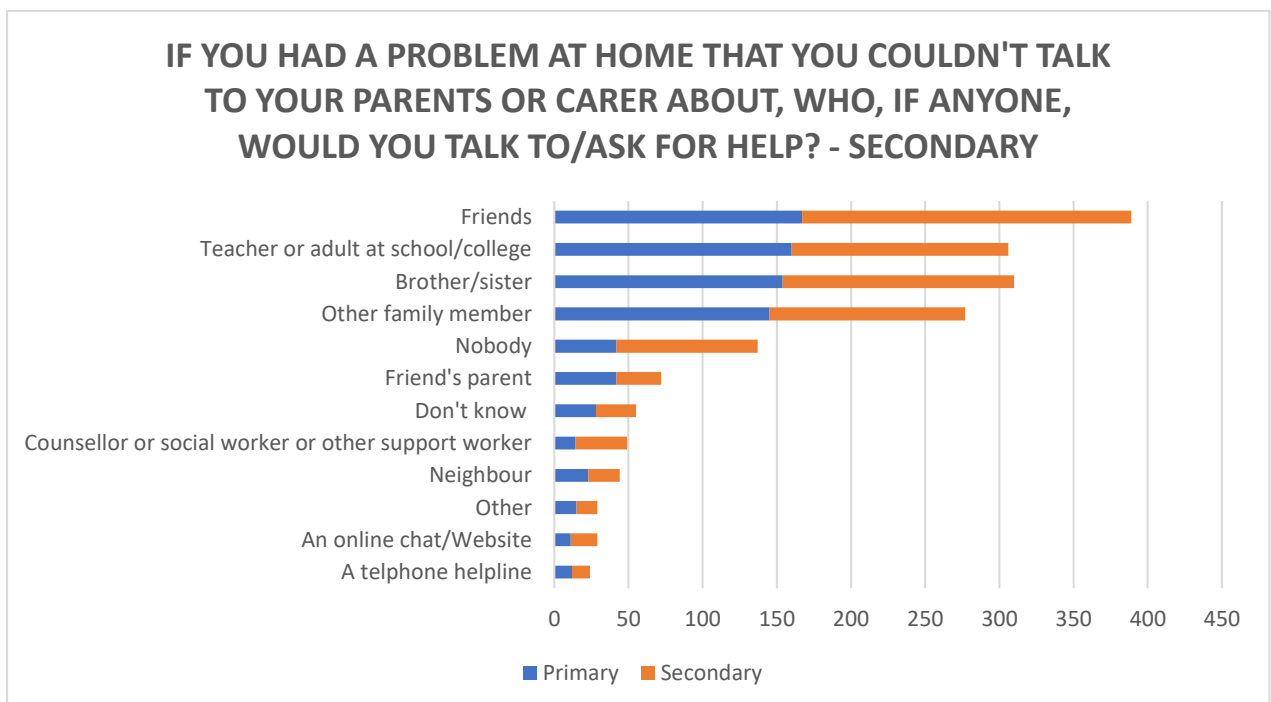


Figure 8.4

In Sandwell there are a range of services available to support your emotional health and well-being. The secondary pupils were asked which services they were aware of. Sandwell Council's Youth Service and pastoral support were the services that they were most aware of. In terms of partner and external services, Kooth and School Health Nursing along with DECCA were most known.

The Just Youth website has recently been relaunched and as shown by the figure 8.5 is now also becoming more known to young people.

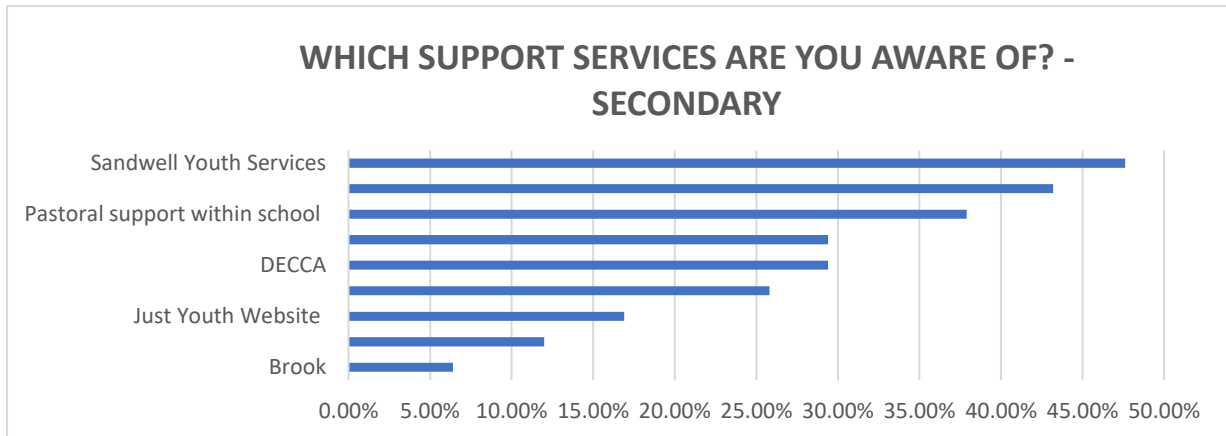


Figure 8.5

9. Substance Usage

Questions about substance use were asked to those young people who were in year 9 or above in secondary schools. Of the 156 young people surveyed 20% had consumed an alcoholic drink.

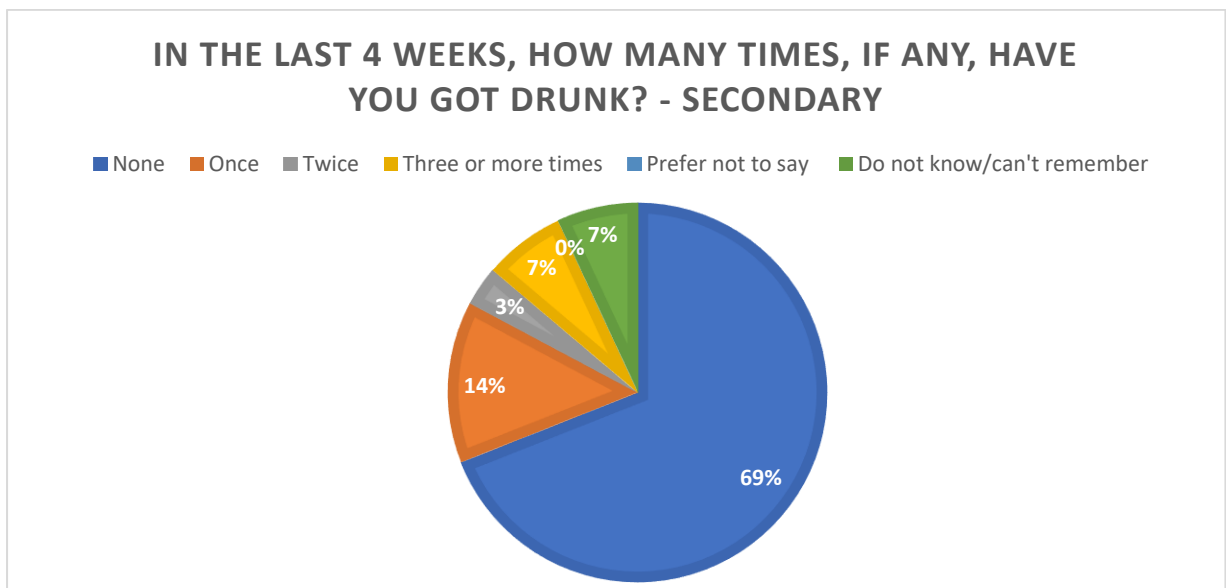


Figure 9.1

11.5% have used an e-cigarette/vape of which the usage can be seen below in figure 9.2.

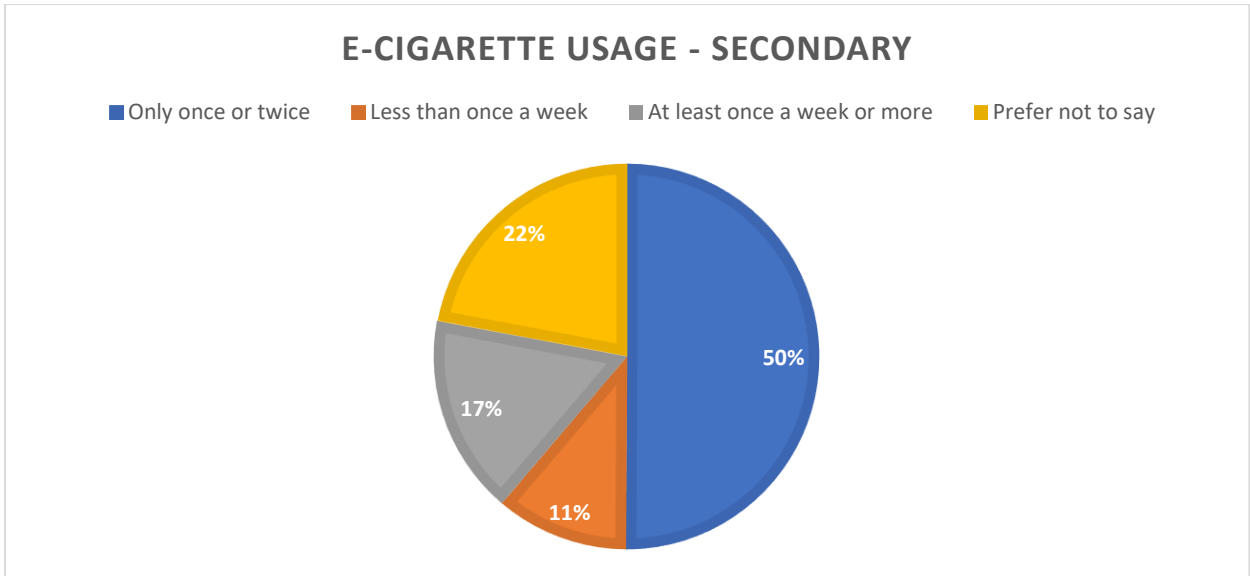


Figure 9.2

5.1% have taken drugs (illegal substances) for recreational use, of which in the last 4 weeks, 3 people had taken cannabis (weed, grass, dope, pot, marijuana) and 3 preferred not to say. 14.3% of those who had taken drugs before had not done so in the last 4 weeks.

10. Social Media and Gaming

The following series of questions focuses on internet, social media channels, usage and gaming.

10.1 Internet

When primary school children were asked what they used the internet for, figure 10.1 shows that it is widely used for a number of reasons beyond school work, including over a third stating they use it for gaming, 21% for chatting and 17% for social media (bearing in mind they should not legally even have social media profiles or be using the channels at this age)

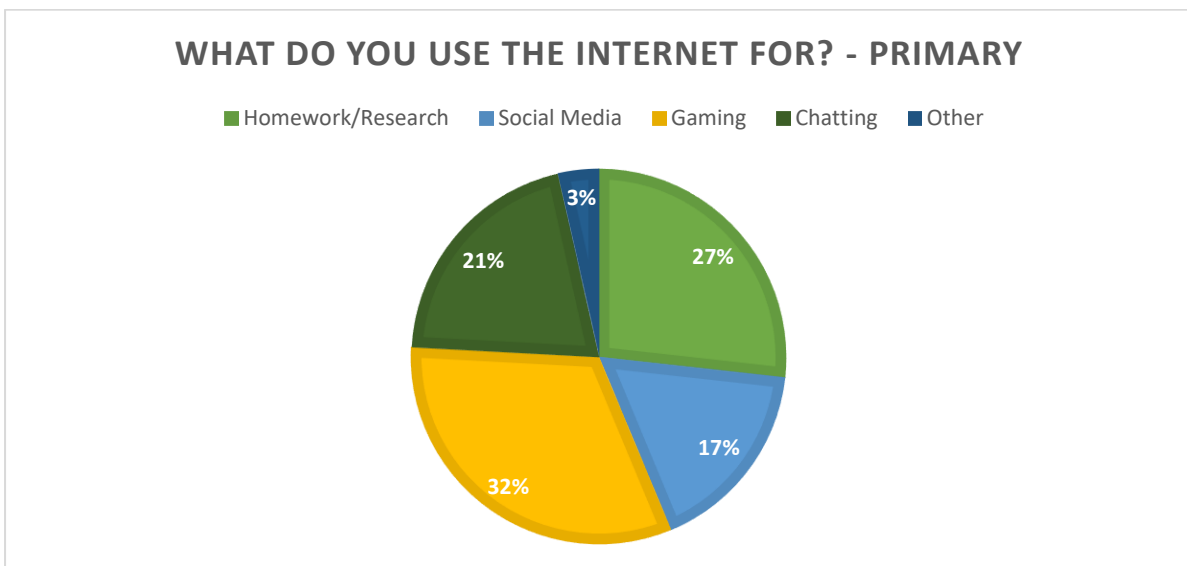


Figure 10.11

10.2 Social Media

When asked about social media platforms and applications, figure 10.21 shows primary age children stated the most popular channels were You Tube, Whats app, Tik Tok and Snapchat, with the most popular reason for using them being chatting, watching videos and messaging. Tik Tok is also used for making videos. It is good however to see that there are some channels this age group are not using.

