



COMMUNITY LEADERSHIP OVERVIEW AND SCRUTINY COMMITTEE

AGENDA

DATE:	Tuesday, 15 April 2025
TIME:	7.30 pm
VENUE:	Committee Room, Town Hall, Station Road, Clacton-on-Sea, CO15 1SE

MEMBERSHIP:

Councillor Steady (Chairman)
Councillor Barrett (Vice-Chairman)
Councillor Davidson
Councillor Doyle
Councillor Ferguson

Councillor Griffiths
Councillor Keteca
Councillor Oxley
Councillor Platt

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DATE OF PUBLICATION: Monday, 7 April 2025

AGENDA

1 Apologies for Absence and Substitutions

Councillors are invited to declare any Disclosable Pecuniary Interests, Other Registerable Interests of Non-Registerable Interests, and the nature of it, in relation to any item on the agenda.

2 Minutes of the Meetings of the Committee held on 14 and 28 January 2025 (Pages 5 - 24)

To confirm and sign as correct records, the minutes of the meetings of the Committee, held on 14 and 28 January 2025.

3 Declarations of Interest

Councillors are invited to declare any Disclosable Pecuniary Interests or Personal Interest, and the nature of it, in relation to any item on the agenda.

4 Questions on Notice pursuant to Council Procedure Rule 38

Subject to providing two working days' notice, a Member of the Committee may ask the Chairman of the Committee a question on any matter in relation to which the Council has powers or duties which affect the Tendring District **and** which falls within the terms of reference of the Committee.

5 Report of the Assistant Director (Corporate Policy & Support) - A.1 - Work Programming - Including Monitoring of Previous Recommendations and Summary of Forthcoming Decisions (Pages 25 - 48)

The report provides the Committee with an update on its approved Work Programme for 2024/25 (including progress with enquiries set out in its Work Programme), feedback to the Committee on the decisions in respect of previous recommendations from the Committee in respects of enquiries undertaken and a list of forthcoming decisions for which public notice has been given.

6 Reference from the Council's Crime and Disorder (Familial Violence/Abuse) Task and Finish Group - A.2 - Final Report - Concerning Crime and Disorder (Familial Violence/Abuse) (Pages 49 - 62)

To enable the Committee to consider the recommendations made to it as set out in the final report from the Council's Crime and Disorder (Familial Violence/Abuse) Task and Finish Group.

7 Report of the Assistant Director (Corporate Policy & Support) - A.3 - Health and Wellbeing Strategy (Pages 63 - 122)

To enable the Committee to consider the Council's draft Health and Wellbeing Strategy, as outlined in the appendix to the Portfolio Holder report submitted to Cabinet on 21 February 2025.

Date of the Next Scheduled Meeting

The next scheduled meeting of the Community Leadership Overview and Scrutiny Committee is to be held in the at 7:30pm on 1 July 2025.

Information for Visitors

FIRE EVACUATION PROCEDURE

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Your calmness and assistance is greatly appreciated.

**MINUTES OF THE MEETING OF THE COMMUNITY LEADERSHIP OVERVIEW AND
SCRUTINY COMMITTEE,
HELD ON TUESDAY, 14TH JANUARY, 2025 AT 7.30 PM
IN THE TOWN HALL, STATION ROAD, CLACTON-ON-SEA, CO15 1SE**

Present:	Councillors Steady (Chairman), Barrett (Vice-Chairman), Davidson, Goldman (substitute for Councillor Doyle), Griffiths and Oxley
Also Present:	Councillor Placey (Portfolio Holder for Partnership)
In Attendance:	Lee Heley (Deputy Chief Executive and Corporate Director for Place & Economy), Richard Barrett (S151 Officers and Assistant Director for Finance & IT), John Fox (Head of Health & Community), Keith Simmons (Head of Democratic Services & Elections), Hattie Dawson-Dragisic (Performance and Leadership Support Officer), and Emma Haward (Leadership Support Officer)
Also In Attendance:	Brad Thompson (Jaywick Sands Community Forum), Ian McKeown (Clacton Arts Centre), Adrian Goody (Clacton Arts Centre), and Dr Karen Dennis (Ketchup Clothes)

1. APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

Apologies were received from Councillors Ferguson and Doyle with Councillor Goldman attending as a substitute for Councillor Doyle. An invitation to attend the Committee had also been extended to the Leader of the Council but the Chairman of this Committee had agreed that he did not need to attend. Invitations were also sent to a number of organisations that had applied for grants from the Council and apologies had been received from the following organisations: the Lemmings, Headway Essex, Inclusion Ventures and, ATF (Achieve, Thrive, Flourish). It was highlighted that albeit representatives from Headway Essex and Inclusion Ventures weren't in attendance at the meeting written material had been circulated to the Committee from those organisations.