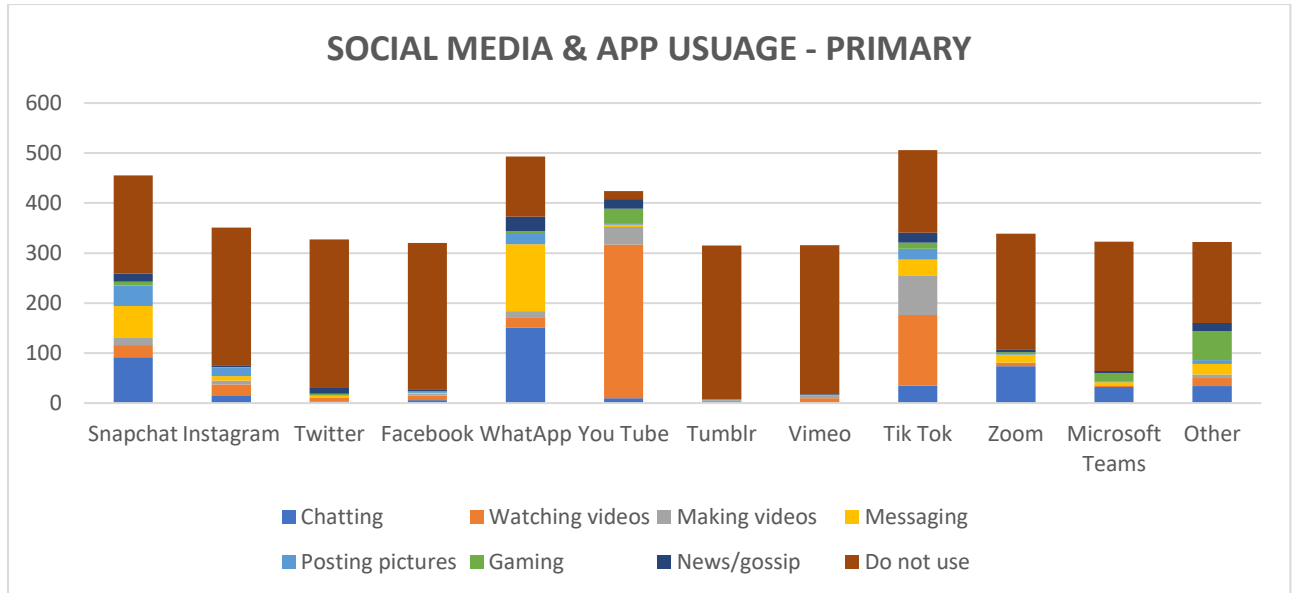


Figure 10.21

For secondary young people, figure 10.22 shows the most popular channels are Tik Tok, Whats app, Snapchat, Instagram and You Tube, for chatting, watching videos and messaging. This has changed from 2020 when Tik Tok was just emerging in the top 5 but now it is the top channel for the secondary age group.

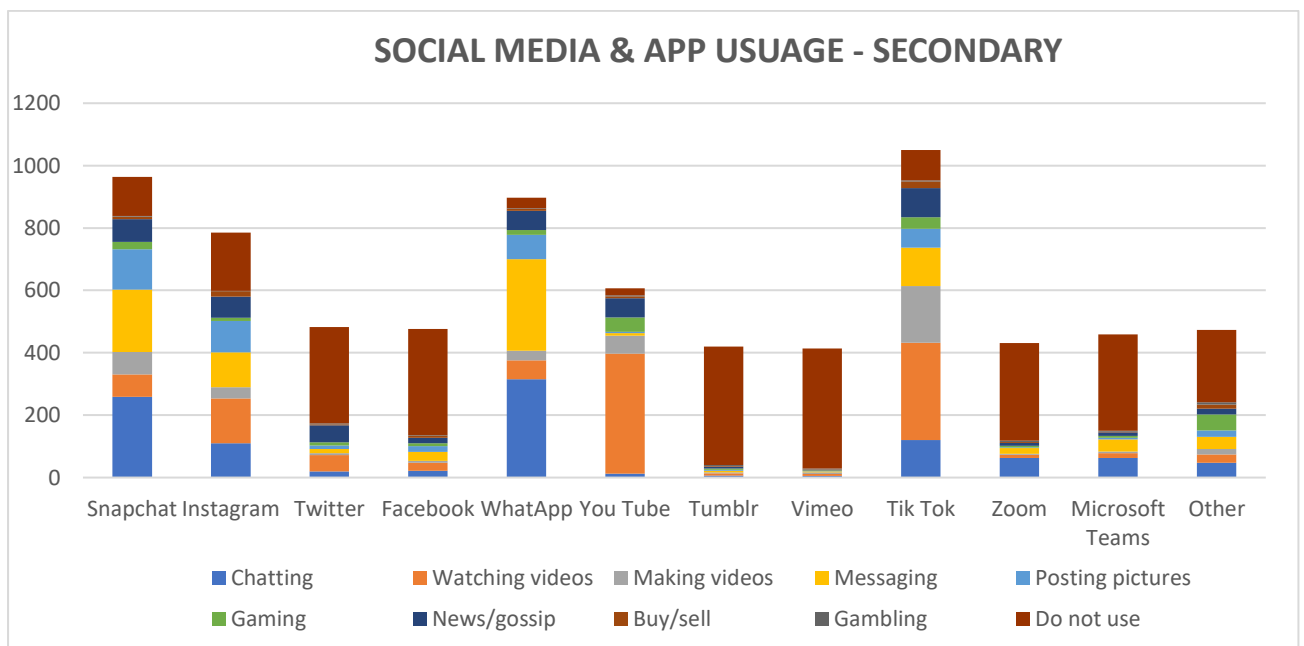


Figure 10.22

Young people were asked what issues they experienced online from various options. In figure 10.23, for the primary age group, issues are encountered and range from some name calling and cyberbullying with some elements of racist and sexist comments. It is important to note cyberbullying issues accounted for over a third of the responses and is significantly higher than 2020.

At a secondary age, more issues are encountered, and all with a similar number of responses. However, racist, sexist and homophobic comments online can also be viewed as being a form of cyberbullying too.

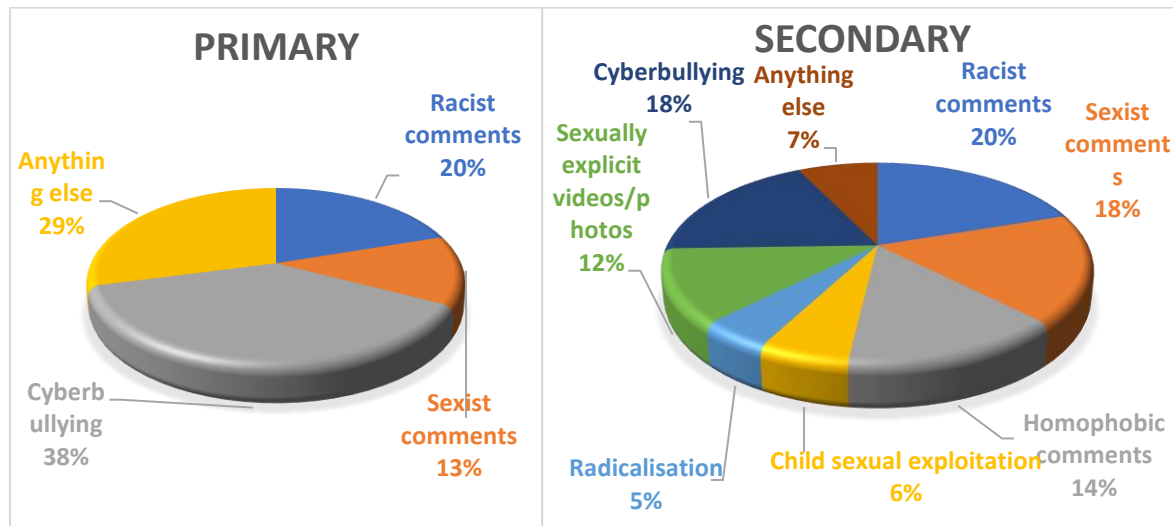


Figure 10.23 – Issues experienced online

10.3 Gaming

Gaming for primary age children is hugely popular and emerged as a popular activity for children at this age to do since the surge of activity online during the pandemic.

This year we asked all children surveyed if they were purchasing through gaming, including the purchase of coins, skins and loot boxes. 44% of primary and 43% of secondary stated that they were making in-app purchases with over 85% of these stating they purchased on a monthly basis with 43% of both age categories spending £5-£9.99.

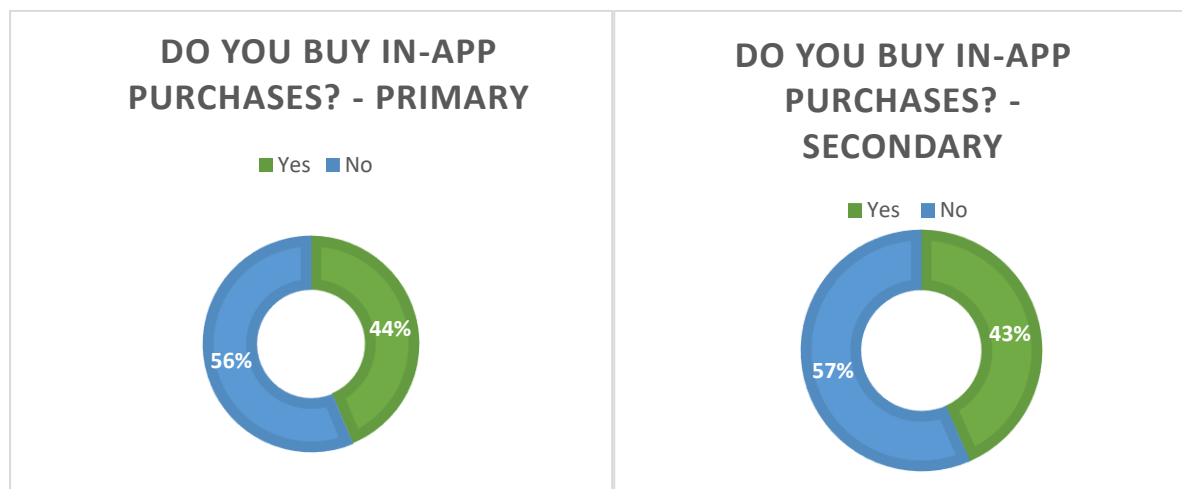


Figure 10.31

The young people were asked what games they play. There were vast number of games mentioned but the most popular ones were Minecraft, Fortnite, Roblox, Fifa, Call of Duty and Subway Surfers. There was not much difference in the games played between different age groups despite some games such as Call of Duty having an age restriction of 18 and above.

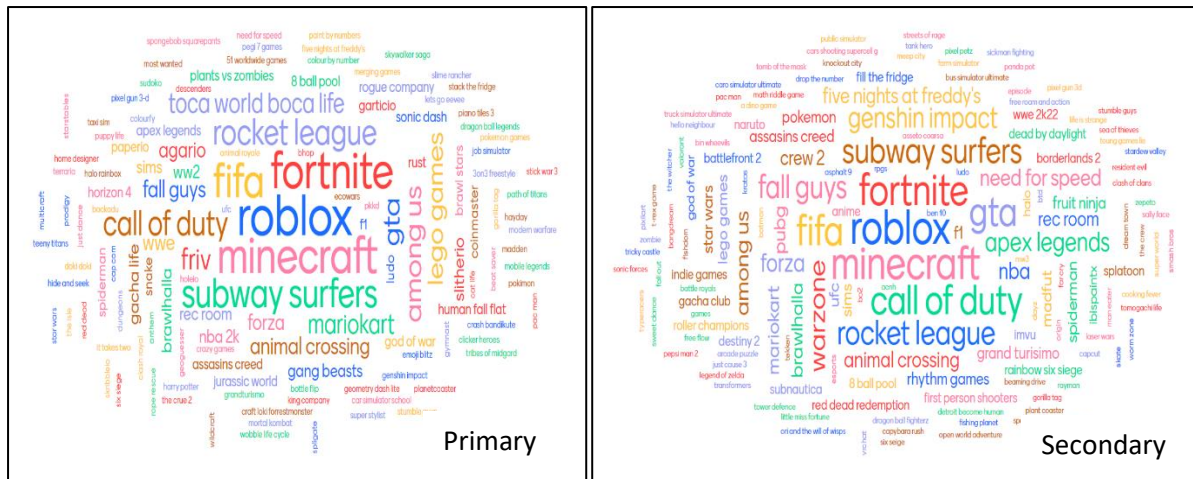


Figure 10.32 – Responses to “What games do you play?”

10.4 Communicating Information

The internet is the most popular mode of finding information particularly finding information on jobs and employment, health services, drugs and alcohol and physical health. Young people will also approach parents/carers particularly for managing and understanding money, jobs and employment and education choices.

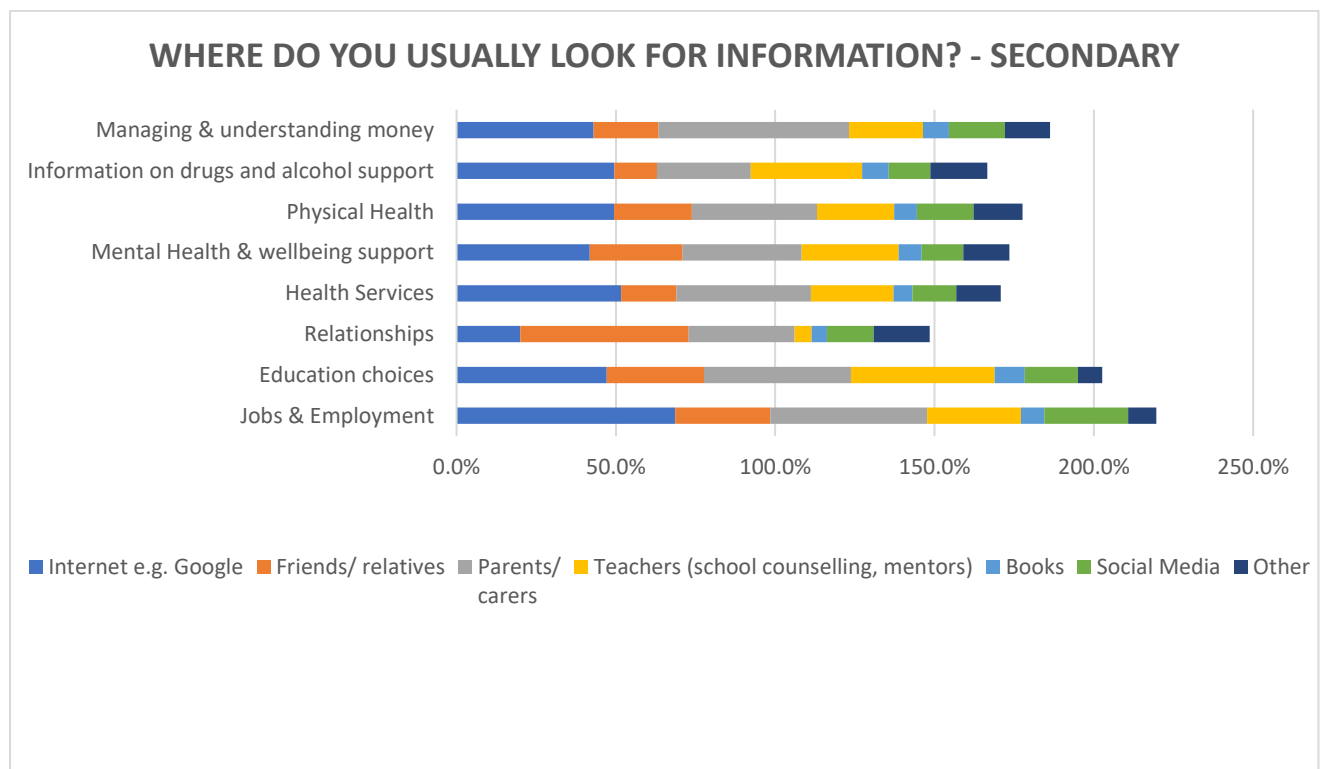


Figure 10.41

11. Local Area

Generally young people think their local area is either very good or fairly good. Opinions shift slightly at secondary age to be less favourable.

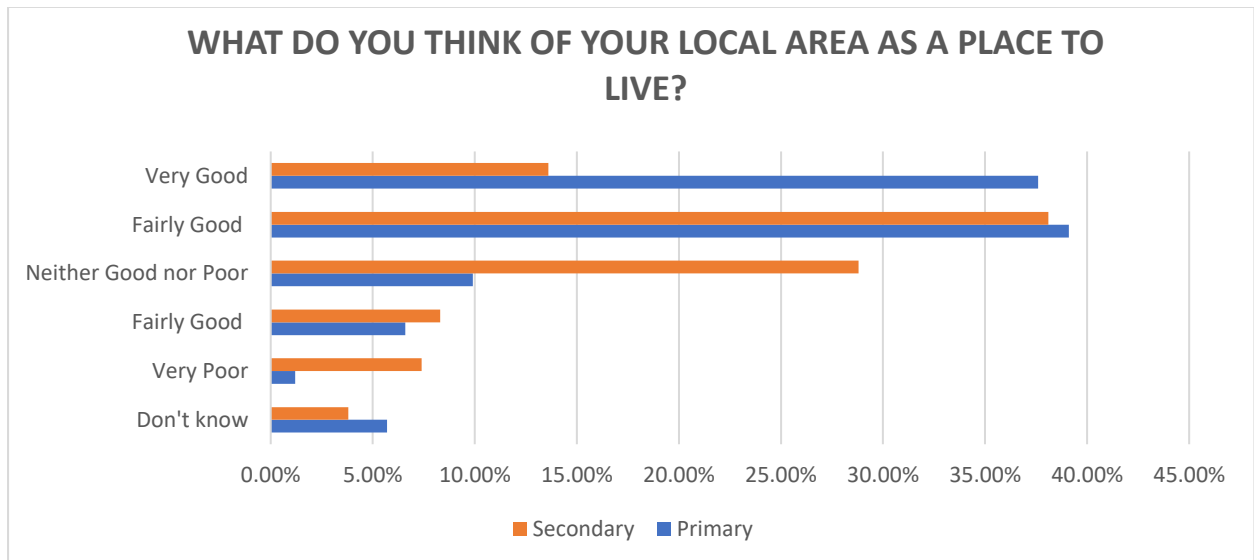


Figure 11.1

For the primary age group, the 3 things they felt would do the most to make their area better are: clean and less litter, safer roads and safer area or less crime. For the secondary age they agreed with the area being cleaner and less litter and safer roads, but their third choice for their area was more or better shops.

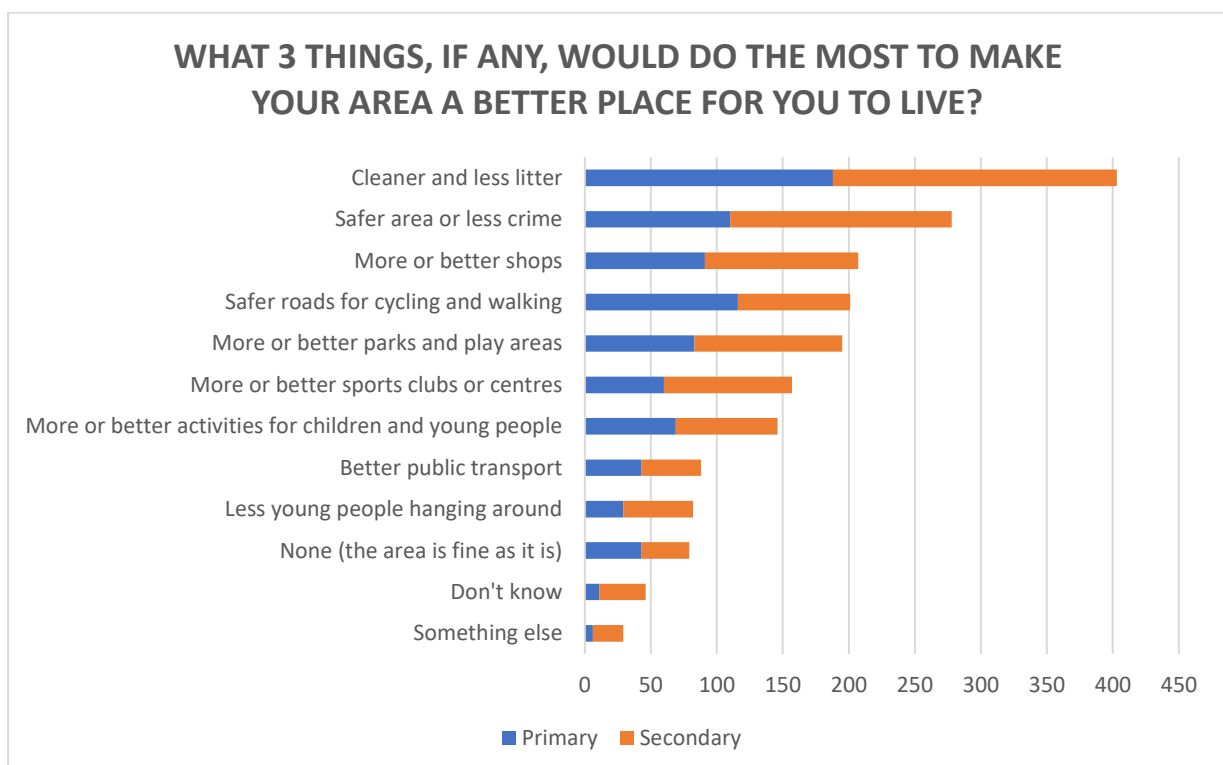


Figure 11.2

In terms of safety, both primary and secondary age felt very safe or fairly safe at home and in their school environment however only 59% of primary age felt very safe or fairly safe on public transport and even less at secondary age at 51.1%.

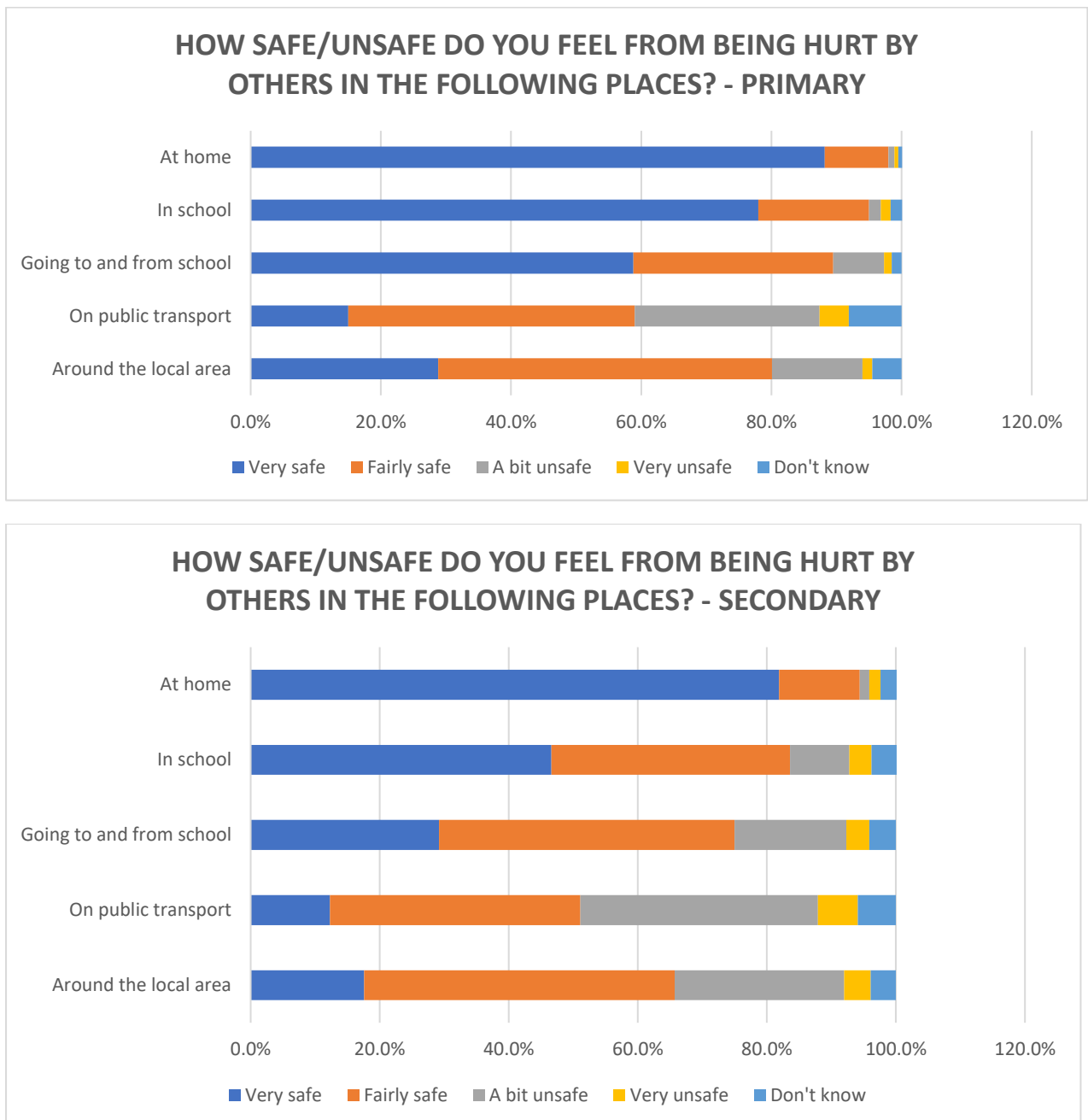


Figure 11.3

12. Education & Learning

In addition, to the education questions explored in the mental health and wellbeing section, this section included questions about children's likes and dislikes at school, bullying, coping with school work, transition to secondary school and topics they would like to learn about in school.

Friends, relationships, learning and education and the feeling of being safe are the positives felt about being in school. Physical activities such as PE are popular too.

Another one of the popular answers for the secondary age group was “nothing” which is not a positive answer.

Primary	Secondary
Friends	Friends & Relationships
Teachers	Nothing
Learning/Education	Learning/Education
Physical activities	Physical activities
Safe environment	Safe environment

Figure 12.1 – Top responses for positives about school

Although there were many things highlighted which children didn’t like about school, bullying has appeared again for both age groups. The secondary age young people also raised some of the other issues they had stated in the mental health and wellbeing section, such as gangs and knife crime. Mental health aspects also were stated such as stress, being bored and feeling unmotivated.

Primary	Secondary
Bullying	Stress
Arguments with friends	Unmotivated
Homework	Rules
School work is hard	Getting bored easily
Getting in trouble	Bullying
Nothing	Young people carrying knives
	Overcrowded
	Moody teenagers
	Bad behaved young people
	Gangs
	Mental Health
	Everything

Figure 12.2 – Top responses for negatives about school

Research conducted in the UK by Ditch the Label has shown a 25% increase in bullying year-on-year. Locally, figure 12.3 shows that 18.4% (62) of primary age children and 25.8% (101) of secondary age children who responded to the survey had been bullied in the last four weeks.

Those who had experienced bullying had the choice to explain their experience. For primary children, these involved nasty comments or being called names about their appearance. For young people at a secondary age, less were willing to share their stories and those that did stated issues between friends, name calling over appearance (in particular ‘fat-shaming’), group/ social bullying, homophobic, racist and transphobic comments. A few young people claimed they hid their experiences and did not trust anyone enough to tell them. Comments were made such as “Feel like killing myself”, “Devastating heartbroken”, “It’s very sad”, showing the hurt and sadness young people are facing through bullying.

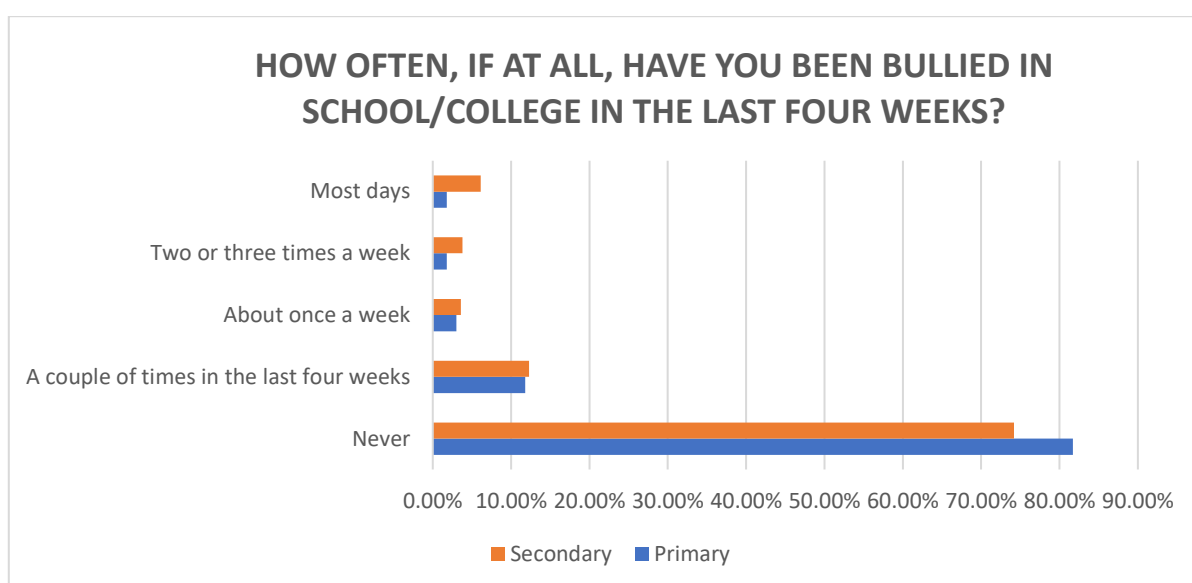


Figure 12.3

69.1% of primary school children felt their school deals with bullying very well or quite well but only 53.6% of secondary pupils. Over a quarter of secondary pupils felt their school did not deal with bullying very well or not at all.