2. MINUTES OF THE LAST MEETING

It was RESOLVED that the Minutes from the meeting of the Committee held on 15 October 2024, be approved as a correct record and be signed by the Chairman.

3. DECLARATIONS OF INTEREST

There were no declarations of interest by Councillors in relation to any items of business on the agenda for this meeting.

4. QUESTIONS ON NOTICE PURSUANT TO COUNCIL PROCEDURE RULE 38

On this occasion no Councillor had submitted notice of a question.

**5. REPORT OF THE PARTNERSHIPS PORTFOLIO HOLDER - A.1 TO CONSIDER
GRANT FUNDING BY THE COUNCIL AND OTHERS AND ITS APPROPRIATENESS
GIVEN THE NEEDS OF THE DISTRICT**

To introduce this item to the Committee the Chairman invited the Portfolio Holder for Partnerships, Councillor Gina Placey and the Head of Health & Community, John Fox to speak to the Committee. The Portfolio Holder advised the Committee that the report highlighted the significant work the Cabinet considered in respect of use and allocation of grants on 19 April 2024. The Portfolio Holder further advised that, within the report submitted to Cabinet, it identified the types of allocation of funding, it also included a flowchart to identify possible funding routes and set out parameters for allocating funding to ensure a consistent approach was being followed. The Council's Head of Health & Community then addressed the Committee by highlighting the importance of the Grant Funding process being closely linked to the themes that make up the Council's Corporate Plan, such as 'working with partners to improve quality of life, to achieve the Council's expectation of 'good' governance and to meet the objective of financial sustainability. The Chairman of the Committee then invited the Deputy Chief Executive and Corporate Director for Place & Economy, Lee Heley, to speak to the Committee. He highlighted the importance of the process of grants being allocated in an effective way to support the Council pursue its Corporate Plan.

Following the introduction of the report, the Committee then asked questions of the Portfolio Holder that has been formulated at their informal meeting on 9 January 2025. These questions and answers are set out in the table below.

Question	Committee Member Asking question	Cabinet Members to Answer Question	Answer
1. The Portfolio Holder's Report set out the scope of this enquiry as approved by Full Council – can she detail for us how this report addresses this scope	Councillor Barrett	Councillor Placey	<p>This report provides a background and highlights a number of reports agreed at Cabinet which are referenced in the previous relevant decisions section of the report.</p> <p>Within those reports reference is for example made (in Appendix 1 of the report of 19 April 2024 on the review of grant funding) to the types of grant funding and extent of that funding and over what time period. The funding referred to in those reports was therefore reviewed for its appropriateness and in addition reference is made to the importance of securing and evaluating outcomes.</p> <p>In particular the report of 20 September 2024 sets out the process and administration of funding going forwards and that the receipt and allocation of funding are covered by checklists (appendices B and C). As part of the reports (executive summary of 20 September 2024 report) it is highlighted that specific schemes or activities for funding are</p>

			not pre-determined as these may change over time but criteria are set and there is usually an open call process to ensure fair allocation.
2. Looking at the flowchart on page 15 of our papers, is it the case that if an application for grant funding was received that does not meet the Council's Corporate Plan Priorities, would it instantly be rejected. As an example, if the application was to assist with Animal Welfare.	Councillor Barrett	Councillor Placey	The flowchart is clear that allocation of funding does need to meet the Corporate Plan priorities and the Council would therefore not expect to fund items outside this. Each application would be looked at broadly to see if it fits into the Corporate Priorities. These are the Administration's priorities which have been consulted on and approved at Council and so it is right that this is the focus for allocation.
3. What check and balances in places for grant funding? As an example, what checking takes place that a project had been delivered against the application? Are there assurances organisations are using the funding for the schemes they have applied for? Are site visits carried out?	Councillor Davison	Councillor Placey	The flow chart in the External Funding Review report identifies the importance of grant criteria and in terms of a commissioned service that there is a specification. In addition, the allocation of funding checklist highlights the importance of criteria for use of the funding. This ensures clarity about what grants are used for and officers do seek updates from those provided with funding to ensure it meets the original criteria. This may include a site visit. Although is more usually via written update.
4. Is there any mileage in introducing a flexible delivery on grants? Could organisations receive funds every other year, allowing funds to be used for other projects?	Councillor Steady	Councillor Placey	Grants are delivered against criteria which has not as yet included a flexible alternate year's approach. Such an approach may be ineffective as grant availability changes between years. However, consideration may be given to whether funding has received by an organisation previously to ensure fairness of allocation.
5. Does the Portfolio Holder think there would be value in establishing a Group of Councillors to look across the board at all grant funding schemes, a Member Oversight Working Party perhaps? In asking this I am aware of the praise	Councillor Griffiths	Councillor Placey	Currently there are a number of routes for oversight for grant funding. Reports have gone to and been agreed by Cabinet in terms of the grant process and use of funding. In addition, wider reports such as the community projects update agreed at Cabinet also highlights allocation of funding in terms of grants. This Overview and Scrutiny meeting also provides an opportunity to review grant funding. I therefore think there