70.4% of primary aged children felt they were coping well with levels of school work compared to only 49.4% from secondary. Of the 22.6% from secondary who said they were not coping well stated that getting more support to help prepare them for exams, dealing with stress, having less work given to them and someone to talk to, would help improve this.

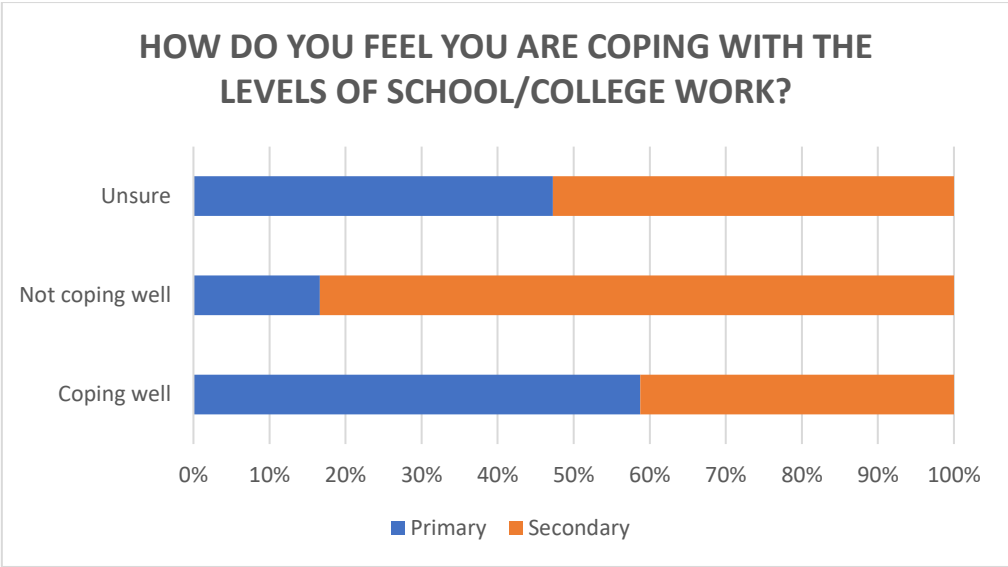


Figure 12.4

75% of primary school children were looking forward to going to secondary school. Of the quarter of children who were not looking forward to secondary school, they stated this was due to being scared of moving away from their friends, increased pressure at secondary schools with hard work, fear of teenagers and being bullied and strict teachers.

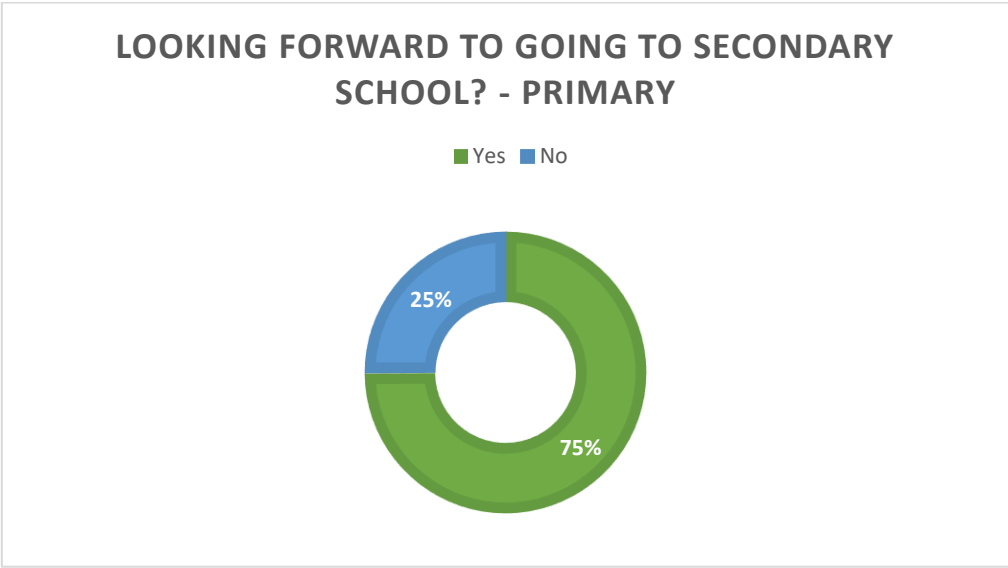


Figure 12.5

The secondary age group were asked a few more questions about their education. Only 41.4% felt a valued member of their school/college community with 35.4% stating they were not sure and 23.2% stating they did not feel a valued member. For those who didn't feel valued, it was because they were unknown in the school, they felt left out, didn't get recognised, "Teachers give more praise and attention to the naughty people when they are good than actually good people", "I feel like no one there actually likes me", There were many young people who didn't know why they felt this way.

Those who did feel valued, made comments like, “I’m happy around others and they treat me well” and “I get praised”.

One of the issues raised by secondary aged young people surveyed was what to do after GCSEs so a question was asked to secondary age pupils about whether they felt the school provided them with the advice and guidance they needed to make informed choices about their future, with 47% stating they did, however a third were unsure and 20% felt they didn’t provide the advice and guidance on post-16 options.

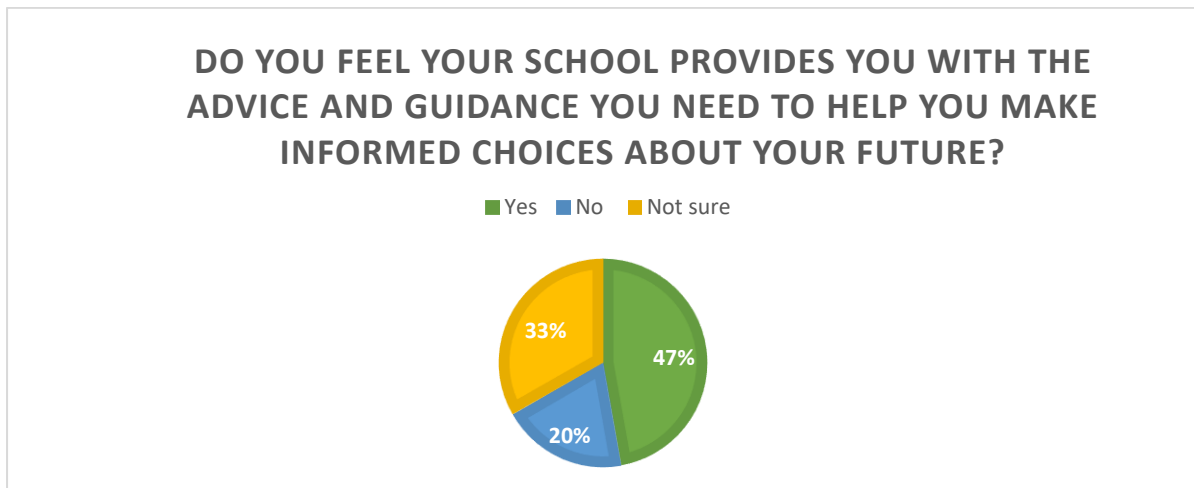


Figure 12.6

The information they felt would help them to make decisions included how to apply for a job, qualifications required, different career options and choices available to young people, applying for further education, and how to start a business alongside opportunities to build their confidence.

They were also asked if there were any skills not taught in school which they would like to learn about. As many survey results have shown in the past, life skills, money management and taxes were things they wanted to learn about, but self-defence was another popular answer.



Figure 12.7 – Responses for “Skills not taught in school which you would like to learn about”

13. Youth Activities

This section focussed on activities for children and young people in Sandwell. Figure 13.1 shows that at a primary age 68.95% of children felt the activities were good enough but only 50.4% of secondary pupils felt this.

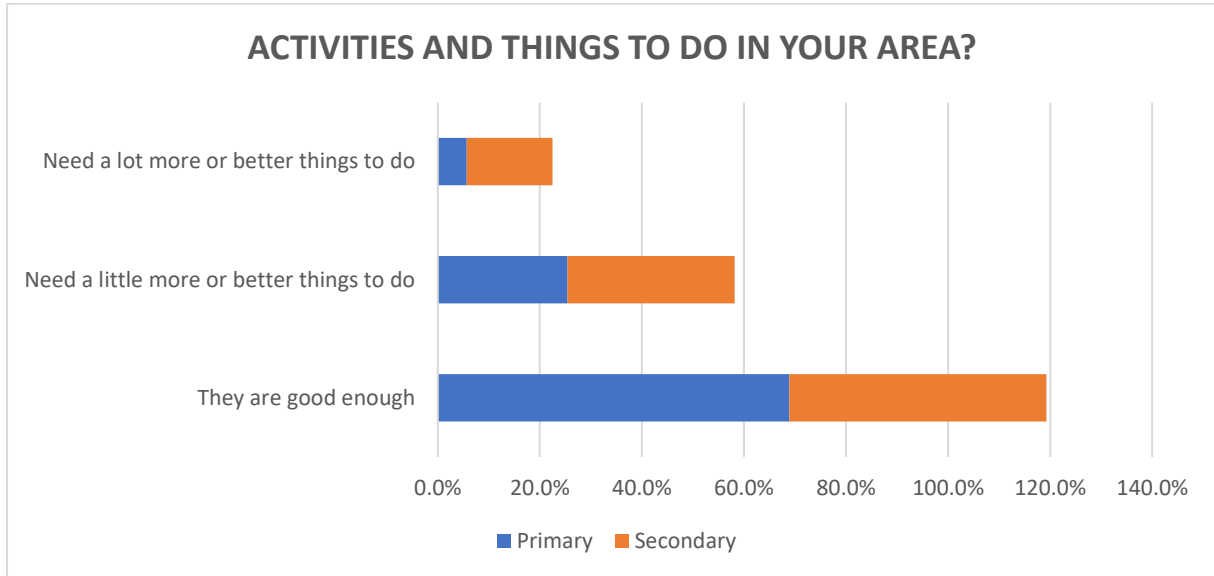


Figure 13.1

Those who stated a little or lot more things are needed were asked to elaborate and explain what kind of activities they would like to see and where. Figure 13.3 shows the vast range of requests, but the main activities, children at both ages, requested were more football playing opportunities, including more football pitches, (particularly astroturfs), facilities and teams in general for all age groups. Basketball was another popular activity requested and sports clubs in general. Both age groups referred to having more parks or better youth provision in parks, such as climbing areas for primary. They wanted parks and activities to be located near to where they live.

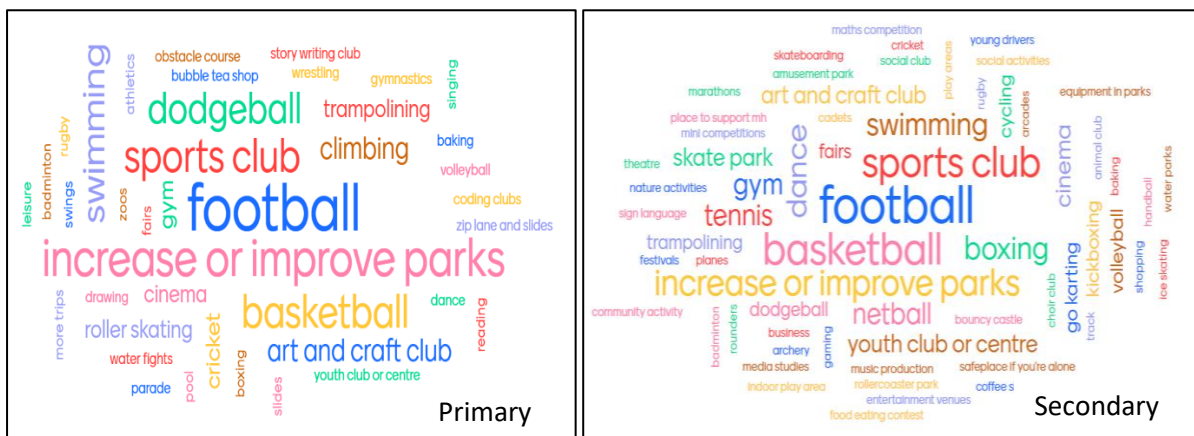


Figure 13.2 – Responses for “What activities would you like to?”

The locality of activities makes a difference to young people, as figure 13.3 demonstrates. The barriers to them doing activities they would like to do, are that they

are not near them, they don't have the time or anyone to go with. Many are also unsure of what activities are available.