given to the Working Party that oversaw the Tendring Community Fund.			is already sufficient opportunity for the use of grants to be reviewed.
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Further questions were asked by the Committee in relation to external organisations being aware of the information of possible Grant Funding opportunities and were advised that information is made public through the Council's Social Media posts, on the Council's website and through asking Members and Partners to share the information more widely. This prompted a discussion around holding open days or sessions with small organisations to support in the process of applying for Grant Funding.

The Chairman of the Committee invited the representatives present from external organisations, namely Clacton Arts Centre, Jaywick Sands Community Forum, and Ketchup Clothes to address the Committee and provide their thoughts and experiences of the Council's Grant Funding process and areas that they felt the process could be improved. The representations of the organisations advised the Committee of the type of grant they applied for, how they found the process of applying and how they felt the funding awarded had supported their organisation positively. Brad Thompson, Chairman and Trustee of the Jaywick Sands Community Forum, informed the Committee that he was kept well-informed in the process and that there were strict requirements to provide proof of how they intended to use the funding. Following the receipt and use of this funding by Jaywick Sands Community Forum a report was provided to the Council with evidence detailing what had been done.

Dr Karen Dennis, owner of Ketchup Clothes, advised the Committee that she had received funding through the UK Shared Prosperity Fund. She advised the Committee of her experience of working with the Council and that the process of applying for grant funding had been relatively easy and transparent.

The Chairman of the Committee thanked the Portfolio Holder and Officers for their attendance and their explanations of the grants flowchart and checklist adopted internally to identify when matters could follow an 'open call' grant arrangement and when it would require 'procurement'. The Committee also wish to record its thanks to all those who contributed to the enquiry into Grant Funding by/through the Council including written submissions from Headway Essex and Inclusion Ventures and the attendance by representatives from Jaywick Sands Community Forum, Ketchup Clothes and from Clacton Art Centre and their insight into the processes and value of grant opportunities for community activities.

The content of the report had not fully addressed the request from the Committee and the language used was particularly difficult to engage with due to its technical nature and absence of explanation.

The Committee **RESOLVED TO RECOMMEND** to Cabinet to seriously consider the following actions:

- (a) the establishment of an Oversight Group of Members for grant schemes across the Council;
- (b) some form of gap analysis – even is full analysis is too large a project to be achieved and the opportunities to 'flex' grant giving to maximise the range of organisations receiving financial support in the District across the years.

- (c) further standardised processes for different grant giving arrangements to help deliver best practice across those separate grant giving arrangements (eg around the length of time between opening invitations for applications and the closing date, common and plain language to explain the processes (and be available on the website), details of other grants received, the time between closure of application and determination/notification of outcomes, and the post grant-giving monitoring arrangements).
- (d) Adopt a consistent 'you said, we did' opportunity for organisations applying for grant funding to feed back on their experiences;
- (e) Look at organising an open day for community/voluntary groups in conjunction with other grant funding organisations (and CVST) to disseminate information on those grant schemes and help to break down barriers to access grant funding for these community/voluntary groups.

The Committee also **RESOLVED TO RECOMMEND** to:

- (f) request that the Chairman of the Committee and the Portfolio Holder to consider the recommendations above and to encourage a positive response to them from Cabinet; and
- (g) Note that there are proposals for LGR in Great Essex and that we are awaiting confirmation from Government to whether these will proceed and over what timetable. On the basis that Government does approve the principle of LGR in Greater Essex the Committee record that it would wish to undertake an enquiry into the implications of LGR on areas within its responsibility (including grant funding) in the work programme for 2025/26 and that this enquiry would look at possible areas where the transition to a new unitary structure could be supported.

The meeting was declared closed at 8.45 pm

Chairman

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Community Leadership Overview and
Scrutiny Committee

28 January 2025

**MINUTES OF THE MEETING OF THE COMMUNITY LEADERSHIP OVERVIEW AND
SCRUTINY COMMITTEE,
HELD ON TUESDAY, 28TH JANUARY, 2025 AT 7.30 PM
IN THE COMMITTEE ROOM, AT THE TOWN HALL, STATION ROAD, CLACTON-
ON-SEA, CO15 1SE**

Present:	Councillors Steady (Chairman), Barrett (Vice-Chairman), Davidson, Doyle, Ferguson, Griffiths and Oxley
Also Present:	Councillors Kotz (Portfolio Holder for Assets & Community Safety; Joint Chairman of the Community Safety Partnership Board), Placey (Portfolio Holder for Partnerships; Joint Chairman of the Community Safety Partnership Board) and Smith (Portfolio Holder for the Environment & ICT) (all except item 11)
In Attendance:	Tim Clarke (Assistant Director (Housing and Environment)) (except item 11), Keith Simmons (Head of Democratic Services and Elections & Deputy Monitoring Officer), Grant Fenton-Jones (Environmental Health Manager) (except item 11), Leanne Thornton (Community Safety & Safeguarding Manager) (except items 10 (part) - 11), Bethany Jones (Committee Services Officer) and Katie Koppelaar (Committee Services Officer)

6. APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

There were no apologies for absence submitted nor substitutes appointed by Members on this occasion.

7. DECLARATIONS OF INTEREST

There were no declarations of interest by Councillors in relation to any item on the agenda for this meeting.

8. QUESTIONS ON NOTICE PURSUANT TO COUNCIL PROCEDURE RULE 38

On this occasion no Councillor had submitted notice of a question pursuant to Council Procedure Rule 38.

**9. REPORT OF THE CORPORATE DIRECTOR OF OPERATIONS AND DELIVERY -
CONSIDERATION AND DEVELOPMENT OF A CRIME AND DISORDER
REDUCTION STRATEGY 2025-2028**

The Committee considered a report of the Corporate Director (Operations & Delivery) which set out the proposed Crime and Disorder Reduction Strategy 2025 – 2028 and offered Members the opportunity to provide feedback on that draft strategy having heard from some of the key partners working with the Council through the Community Safety Partnership.

The following parties were in attendance to respond to any questions raised by the Committee.

Tim Clarke – Assistant Director (Housing and Environment) (TDC);
Councillor Gina Placey – Joint Chair of the Community Safety Partnership Board; and
Councillor Peter Kotz – Joint Chair of the Community Safety Partnership Board.

Members were aware that, as set out in Article 6 of the Council's Constitution, the Community Leadership Overview & Scrutiny Committee acted as the Council's designated "crime and disorder committee" for the purposes of Section 19 of the Police and Justice Act 2006 and had the power –

(a) *to review or scrutinise decisions made, or other action taken, in connection with the discharge by the responsible authorities [*] of their crime and disorder function;*

(b) *to make reports or recommendations to the local authority with respect to the discharge of those functions.*

* *"The responsible authorities" means the bodies and persons who are responsible authorities within the meaning given by section 5 of the Crime and Disorder Act 1998 (c.37) (authorities responsible for crime and disorder strategies) in relation to the local authority's area.*

In fulfilling that function the Community Leadership Overview & Scrutiny Committee I had the power (whether by virtue of section 9F(2) or 21(2) of the Local Government Act 2000 or regulations made under section 9JA(2) or 32(3) of that Act or otherwise) to make a report or recommendation to the local authority with respect to any matter which was a local crime and disorder matter in relation to a member of the authority.

In accordance with the Council's Constitution and The Crime and Disorder Act 1998, as amended by section 97 and 98 of the Police Reform Act 2002, there was a requirement on Community Safety Partnerships to develop a Crime and Disorder Reduction Strategy

The Committee was informed that the Strategy had been ratified by the Community Safety Partnership Strategic Board on 9 January 2025. The Strategy would be presented to Cabinet on 21st February 2025.

In presenting the Strategy to Cabinet the relevant Portfolio Holders would recommend that Cabinet agreed to recommend the adoption of the Crime and Disorder Reduction Strategy 2025 – 2028; and that authority be delegated to the Corporate Director for Operations and Delivery to make future minor updates or amendments to the Strategy in consultation with the Portfolio Holder responsible for community safety.

The Strategy would then go to the Full Council meeting on 25 March 2025 for adoption by the Council.

It was reported that the Strategy set out the overarching framework for the Council and its partners in the Community Safety Partnership (CSP) to reduce crime and disorder by formalising the work that would be undertaken with the CSP and the Council's Community Safety Team over the next three years.