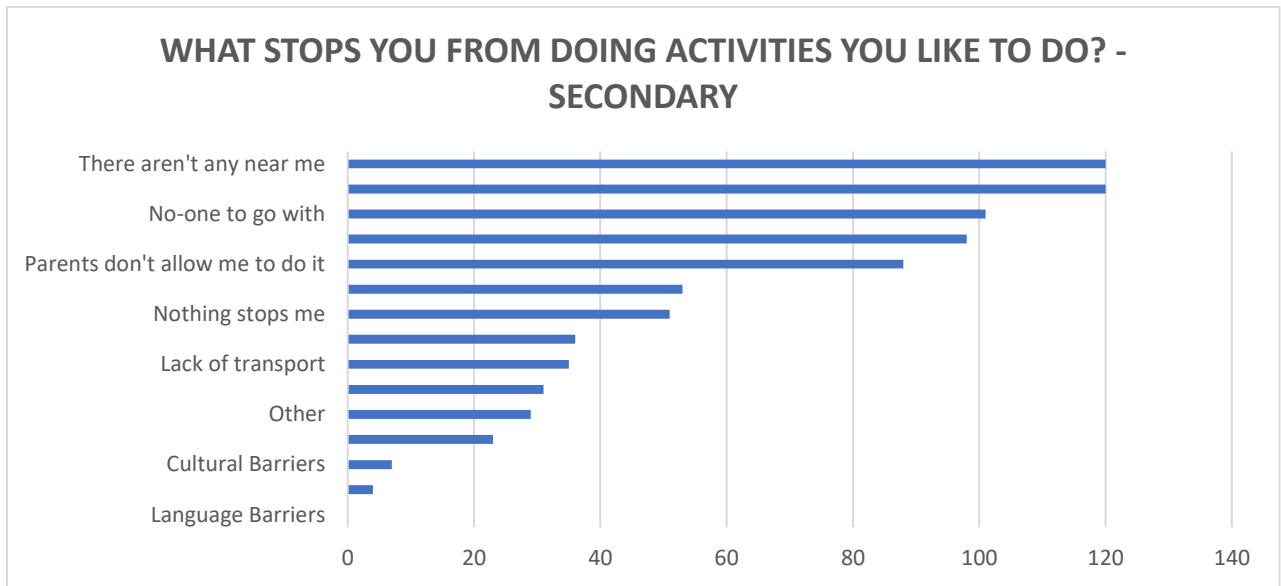


Figure 13.3

14. Child's Voice and Helping

The children and young people were asked about child's voice and how much they are listened to at school and out of school.

When asked whether their schools have a school council, 96.4% of primary said they did and 74.1% of secondary said they did. However less than 15% of each group were involved in their school council.

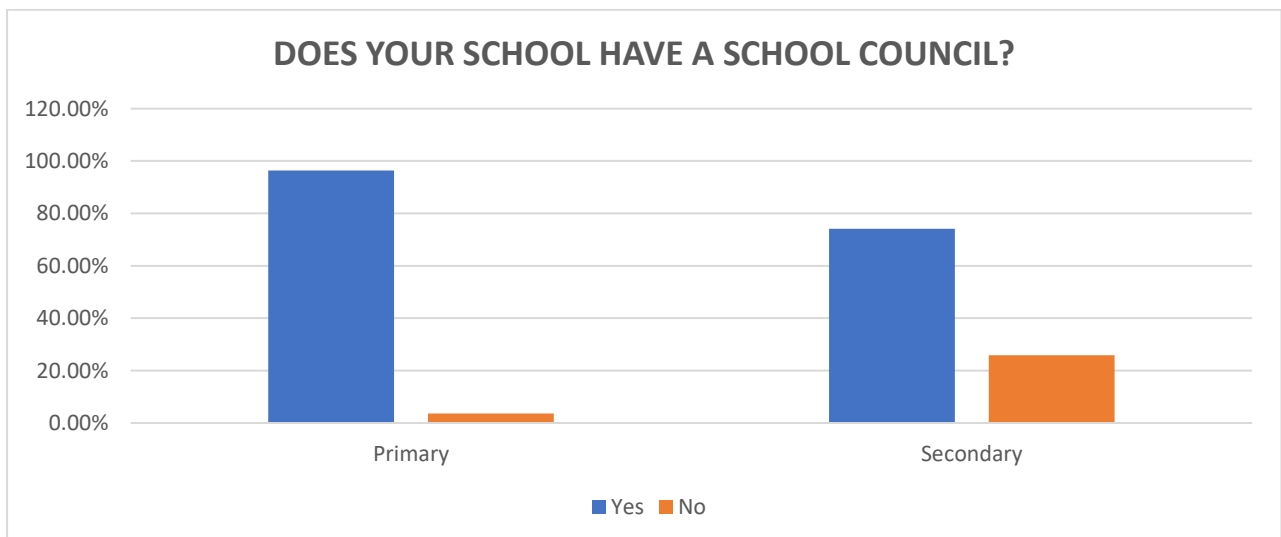


Figure 14.1

77.3% of primary school children who were part of the school council stated they felt that they had made a difference in their school but only 59.1% of the secondary aged pupils who were part of their school council felt they had.

When asked if there was a way of having their voice heard, 52.6% of primary age said yes, and this was through having a school councillor to speak to, an ideas box, having regular meetings, speaking to the head boy or girl, through assemblies and speaking to teachers. However, 42.9% were unsure, which was similar to secondary where 44.9% said they were not sure. Of the 48.2% who stated there was a way of having their voice heard, the answers were similar to primary, with a few other methods such as "Listening to you card", "R u ok card", "anonymous box" or speaking to the pastoral team.

At a secondary age, young people felt their views about the local area were not listened to much as shown in figure 14.2 below.

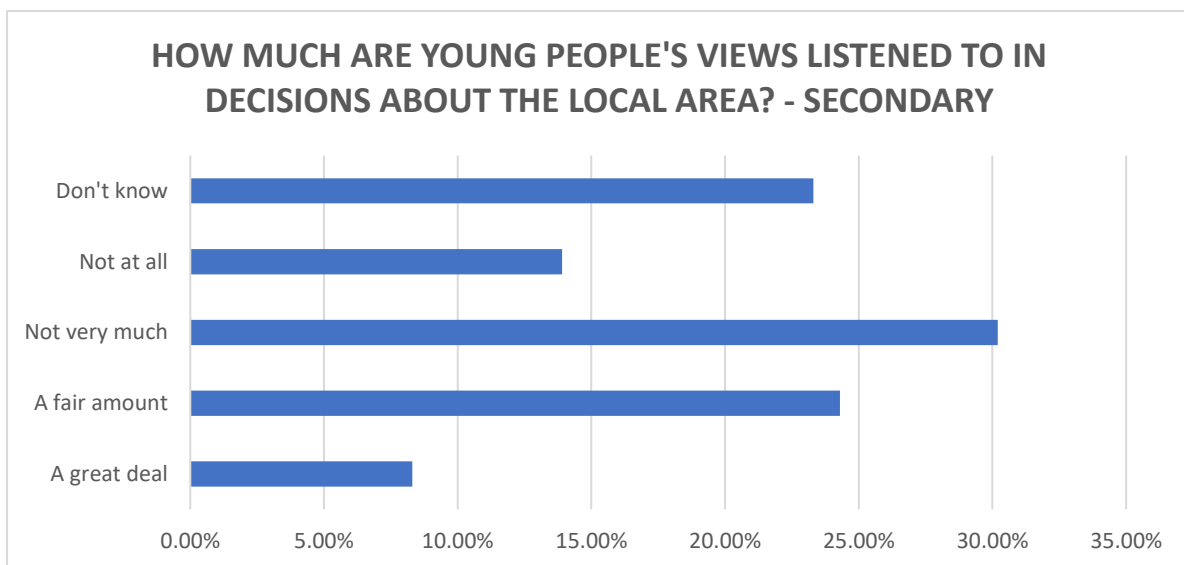


Figure 14.2

In this section the final question asked to young people was if they were in charge of Sandwell Council for one day, what problem would they solve and how would they solve it. The common things were littering, knife crime, crime in general, bullying, mental health and giving people a voice.

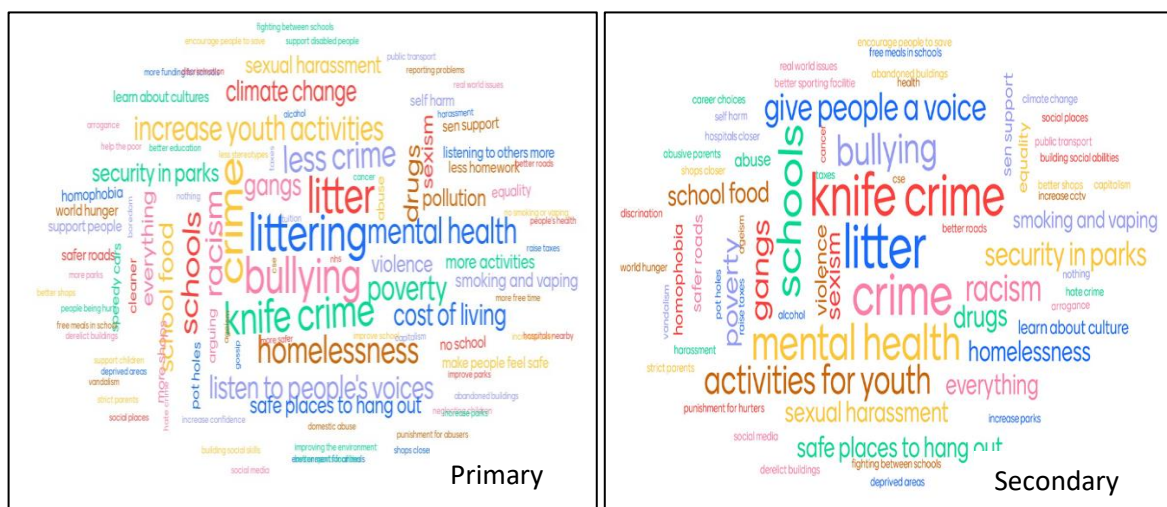


Figure 14.3 – Responses to "What problem would you solve?"

15. Your Future

In 10 years' time secondary children will be aged from 21-26. They were asked what job they see themselves doing in 10 years' time. The choices are shown in figure 14.2, with running their own business and being famous as the top choices. In the other category which was third choice, astronomy, dentists, footballers, gamers, scientists, vets, designers or architects and professions in the music industry were stated. Some of the responses for "Other" stated that they had not made a decision about what they wanted to do yet.

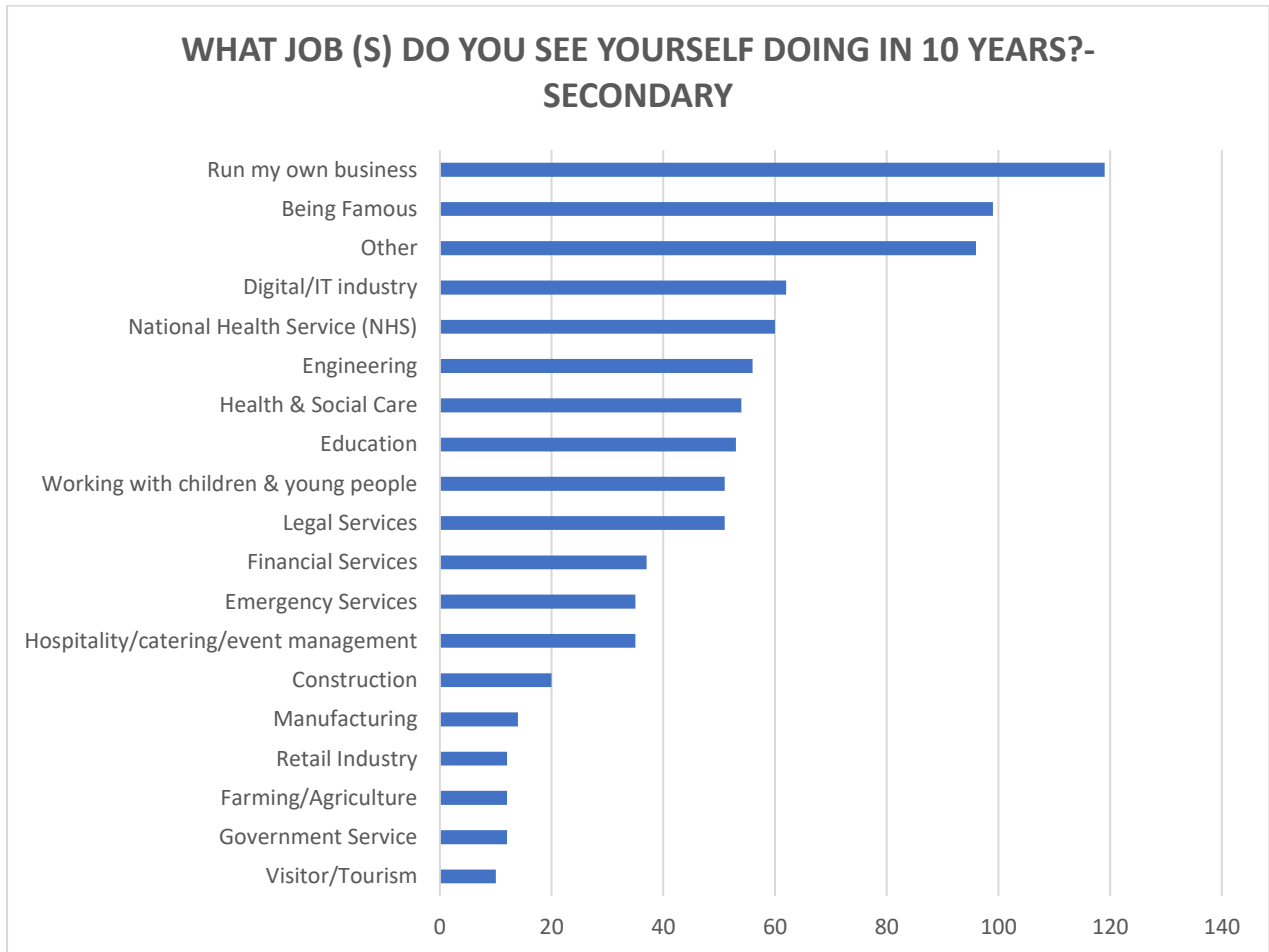


Figure 14.1

The secondary young people were asked if they had tried to find a job within the last 12 months. Figure 14.2 shows that nearly 20% had tried to find a job of which 52% had been successful and 48% unsuccessful. The ones who were unsuccessful said the barriers they faced were their age, lack of qualifications or travel.