It set out the priorities for reducing crime and disorder and Anti-Social Behaviour (ASB), whilst protecting vulnerable people across Tendring over the next three years.

Through working together, the CSP had achieved many successes in reducing crime and disorder and ASB, protecting those who were vulnerable and making Tendring safe and secure for residents, businesses and visitors.

The Council was proud of those achievements. In order to build upon previous work and to understand the challenges that arose the Council work with partners to address the challenges to ensure a safer Tendring for its residents.

Members were informed that the Strategy was based upon a wide range of data and information, from public consultation to crime and disorder information that were brought together in an annual Strategic Assessment. Through the assessment four key themes within the Strategy (as set down below) had been identified that fed into the CSP priorities. The challenges facing children, young adults and families that had evolved and continued to do so were recognised. For example, criminal gangs were targeting children to move drugs in and out of towns and other areas, including in Tendring. This was a national issue, but there was a need to be aware of criminal gangs, and to be able to spot the signs that children might be being targeted.

- 1. Tackling violence against women and girls is at the forefront of the CSP's agenda and reflects the Government's priority in tackling this issue, following the tragic deaths of Sarah Everard, Balvinder Gahir, Bibaa Henry, Nicole Smallman and Julia James, and an increase in reports of domestic abuse.*
- 2. Our ambition is to increase support for victims and survivors, increase the number of perpetrators brought to justice and reduce the prevalence of violence against women and girls.*
- 3. We will work in partnership across the CSP & Health and Wellbeing Board and with our partners and communities to achieve progress on our priorities during the lifetime of this strategy and seek to bring about real change for residents and visitors to Tendring.*
- 4. The CSP brings the opportunity for organisations and groups to come together to improve crime and disorder and ASB in Tendring and create an environment where people and communities can flourish, the CSP remains committed to making Tendring safe.*

The Committee was advised that the findings of the strategic assessment had informed the decision to select the CSP Priorities for Tendring which would be:

1. Tackling ASB and the root causes of ASB;
2. High Harm Violence (with a focus on Violence Against Women and Girls (VAWG) and Domestic Abuse);
3. Drug and knife enabled Serious Violence (Gangs and County Lines); and
4. Emerging threats and Trends (i.e.: Shoplifting, Vehicle Crime, Arson & Criminal Damage).

Members were cognisant that there were no financial implications associated with the adoption of this Strategy as the Strategy formalised existing arrangements which were currently fully funded via the Police Fire and Crime Commissioner Annual Grant.

Councillor Kotz, Joint Chairman of the CSP Board and Tendring District Council's Portfolio Holder for Assets and Community Safety addressed the Committee by way of an introduction to the Strategy and recorded his thanks to the Community Safety & Safeguarding Manager (Leanne Thornton) and her Team for producing the Strategy. Councillor Kotz reminded the Committee that this was a high-level strategic document, and he requested that Members' questions be concentrated on matters at the District level rather than at the local Ward/neighbourhood level.

The Community Safety & Safeguarding Manager gave a presentation that highlighted the salient points of the Strategy which, in turn, had been based upon an annual strategic assessment.

At the meeting of the Committee the following questions were asked to which the Portfolio Holder for Partnerships and others, when appropriate, responded.

Committee Member asking the Question	Question (summary form)	Individual giving the response (if any)	Response (if any) (Summary form)
Councillor Griffiths	How is the Council/CSP communicating with residents to try to allay their fear of crime?	Leanne Thornton	Community Ambassadors are often out and about in town centres talking to residents receiving information / intelligence and putting over messages. Similarly, at Community safety Events. Community Days & Nights of Action also take place for example visiting pubs and clubs to talk to licensees and customers and put across safety messages relating to drink spiking.
Councillor Griffiths	Is there any "teeth" behind this Strategy or is it just 'for show'? How can it be demonstrated that the CSP has a grip on the crime and disorder issues		

	highlighted in this report?		
Councillor Doyle	How do the District's crime and disorder figures relate to those at the national level?	Leanne Thornton	Essex County Council undertakes a crime survey, and the statistics are then passed to this Council. Those statistics show that Tendring is on a par with the rest of Greater Essex.
Councillor Doyle	Are there support mechanisms available for those Council Officers who face such challenges out on the street and may encounter scenes of a violent and/or upsetting nature?	Leanne Thornton	Mutual support is available within the Team. Support mechanisms were available via HR and the EAP if counselling/mental health support was required. There were also reporting mechanisms available if "concerns or issues" needed to be sent up the "chain of command".
Councillor Oxley	Anti-Social Behaviour is prevalent in Walton. Is there a way of moving forward the request for a Public Spaces Protection Order more quickly?	Leanne Thornton	Am aware of the street drinking issue in Walton. Unfortunately, a significant amount of evidence is required to justify putting a PSPO in place and that must come from Essex Police. As yet the threshold has not been met.
Councillor Davidson	Crime Reporting figures are not accurate as most residents do not report crime as they believe nothing will	Leanne Thornton	Historically, reporting has been an issue due to the need to either visit a Police Station in person or use the

	<p>happen in response and so it is not worth their while. Therefore, Tendring's figures look good but are not accurate. How can we encourage and educate residents to report crime?</p>		<p>ineffective 101 telephone system. However, there are more ways than ever to report crime e.g. online or via the dedicated TDC telephone number. The Community Safety Team encourages the public at every opportunity to report crime as all crime reported is risk assessed, categorised and solvability assessed.</p>
<p>Councillor Davidson</p>	<p>Need to find a way to challenge children who are seen wearing suspiciously expensive clothes, footwear or other accessories as to where the money to buy them came from as a way of discovering whether they are caught up in shoplifting or 'county lines' drug distribution.</p>	<p>Leanne Thornton</p>	<p>A recent anti-shoplifting initiative has been the introduction of the Shop Safe Radio System, funded by the CSP, whereby shop owners are in constant contact with the CST and Essex Police and can report ASB and shoplifting as it happens. In addition, Essex Police and Essex Fire & Rescue have a joint education team that goes into schools and youth clubs and give sessions on various crime prevention and personal safety matters.</p>
<p>Councillor Davidson</p>	<p>Are there programmes to educate children on the dangers of</p>	<p>Leanne Thornton</p>	<p>Yes. This is part of the work of the Essex Police and Essex Fire &</p>

	carrying knives and knife crime?	Councillor Placey	Rescue Joint Education Team. In addition, the CST is working locally with the “U-Turn” knife crime charity. Efforts are ongoing to encourage more schools to invite the Joint Education Team in.
Councillor Ferguson	Need to come up with a “Report It” campaign alongside the publication of this Strategy in due course. In addition, there is a need to promote the work and achievements of TDC and the CSP.	Tim Clarke Leanne Thornton	Will take away the idea of a publicity campaign and discuss it with the Council’s Communications Manager. The CSP produces an annual report of its achievements which can be shared with Members and more widely disseminated. Essex Police also produce a comprehensive monthly newsletter which can be subscribed to.
Councillor Ferguson	What is a ‘Minerva’ Zone?	Leanne Thornton	This is a specific area/location in the local community where women and girls report that they do not feel safe. If enough reports are received, then an action under the Police’s “Minerva” initiative will be carried out.

Councillor Steady	Referred to the BBC News report that Essex Police had revealed plans to make all 99 of its PCSOs redundant to help balance its budget. This will mean that the speedy implementation of the Council's CCTV project is even more urgent as a gap would now be generated in community policing.	Councillor Kotz	Not aware of the full details of this so can not comment as yet. Referred also to the Home Office's mooted changes to policing. Was aware that the CCTV Project planning applications would be considered at Planning Committee next week. He felt that the role of this Committee was to keep a good eye on the Strategy's priorities and how they were implemented as a 'rolling' live document.
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A Member suggested that the Committee Members should go out and about with the Community Ambassadors to help Members understand the crime and disorder problems and issues within the community. Leanne Thornton welcomed that suggestion and offered to facilitate this. Councillor Kotz mentioned that Essex Police were also extending a similar invitation.

The Chairman thanked Leanne Thornton for her excellent report and presentation.

Councillor Kotz thanked the Committee for their constructive comments.

It was moved by Councillor Ferguson, seconded by Councillor Griffiths and:-

RESOLVED that –

- (a) the Crime and Disorder Strategy presented to the Committee be supported and Cabinet advised of this support for delivery by the appropriate partners including Essex Police;
- (b) the Committee -
 - (i) commends the Strategy authors for ensuring that the language and format and use of graphics to create what is an accessible document for most readers;

- (ii) urges the Cabinet to ensure that all reasonable and appropriate steps are taken to care for the health, safety and wellbeing of all staff involved in enforcement activities and community safety;
- (iii) recognises the increasing levels of violence against the person, shoplifting, possession of weapons, personal robbery, hate crime and domestic abuse and the need for robust action to address these growing crime problems in the District;
- (iv) urges the Community Safety Partnership to adopt, as a priority, the need to educate and encourage confidence in the reporting of crime by the public and business managers to reduce significantly the current levels of under reporting by victims; and
- (v) expresses its concern for delivery of the priorities on the basis of the plans announced on the day of the meeting for all 99 PCSOs in Essex to be made redundant.