HAVE YOU TRIED TO FIND A JOB WITHIN THE LAST 12 MONTHS? - SECONDARY

■ Yes, successfully ■ Yes, unsuccessfully ■ No

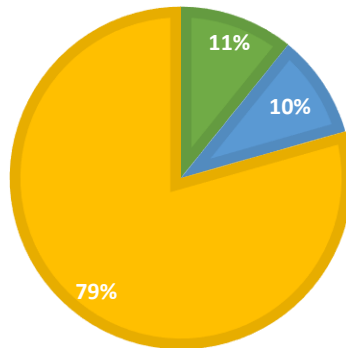


Figure 14.2

In figure 14.3, primary children were asked whether they would like to continue to live in Sandwell when they are older and only 40% responded with yes and 39% were unsure. Secondary aged pupils were asked if they would continue living in Sandwell after college or university and the response was even less at 25% stating yes and 46% being unsure.

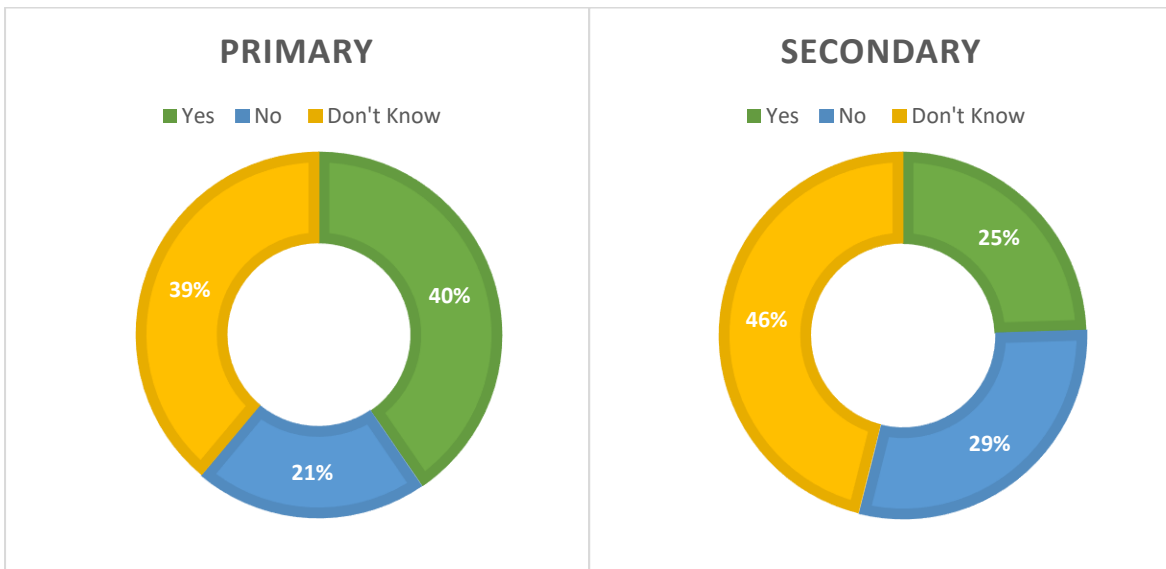


Figure 14.3 – Would you continue living in Sandwell

Of the 29% that said they did not want to live in Sandwell, they were asked a follow up question of what would help them to stay, to which they stated lots of interesting job opportunities and the feeling of being safe. University or Higher education opportunities would also help.

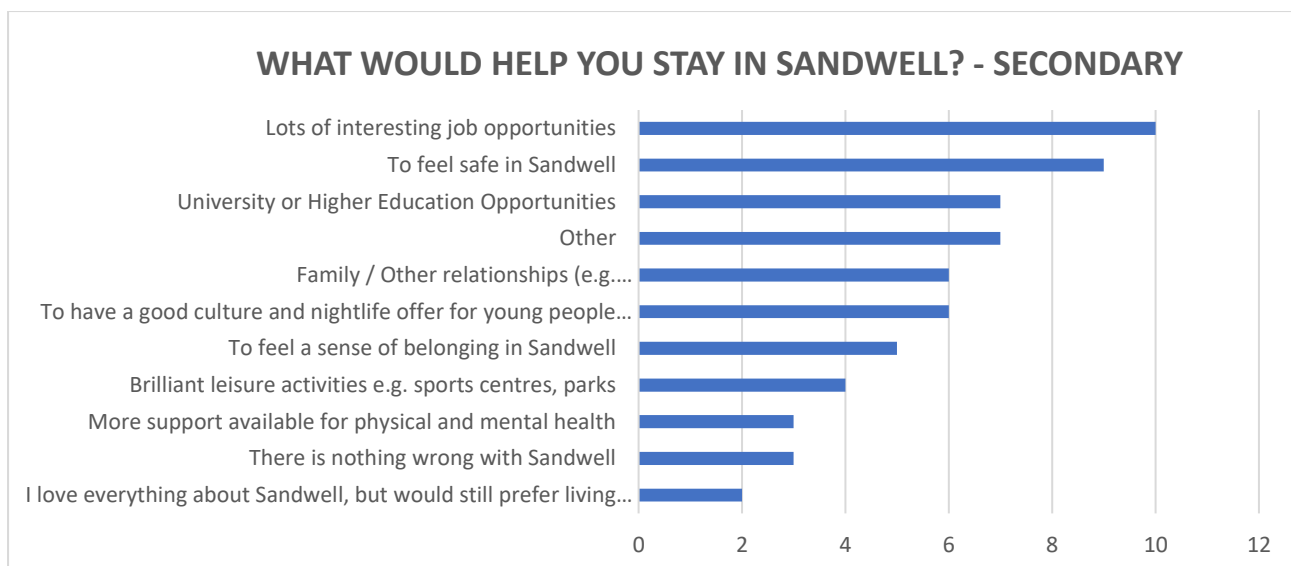


Figure 14.4

16. Being a young person in Sandwell

Finally, young people were asked if there was anything else they wanted to tell us about being a young person in Sandwell. The primary aged children generally made positive comments with many referring to it being fun to be a young person, “It is fun to live a young life and grow old, so I like it. I love playing out with friends, I enjoy going to school and being able to have an education because there are other people out in the world that might not get an opportunity to do things or get a chance to do them as well as us being able to. As a child for me I love being young”.

However, there were some that felt it was difficult and scary and young people have to face many challenges, “Sucks because we have social media and getting bullied, we don’t even have a voice (we can’t vote) if you’re not popular, you’ll become a nobody”.

Secondary aged children provided more insight into the challenges they face through their comments. Many referred to being a young person as “hard” and “difficult”. Some examples include, “It’s a really hard time. People always say that oh being an adult is extremely hard, but they never understand that us young people have a hard time everyday as we must fit in and if we don’t we get rejected by society. It’s like survival of the fittest but instead of physically affecting you, you are mentally destroyed. This is why young people kill themselves”, “Its hard to find out your identity due to influence from social media” and being a young person today is horrible and no one listens”.

Young people feel their voice is not heard, and they deserve to have a voice and an opinion. “Many people assume I’m immature but are surprised once they start talking to me. Not being taken seriously or having my thoughts or opinions heard due to them thinking that I don’t know what I’m doing” and “Misunderstood and not heard”. The few young people at secondary age who did make positive comments were happy to get an education.

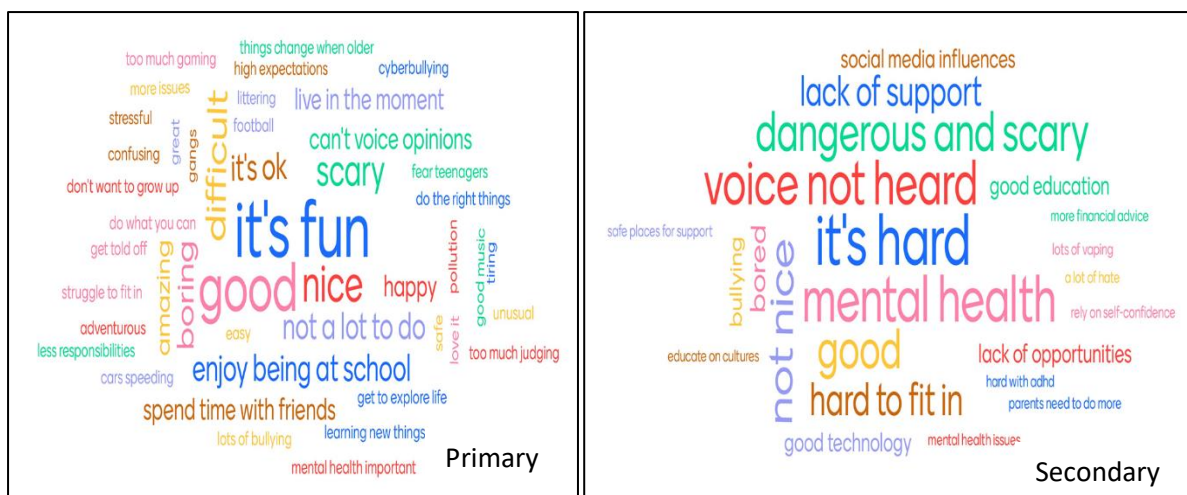


Figure 16.1 – Being a young person in Sandwell

17. Conclusion

This detailed survey report can, even with its limitations, provide a good indication of the needs of young people from their perspective, and also provide some recommendations about what the local authority and other agencies should be implementing to meet the needs.

The pandemic had a huge impact on young people and the aftermath of this period is still having an impact on their education as well as their mental health and wellbeing. Issues which were on the forefront before the pandemic such as knife crime, gangs and violence has been on the rise following the lockdown period and young people have noticed this.

In particular at a secondary age, critical education time has been lost which has mounted pressure on young people for school work and exams which continues to be an ongoing issue. This ultimately also affects their mental health as they feel pressure to do well in their education and they feel schools are focussed on academic achievements rather than educating on important life skills which will help them to live independently, such as money management. Given that the top profession young people would like to do when they are older, is setting up their own business, its not a surprise that they feel entrepreneurial skills are currently a gap in their education.

They also feel further support not just to help them with exams but to support their mental health and wellbeing should be offered in schools, allowing services to showcase their work more as there continues to be a lack of awareness of support services available to young people, both in and out of school such as the School Health Nursing Service and Police Link Officers. Although there are so many partner agencies that work with young people and schools, further work needs to be done to ensure they are known.

One of the main topics raised throughout the survey was bullying. This is an issue which is affecting many young people in Sandwell and one of the issues they highlighted as something they would resolve if they were in charge of Sandwell Council. They suggested that harsher punishments would be a way of resolving the

bullying. It affects both primary and secondary aged children and is happening face to face and online. The challenge young people have identified, is that it is difficult for them to fit in and this for some is a daily battle. Young people often are being bullied for their appearance or their sexual orientation, even though the people bullying are often not aware of what sexual orientation their victims are. Young people feel the punishment for the people bullying is not severe and therefore they continue to display this type of behaviour. With over a quarter of young people of a secondary age admitting they were bullied in the last four weeks, there is further work that needs to be done both in and out of school to tackle this issue.

Young people want someone to talk to and want their voices heard. They feel adults don't listen and their opinions do not count. This is not just through supporting their mental health and wellbeing but in decisions about their local area or regarding school.

Although social media platforms are widely used by young people, Tik Tok has emerged as the most popular for watching and making videos during the pandemic and has continued to grow in popularity for both primary and secondary age groups. However, as a source of information for young people the internet is still the main platform. Work has already commenced on the Just Youth web platform for young people and should continue to be a primary source for young people to find information they require, as the internet and search engines are most utilised by young people, therefore a central platform, when promoted by all agencies would prove to be beneficial.

Young people feel that Sandwell Council should resolve issues such as littering and make Sandwell safer with less crime. They also feel parks can be improved by including more youth provision. As they prefer to have activities which are located closer to them, they highlighted that sporting activities such as more football and basketball provision should be developed in Sandwell nearer to where they live.

Young people in Sandwell are unsure whether they would want to stay in the Borough and many have aspirations to move elsewhere. Better job prospects or higher education opportunities might make them stay as well as Sandwell becoming a safer place to be.

Overall being a child in Sandwell at a primary age can come with its challenges but is generally seen as good, however as a young person transitions from secondary school to adulthood life can become extremely difficult, and, the impact on young people's mental health can be detrimental. Young people have ambition and drive to succeed but also feel pressure to do this from their educational institution, parents and society in general. However, the barriers and influences around them with social media and the need to fit into society have made life very difficult for young people. They want to be acknowledged, listened to and supported to address their needs and issues which unfortunately continue to grow.

The survey results will be shared with Council Directors, Cabinet Members, the wider workforce of the council and partner agencies including schools, Police, NHS, CCG and the voluntary sector. Recommendations will be made which will form part of the Council's strategic objectives and priorities.

SHAPE




To find out more about the SHAPE Programme


 Email: shape_events@sandwell.gov.uk

To access advice and support please visit:

 <http://www.justyouth.org.uk/>

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Sandwell Health and Wellbeing Board
15 March 2023

Report Topic:	Sandwell End of Life Care Work – death, dying and bereavement
Contact Officer:	Suni Patel, Healthy Ageing Project Manager suni_patel@sandwell.gov.uk
Link to board priorities	Please include in your report how your work links to one or more of our board priorities: <ol style="list-style-type: none"> 1. We will help keep people healthier for longer 2. We will help keep people safe and support communities 3. We will work together to join up services 4. We will work closely with local people, partners and providers of services
Purpose of Report:	<ul style="list-style-type: none"> • To update the board on Sandwell End of Life Care work, progress on the Better Endings – Sandwell End of Life Care strategy promises and working in partnership with the Black Country Integrated Care Board (ICB)
Recommendations	<ul style="list-style-type: none"> • To consider and comment on the progress of the Sandwell End of Life Care work.
Key Discussion points:	<p style="text-align: center;">4. We will work closely with local people, partners and providers of services</p> <p>Since the launch of Better Endings – Sandwell’s End of Life Care strategy in 2021, the Sandwell End of Life Care Strategic group has been working on fulfilling the action points of the 6 key promises as well as align with the 6 ambitions of the Black Country ICB</p>

Palliative and End of Life Care strategy. This has been divided into 2 workstreams one focusing on clinical and quality improvement and one on engagement and compassionate communities. Each workstream has developed their aims & objectives and separate terms of reference. Both workstreams feed into the Black Country Palliative and End of Life Care Board (PEoLC) for oversight and governance.