10. REPORT OF THE ASSISTANT DIRECTOR OF HOUSING AND ENVIRONMENT - WATER QUALITY IN THE TENDRING DISTRICT

The Committee considered a report of the Assistant Director (Housing & Environment) which would provide it with statistical evidence and data regarding the quality of Seawater, Freshwater Courses and Drinking Water within the District of Tendring.

The data collated had been obtained, principally, via the Environment Agency, along with further information on water quality and data around Private Water Supplies and Oyster beds provided by the Council's Environmental Health Service.

At the meeting the Portfolio Holder for the Environment & ICT (Councillor Smith) introduced this item by way of a statement he read out.

The Environmental Health Manager (Grant Fenton-Jones) gave a brief overview of the report, drawing out its salient points and especially the information contained within the appendices. He reported that, overall, the bathing and drinking water quality was excellent and for bathing there were only two areas of minor concern i.e. Holland Haven and Mistley/Manningtree.

Mr. Fenton-Jones informed the Committee that, since January 2024, third party water distributor/supplier inspections (e.g. caravan park sites) had been an extra burden on the Team's statutory workload.

Mr. Fenton-Jones also reported that Natural England were in the process of commissioning a bio-diversity study and action plan for the Stour and Orwell Rivers which would especially focus on invasive species and their impact on water quality. He undertook to keep the Committee updated.

Committee Member asking the Question	Question (summary form)	Individual giving the response (if any)	Response (if any) (Summary form)
Councillor Griffiths	How would the	Grant Fenton-	The Team's focus

	Council carry out its Regulation 8 inspections on mobile home sites with intermittent use and seasonal use caravan parks.	Jones	would be on sampling sites that used stored water and a pump supply. The site owners would need to carry out a Legionella risk assessment as part of the licensing regime before that site could re-open for the new season. For those sites with mains supply the focus would be a robust examination of that site's customer safety policies and practices.
Councillor Doyle	How will the Council ensure that the new housing targets will be met without overloading the water supply and foul and surface water drainage systems?	Grant Fenton-Jones	Anglian Water's willingness to grant Discharge Consents will be a necessary and significant factor in achieving the required growth in housing supply. Environmental Health will work closely with Planning colleagues as a consultee on planning applications on matters such as SuDS attenuation; climate change amelioration; encouragement of 'grey water' recycling; separation of 'foul' water from rainwater.
Councillor Barrett	Can you confirm	Grant Fenton-	Yes, 100%. This

	that the misuse of storm drain overflows is a low level issue for Anglian Water in this District?	Jones	District is doing well currently and is expected to improve even further over the next ten years.
Councillor Davidson	Does the Environmental Health Team regular the Dock River at Parkeston?	Tim Clarke	No, that is an Environment Agency responsibility.
Councillor Doyle	Does this Council actively advise the public that Gull poo is toxic?	Grant Fenton-Jones	The Council is already responding to a similar enquiry about problems caused by pigeons and so that work could be expanded to include Gulls.

It was moved by Councillor Davidson, seconded by Councillor Doyle and:-

RESOLVED that the Committee –

- (a) welcomes the reports on water quality and that this demonstrates the generally good news story for the District and its water quality;
- (b) also welcomes the biodiversity action plan being developed for the Stour and Orwell rivers; and
- (c) notes the opportunities to be explored around visiting the sewage treatment work at Holland Haven; the company in Harwich who are taking sewage waste and converting it into energy bricks and clean water; and the Brightlingsea Harbour Commissioners in respect of the research project being undertaken with the University of Essex.

11. **REVIEW OF THE WORK PROGRAMME**

The Committee considered a report of the Head of Democratic Services & Elections which provided it with an update on its approved Work Programme for 2024/25 (including progress with enquiries set out in its Work Programme), feedback to the Committee on the decisions in respect of previous recommendations from the Committee in respects of enquiries undertaken and a list of forthcoming decisions for which public notice had been given.

Members were reminded that the Council had commissioned the Centre for Governance and Scrutiny (CfGS) to undertake an 'Overview & Scrutiny Development Review' in

2021 as a way of further improving that function at the Council. Two relevant recommendations arising from that review had been:

“Further strengthening the annual process for developing work programmes for each O&S committee - Engaging Members, Officers, partners and the public to prioritise the topics for review. This could include a selection criterion to identify appropriate topics for the work programme. Currently the work programme is also the last item on the agenda at O&S meetings, we would recommend bringing it to the beginning, so it can be given greater priority and benefit from more considered discussion, rather than being subject to the inevitable end of meeting fatigue.