Following the initial meeting of the Board, it was agreed that members would support the Black Country ICB Sandwell Place End of Life Care Improvement Plan. The key themes of the Improvement Plan will focus on:

- Primary Care
- Education and Training
- Policy & Strategy
- Communications (Comms and engagement with communities)
- Compassionate Communities (Voluntary sector work)
- CYP (Children and Young People)
- Digital

The PEoLC has a project management approach to service improvement/change management and will be accountable to the Black Country System Palliative and End of Life Care Oversight Group as well as the Sandwell Health and Care Partnership and Health and Wellbeing Boards.

The key aims and objectives for each thematic area are outlined in the written report.

Implications (e.g. Financial, Statutory etc)	
<p>The Ambitions for <i>Palliative and End of Life Care (PEoLC): A national framework for local action 2021-2026</i> provides a framework for each Integrated Care System (ICS) to evaluate commissioning and delivery of their palliative and end of life services.</p>	
<p>What engagement has or will take place with people, partners and providers?</p>	<ul style="list-style-type: none"> • Consultation / engagement with Sandwell communities providing evidence that people across Sandwell are involved in discussions about death and dying • Activities during Dying Matters week – mid May 2023



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Sandwell End of Life Care work update

Brief report for Sandwell Health & Wellbeing Board March 15/03/2023

Background

End of life care is an approach that improves the quality of life of adults, babies, children and their parents, families, and carers when they are facing problems associated with life-limiting conditions. It works best through early identification, assessment, and treatment of pain and other physical, psychological, social or spiritual problems. It is important that this work involves families and communities, working with health and social care professionals and other relevant groups or organisations. It is also important to start conversations around death and dying early and encourage open and inclusive communication.

Current Position

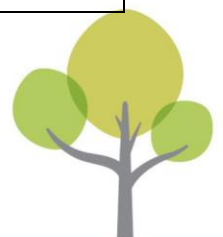
Since the launch of the Sandwell Better Endings End of Life Care Strategy in 2021, the Sandwell End of Life Care Strategic group has been working alongside the Black Country ICB on taking forward palliative and end of life care support in Sandwell. This has been achieved by aligning to the Black Country ICB Palliative and End of Life Care strategy and reporting to the Black Country ICB Palliative and End of Life Care oversight group. As part of this process it has been divided into two workstreams one focusing on clinical and quality improvement and one on engagement and compassionate communities. Each workstream has developed their aims & objectives and separate terms of reference. Both workstreams feed into the Black Country Palliative and End of Life Care Board (PEoLC) for oversight and governance. At the first PEoLC Board meeting, it was agreed that members would support the Black Country ICB Sandwell Place End of Life Care Improvement Plan. The key themes of the Improvement Plan will focus on:

- Primary Care
- Education and Training
- Policy & Strategy
- Communications (comms and engagement with communities)
- Compassionate Communities & Bereavement (incl. Voluntary sector work)
- Children and Young People
- Digital

The PEoLC has a project management approach to service improvement/change management and will be accountable to the Black Country System Palliative and End of Life Care Oversight Group as well as the Sandwell Health and Care Partnership and Health and Wellbeing Boards. The key aims and objectives for each theme are outlined in the table below;



Improvement Plan: Keys Aims & Objectives for each thematic area		
1	Primary Care	<ul style="list-style-type: none"> Engagement of General Practice to support better early identification of individuals in the last year of life and Advance Care Planning Number of patients on GP palliative care registers
2	Policy and Strategy	<ul style="list-style-type: none"> Development and agreement of Sandwell Place EoLC Policy Ensuring delivery of safe, high-quality end of life care with a well-trained, developed and engaged workforce Ensuring links to the Black Country system Education & Training Group and training compliance
3	Communications	<ul style="list-style-type: none"> Development of a Sandwell EoLC communications plan ensuring all communications are appropriate and accessible in meeting the needs of diverse communities
4	Compassionate Communities & Bereavement	<ul style="list-style-type: none"> To address health inequalities that exist in death and dying across Sandwell. To ensure that community partnerships between different faith groups and cultural communities, as well as the diverse organisations that support people living with different life shortening illnesses, and those managing the difficulties of older age are developed across Sandwell. To develop a compassionate community approach across Sandwell to ensure end of life care services meet the diverse needs of the population and to ensure that the community has the resources to do their part, supported in a complementary way by services
5	Children and Young People	<ul style="list-style-type: none"> To ensure that community partnerships for the diverse organisations that support children and young adults are developed across Sandwell. To ensure services are appropriate and accessible to meet the needs of children and young people
6	Digital	<ul style="list-style-type: none"> Development of a Sandwell EoLC communications plan ensuring all communications are appropriate and accessible to meet the diverse needs of the population. Robust data and IT systems to support EoL quality improvement work across both acute and community services





Next steps / Way forward

Each thematic area will be governed by a separate task and finish group who will work towards completing their aims & objectives within specified timelines from both the PEoLC Board and oversight groups. This will be grounded in a population health approach and will need support from different sources. One example is completing a needs assessment with support from the local Public Health Intelligence team. The aim is to meet the commitments set out in the Black Country ICB Palliative & End of Life Care Strategy. One of these is to support the development of local plans to enhance and improve current service provision to create equity across the Black Country, including early identification and the public perception of death and dying. By creating clear objectives and identifying key themes, the Black Country PEoLC Board is aiming to;

- provide seamless, integrated care for patients approaching end of life
- deliver care in a timely and caring way, in a setting of the patient's choice, retaining their choice and dignity.
- develop advance care plans with patients and their families and supporting families and carers pre and after death.
- adopt a compassionate communities approach to supporting the diverse communities of Sandwell
- have a transparent communications approach that is timely, appropriate and accessible (including digital inclusion)

This programme provides the opportunity to have a profound impact on individuals, their families, friends and carers, to encourage open conversations on death and dying and to highlight that working in partnership for a compassionate community approach can leave a lasting legacy.

Anna Lock, Palliative Medicine Consultant, SWBHT

Hannah Ship, Innovation & Development Manager (Sandwell), Black Country ICB

Suni Patel, Healthy Ageing Project Manager, Public Health, Sandwell



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Sandwell Palliative End of Life Care Work



Sandwell PEOC Self – Assessment Summary

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	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5
Ambition 1: Each Person Seen as an Individual	18.2%	9.1%	18.2%	9.1%	45.5%	0.0%
Ambition 2: Each person gets fair access to care	40.0%	0.0%	20.0%	10.0%	30.0%	0.0%
Ambition 3: Maximising comfort and wellbeing	6.3%	6.3%	0.0%	6.3%	75.0%	6.3%
Ambition 4: Care is coordinated	0.0%	29.2%	0.0%	29.2%	29.2%	12.5%
Ambition 5: All staff are prepared to care	0.0%	25.0%	0.0%	62.5%	12.5%	0.0%
Ambition 6: Each community is prepared to help	0.0%	75.0%	25.0%	0.0%	0.0%	0.0%



What's working well in Sandwell

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- Whilst there are always areas that can be improved the self-assessment tool has shown that in Sandwell the following are areas where delivery against the ambitions is going well:
 - Ambition 3 – Maximising comfort and wellbeing
 - Ambition 1 – Each person is seen as an individual.



Key Areas for Action

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- The self assessment has highlighted areas for action but in particular the following are areas where there are the biggest opportunities for growth and improvement:
- Ambition 6 – Each community is prepared to help
 - The importance of connecting with communities and developing links with the voluntary and community sector has been highlighted through the development of the Sandwell 6 promises for PEO LC. Work is underway to turn these promises into actions.
- Ambition 5 – Care is co-ordinated
 - Whilst there is a system wide EPACCS working group, the need for a place focused group in Sandwell has been recognised
- Ambition 2 – Each person gets fair access to care.
 - Whilst some of these are being done well work needs to be done on primary care data and analysis of existing data in terms of ethnicity and deprivation.



Primary Care Data

- To achieve ambition 2 early identification of patients in their last year of life is key.
- National benchmarking suggests and 1% of a practices registered population should be on a Palliative Care Register, possibly higher in deprived areas.
- For practices across Sandwell the average is 0.3% of a practice's registered population are identified on a palliative care register.
- There is therefore a need to look at this and consider use of tools e.g EARLY to support primary care clinicians to identify patients needing palliative care earlier to enable better co-ordination and advance care planning across multi disciplinary teams.





Sandwell Better Endings – End of Life Care Strategy 2021 – 2026: Aim: To deliver 6 promises for people in Sandwell



Able to prepare

Key Outcome:

To ensure people who are approaching the end of life can access the right information at the right time, in the right place



Talking Openly

Key Outcome:

To normalise open conversations about death and dying.
To make sure those at the end of life have the opportunity to plan ahead, receive good end of life care and be able to die in accordance with their wishes



Knowledge for All

Key Outcome:

To ensure patients / the public have access to a range of educational opportunities around death and dying



A Confident Workforce

Key outcome:

To ensure professionals coming in to contact with those at end of life will receive the support, awareness and training needed.



Care designed with our communities

Key outcome:

Ensure that there is earlier access to care and support , by improving services and reaching out as widely as possible.
To improve people’s end of life care experience regardless of setting and organisations involved.
To achieve outcomes for end of life care as identified by the Sandwell Integrated Care Partnership Board



Policy

Key Outcome:

To ensure that key local organisations lead by example in the review and implementation of policies
To ensure those living and working in Sandwell can benefit from agreed policies

Improvement Plan

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- Align with the 6 national priorities and Black Country ICB system PEOLC strategy
 - Work will be driven by the following working groups

Workstreams

Primary Care

Education & Training

Policy & Strategy

Comms

Compassionate Communities

- Other groups to be established – Digital, CYP



Key Metrics

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Sandwell Place will collect and report on data required to fulfil the national core metric requirements as follows:

- 1. Identification and personalised care and support planning a. Total number of people identified in their last year of life and b. percentage of these people who have had a PCSP conversation.
- 2. Establish a baseline across the regions of available services 24/7 related to PEoLC for all ages and measure against this on an ongoing basis.
- 3. Evidence of improved staff confidence, knowledge and skills in PEOLC, focussing on Personalised Care and Support Planning (PCSP) at EoL in line with the LTP commitment.
- 4. At least 33% of ICS level / ICB in each region have PEoLC as a strategic priority in their ICS / ICB plans.
- Local outcome metrics have also been drafted.



What we are working towards in Sandwell

- provide seamless, integrated care for patients approaching end of life
- deliver care in a timely and caring way, in a setting of the patient's choice, retaining their choice and dignity.
- develop advance care plans with patients and their families and supporting families and carers pre and after death.
- adopt a compassionate communities approach to supporting the diverse communities of Sandwell
- have a transparent communications approach that is timely, appropriate and accessible (including digital inclusion)



How this will be achieved

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- Each thematic area creating their own terms of reference / aims & objectives
- Each thematic area being accountable to the Sandwell PEO LC Board
- Completion of needs assessment with support from Sandwell Public Health Intelligence team
- Completing community engagement activities ensuring patient voice is heard and included in decision-making
- Utilising a population health approach and actively seeking additional resources to enable completion of planned activities



Thank You

Any questions?



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**Sandwell Health and Wellbeing Board
15 March, 2023**

Report Topic:	Proposed Refresh of Vision 2030
Contact Officer:	Jane Alexander Service Improvement, Sandwell Council
Link to board priorities	<p>Please include in your report how your work links to one or more of our board priorities:</p> <ol style="list-style-type: none"> 1. We will help keep people healthier for longer 2. We will help keep people safe and support communities 3. We will work together to join up services 4. We will work closely with local people, partners and providers of services <p>The purpose of Vision 2030, adopted in 2017, is to unite partners behind a common vision for how we want the borough to be in 2030. The Vision’s ambitions cover aspects relating to a healthier Sandwell as well as safer communities and seeks to address the wider determinants of health. In this way Vision 2030 supports the delivery of the Board’s priorities.</p>
Purpose of Report:	<ul style="list-style-type: none"> • To seek the Board’s support for embarking on a refresh of Vision 2030 • To seek partners’ support to contribute to a State of Sandwell report that will form the evidence base for the refresh
Recommendations	<ul style="list-style-type: none"> • That the Board supports the commencement of refreshing Vision 2030

	<ul style="list-style-type: none"> • That Board partners agree to contribute to a State of the Borough report that will form the evidence base for the refresh
<p>Key Discussion points:</p>	<p>Vision 2030 was adopted in 2017. We are now mid-way through the term of the vision and the time is right to reflect and consider what we have achieved and the challenges that still need to be addressed.</p> <p>Working with partners across Sandwell, the Council wishes to instigate a refresh of the Vision to ensure it reflects the needs of the borough and to refresh our collective commitment to deliver it.</p> <p>Discussion points for the Board to consider would be whether the time is right for a refresh and to consider the areas that may need a new approach.</p> <p>The Council has commenced work to identify the current state of the borough. This evidence base will only be useful if partners contribute their intelligence to this exercise, to paint the picture of need in Sandwell. We will ensure the work to progress the JSNA contributes to this exercise.</p>
<p>Implications (e.g. Financial, Statutory etc)</p>	
<p>The implication of this report is that the refresh of Vision 2030 will commence. This will revise the strategic framework that partners in Sandwell work together towards.</p>	

<p>What engagement has or will take place with people, partners and providers?</p>	<p>It is intended that the refresh of Vision 2030 will involve wide consultation with partners, residents and businesses in Sandwell over the next few months.</p>
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Report to Health and Wellbeing Board

15 March 2023

Proposed Refresh of Sandwell's Vision 2030

Purpose of report

- To propose a refresh of Vision 2030 this year
- To start discussion on the aspects of Vision 2030 that may need refocusing
- That Board partners are engaged in the production of a State of Sandwell report that captures where we are on the journey to delivering vision 2030

Context

Vision 2030 was adopted in 2017 with 13 years to go until 2030 at that time. We're now in 2023 with 7 years to go.

Much has changed since 2017 – the scale and impact of climate change is now more acutely felt, we've experienced the impact of a global pandemic and now face a burgeoning cost of living crisis.

Not only that but a lot of our key partners have been changing as well.

There is a need for a renewed sense of drive to achieve our ambitions for the borough.

The Leader of Sandwell Council is keen to embark on a refresh of Vision 2030 with partners in Sandwell. The time is thought to be right for a mid-term review of the progress made, to refocus partners' activity to get us to 2030 and to bring Vision 2030 to the forefront of partnership effort in Sandwell – maximising and releasing the potential in the borough and jointly addressing the things that are holding us back.

Vision 2030 – a recap

By way of a reminder, Vision 2030 is made up of 10 ambitions for Sandwell plus this overarching aim.

In 2030, Sandwell is a thriving, optimistic and resilient community.

It's where we call home and where we're proud to belong - where we choose to bring up our families, where we feel safe and cared for, enjoying good health, rewarding work, feeling connected and valued in our neighbourhoods and communities, confident in the future, and benefiting fully from a revitalised West Midlands.

The ambitions fall into those that related to Sandwell's **people** and those that related to the **place**.

In all the engagement activity we undertook at the time, community safety emerged as the strongest concern. There was also the acknowledgement that giving children and young people the best start in life and addressing overall inequality of opportunity were absolutely fundamental to achieving better outcomes for the borough. Health and wellbeing was also a key priority as was ensuring that young people had skills to equip them to seize the opportunities in Sandwell.

On the place side, ensuring residents and businesses had great accessibility by public transport between work and their home was felt to be critical to Sandwell's success. Our distinctive towns were felt to be one of our strongest assets that need to be enhanced as centres of the community in order to retain people here. And our ambition was to create the conditions for industries of the future here in Sandwell. We would also have a national reputation for getting things done.

Changing Context

We know that many of these ambitions for residents still hold but the context to these ambitions has shifted since 2017 quite significantly.

Climate change, although already recognised as an issue in 2017, has in recent years rocketed up the agenda. Environmental imperatives, apart from sustainable transport, do not really figure in the vision.

No one would have predicted a global pandemic back in 2017 and the deep impact felt by children and young people, our mental health and the economy. The vision does, however, recognise the importance of health and resilience.

The world has become increasingly digital. The pandemic shone a light on digital exclusion and the impact of this as a major factor in current society in driving persistent inequality.

We now have the near and present danger of the cost of living crisis for Sandwell's residents and businesses. The fundamentals of the borough having enough resilience to support each other and feed and heat their households has become a huge priority, at least for the next few years.

Questions for the refresh:

What do these contextual changes mean for the Vision?

What aspects of the vision need to change?

What aspects still hold true?

Changing partner context

Not only has the big picture changed but there have also been significant changes on the partner front. Partners that are not necessarily bought into Vision 2030.

We now have new health partnership arrangements and the Sandwell Children's Trust didn't exist when we developed the vision. We also have new partnership arrangements like Sandwell Business Ambassadors and the Inclusive Economy Board that will want to be engaged in shaping the future borough.

As we are well aware, partners in Sandwell are under immense pressure and this is a challenging context to be asking for collaboration. Through working together against a refreshed vision, we can aspire to making the best use of all our resources for the best outcomes for Sandwell.

Next Steps

Key strategic partnerships in Sandwell are being requested to endorse the start of the process for refreshing Vision 2030.

As the first step, the Council has started a State of the Borough exercise to establish where we are on the journey to 2030 and the challenges still to address.

This will be built up from all our collective intelligence, including work that has commenced on the JSNA. Board members are requested to support this

exercise and an engagement draft will be circulated in the next couple of months.

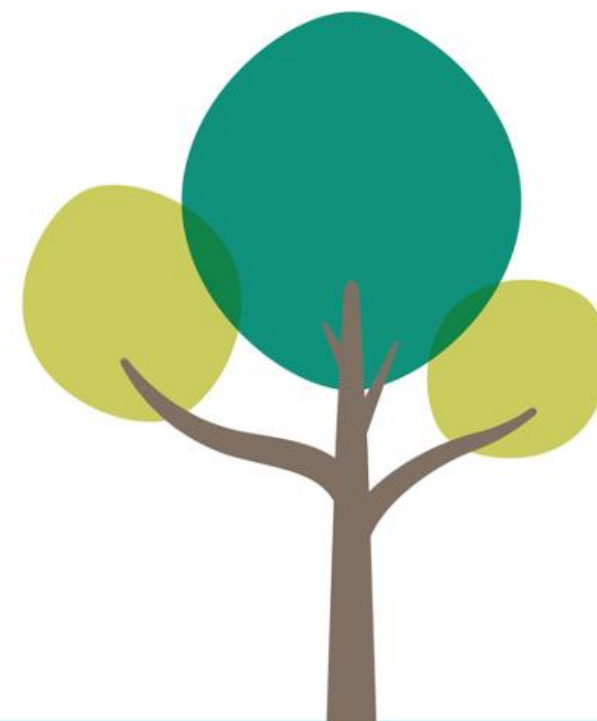
This report will provide the basis for further partner conversations to consider the scale of the refresh and the priority activity to deliver it.



Vision 2030

Refresh and refocus

Health and Wellbeing Board
15 March 2023





Purpose



- To propose the refresh V2030 this year
- To start discussion on the aspects of V2030 that may need refocusing
- To agree next steps for taking the refresh forward with partners





Introduction



- Mid way through term of delivering V2030
- A political priority to refresh our approach
- How the world has changed since we adopted the vision in 2017
- Time is right to refresh and reinvigorate our vision and consolidate partners' action behind it and measure our impact





V2030 – A reminder...

VISION
2030
SANDWELL

In 2030, Sandwell is a thriving, optimistic and resilient community.

It's where we call home and where we're proud to belong - where we choose to bring up our families, where we feel safe and cared for, enjoying good health, rewarding work, feeling connected and valued in our neighbourhoods and communities, confident in the future, and benefiting fully from a revitalised West Midlands.





V2030 – 10 ambitions



1. Sandwell is a community where our families have high aspirations and where we pride ourselves on equality of opportunity and on our adaptability and resilience.



2. Sandwell is a place where we live healthy lives and live them for longer, and where those of us who are vulnerable feel respected and cared for.



3. Our workforce and young people are skilled and talented, geared up to respond to changing business needs and to win rewarding jobs in a growing economy.



4. Our children benefit from the best start in life and a high quality education throughout their school careers with outstanding support from their teachers and families.



5. Our communities are built on mutual respect and taking care of each other, supported by all the agencies that ensure we feel safe and protected in our homes and local neighbourhoods.





V2030 – 10 ambitions



6. We have excellent and affordable public transport that connects us to all local centres and to jobs in Birmingham, Wolverhampton, the airport and the wider West Midlands.



7. We now have many new homes to meet a full range of housing needs in attractive neighbourhoods and close to key transport routes.



8. Our distinctive towns and neighbourhoods are successful centres of community life, leisure and entertainment where people increasingly choose to bring up their families.



9. Sandwell has become a location of choice for industries of the future where the local economy and high performing companies continue to grow.



10. Sandwell now has a national reputation for getting things done, where all local partners are focused on what really matters in people's lives and communities.





Changing context

VISION
2030
SANDWELL

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- Need to address climate change has rocketed up the agenda
- Pandemic has highlighted the impact felt by children and young people, mental health and the importance of health and resilience
- Digital exclusion highlighted as a major factor in driving inequality
- Cost of living crisis and impact on Sandwell residents and businesses
- Some of our policy direction has evolved





Changed partner context



- New partnership context in health
- Sandwell Children's Trust now exists
- Other new partnership arrangements
- Even greater pressure on partners following pandemic





Next steps for refreshing V2030



- State of the borough report - taking stock where we are on the journey to 2030
- Building on all our collective intelligence
- Engagement activity with key partnerships, residents and businesses considering report conclusions and scope of refresh
- V2030 relaunch later this year, aligning with key strategies.



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Sandwell Health and Wellbeing Board 15 March 2023

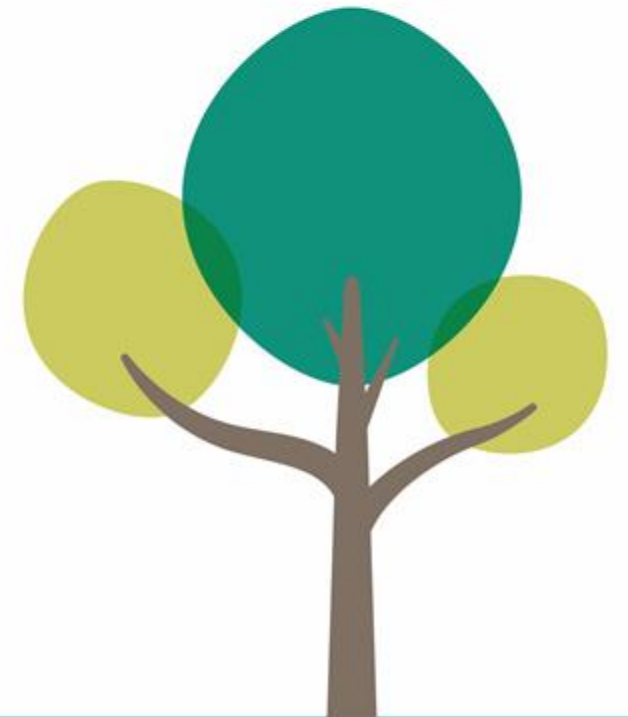
Report Topic:	Children’s Services Update
Contact Officer:	Michael Jarrett, Director of Children’s Services and Education
Link to board priorities	<p>Please include in your report how your work links to one or more of our board priorities:</p> <ol style="list-style-type: none"> 1. We will help keep people healthier for longer 2. We will help keep people safe and support communities 3. We will work together to join up services 4. We will work closely with local people, partners and providers of services
Purpose of Report:	<ul style="list-style-type: none"> • To provide members of the Health and Well-Being Board with an update of the current issues and priorities across children’s services.
Recommendations	<ul style="list-style-type: none"> • Board members note the update.
Key Discussion points:	<p>This update covers a number of the board priorities, namely; (3) We will work together to join up services and (4) We will work closely with local people, partners and providers of services as indicated below.</p> <p>SEND area inspections; In January 2023, Ofsted launched a new inspection framework requiring all LA areas to implement across their partnerships. The new framework incorporates priorities 3 and 4 in relation to whole system working and integration.</p> <p>Attendance; Following the successful ‘Attendance is Everybody’s Business’ event held 29 September 2022, the Children and Education Directorate has launched a borough-wide campaign to strengthen and improve attendance and address the persistent absence rates across Sandwell. Addressing attendance will contribute to improved educational outcomes and fulfill priority 4 of the HWBB.</p> <p>Educational attainment – Education and Priority Investment Areas; Sandwell is one of the 55 Education Investment Areas and</p>

	<p>one of the 24 Priority Investment Areas launched by the DfE to address educational attainment across all phases. Sandwell sits just below national rates for all phases of education and across the partnership (HWBB priority 4) we are determined to address this priority.</p> <p>Family Hubs; Sandwell was one of the 75 LAs named in the government roll out of the best start in life – Family Hubs programme. An implementation plan has been approved by the DfE and programme governance arrangements is in place. This programme contributes to priorities 3 and 4 of the HWBB.</p> <p>Youth provision inc outreach; The youth service is undertaking a service review / redesign. This will include the delivery of targeted outreach services to combat community priorities. The replacement youth buses will provide a reliable offer and promote opportunities for young people to engage with youth workers and partners. The work contributes to priority 4 of the HWBB.</p> <p>SEND and Education, Health and Care Plans; Sandwell has seen a 48% increase in the number of children and young people with education, health and care plans. This increase is placing obvious pressures across the system requiring services to adapt to meet need. The projections continue to rise which will require a systemic approach to addressing this priority which also contributes to priorities 3 and 4 of the HWBB.</p>
<p>Implications (e.g. Financial, Statutory etc)</p>	
<p>There are associated implications across statutory functions including; SEND, attendance and education with financial implications associated with capacity pressures across the system and also the attraction of grant funding from the DfE in relation to the Education and Priority Investment Areas and Family Hubs Programme.</p>	
<p>What engagement has or will take place with people, partners and providers?</p>	<p>Across all aspects of children’s services there is well developed governance processes and widespread partnership support and engagement.</p>



Health & Wellbeing Board 15 March 2023

Michael Jarrett
Director of Children and Education



Health & Wellbeing Board

- SEND Area Inspections
- Attendance
- Educational attainment – Priority Education Investment Area (PEIA)
- Family Hubs
- Youth Provision including Outreach
- SEND and Education, Health and Care Plans (EHCPs)



Children and Education Priorities

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Priority 1	To support schools to maintain and improve good attendance - Attend School for the Best Start in Life #aspireattendachieve (campaign)
Priority 2	Ongoing review and continuous improvement of SEND Transport – lessons learn to be cascaded
Priority 3	Effective and robust pupil place planning to ensure that every Sandwell child has access to a school place in a good school
Priority 4	To challenge and support schools to raise standards in all key stages to close the gaps with national
Priority 5	To improve the communication and language development of young children across all early years provision to improve their access to the curriculum
Priority 6	To explore funding options for the long term security of the STEPS centre provision
Priority 7	Improve the quality of Personal Education Plans (PEPs) so that funding is appropriately targeted to meet the needs of all Sandwell Children in Care; particularly in closing the attainment gap to peers (LACE Virtual School).
Priority 8	Implement the Family Hubs model across Sandwell
Priority 9	Implement the Early Help Strategy - ensuring children, young people and families receive the right support, in the right place at the right time
Priority 10	Improve young people's access to Employment and Training
Priority 11	To improve timeliness and quality of professional advice and Education Health & Care Plans (EHCPs) following increases in referrals
Priority 12	To work collaboratively with schools to implement universal, targeted and specialist support that is specified in the SEND specialist place planning strategy



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