Reviewing how the recommendations are made and how impact is measured – This could include putting the ‘recommendations monitoring report’ at the beginning of agendas to orientate O&S towards outcomes-focused meetings, alongside an emphasis on finding strong recommendations from questioning to present to Cabinet (or partners) as improvement or challenge proposals.”

The inclusion of the matters set out in the “purpose of the report” section of the Head of Democratic Services & Elections’ report sought to further re-enforce the inter-relationship of the matters referred to. As such, it was designed to further support consideration of work programming of the Committee and contribute to addressing progress with the Corporate Plan.

The detailed matters relating to the following matters were set out in the relevant Appendix identified:

- (1) Work Programme for 2024/25 approved by Full Council on 6 August 2024 (Appendix A);
- (2) feedback to the Committee on the decisions in respect of previous recommendations from the Committee in respects of enquiries undertaken (none on this occasion); and
- (3) a list of forthcoming decisions for which notice had been given since publication of the agenda for the Committee’s last meeting (Appendix B).

In considering work programming matters, the Committee was further reminded of the other recommendations from the CfGS review undertaken in 2021 namely:

“Considering greater use of task and finish groups – This more informal type of O&S can allow improved cross-party working and detailed investigation of a single issue focussed on producing substantive recommendations.

Improved agenda planning and management - Committees should focus on one or two substantive items per agenda to allow for cross-cutting themes to be properly identified and explored, and different insights brought to bear on critical issues.

Considering how to engage the public in the work of O&S - This could include O&S going on more site visits in the community, inviting the public to offer ideas for work programmes, and greater use of social media channels for resident input and communicating the progress and impact of scrutiny work.

A clearer focus on democratic accountability - Scrutiny of Cabinet Members should form a key part of the work programme, providing an opportunity to hold the Leader and portfolio holders to account for delivery of the corporate plan and any other issues O&S feel is important.”

Also pertinent to the Committee’s considerations were its terms of reference as set out in Article 6.01(i) of the Council’s Constitution together with the provisions of Overview and Scrutiny Procedure Rule 7 (Work Programme) and the themes of the Council’s Corporate Plan which were:-

- *Pride in our area and services to residents*
- *Raising aspirations and creating opportunities*
- *Championing our local environment*
- *Working with partners to improve quality of life*
- *Promoting our heritage offer, attracting visitors and encouraging them to stay longer*
- *Financial Sustainability and openness*

Members noted that the Committee had held an informal meeting on Thursday 9 January 2025, during which the attendees had received a very informative presentation from Dr. Emily Murray of the Centre for Coastal Communities (University of Essex). A Member suggested that Dr. Murray be invited to attend a future formal meeting of the Committee and the Head of Democratic Services & Elections undertook to add that as a provisional item on the Committee’s 2025/26 Work Programme.

Members also received or would shortly receive an update of the work of the Task & Finish Groups established by the Committee, namely:

- Crime and Disorder (Familial Violence/Abuse);
- Joint working with Parish and Town Councils; and
- Youth Provision for School Age Children outside of school.

It was **RESOLVED** that –

- (a) the progress with enquiries set out in its Work Programme 2024/25, plus any feedback to the Committee on the decisions in respect of previous recommendations and the list of forthcoming decisions be noted; and
- (b) the updates of the work of the Committee’s Task and Finish Groups be formally received and noted.

The meeting was declared closed at 9.19 pm

Chairman

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COMMUNITY LEADERSHIP OVERVIEW AND SCRUTINY COMMITTEE

15 APRIL 2025

REPORT OF ASSISTANT DIRECTOR (CORPORATE POLICY AND SUPPORT)

A.1 WORK PROGRAMMING – INCLUDING MONITORING OF PREVIOUS RECOMMENDATIONS AND SUMMARY OF FORTHCOMING DECISIONS

(Report prepared by Katie Koppenaal)

PURPOSE OF THE REPORT

The report provides the Committee with an update on its approved Work Programme for 2024/25 (including progress with enquiries set out in its Work Programme), feedback to the Committee on the decisions in respect of previous recommendations from the Committee in respects of enquiries undertaken and a list of forthcoming decisions for which public notice has been given.

INVITEES

None.

BACKGROUND

The Council commissioned the Centre for Governance and Scrutiny (CfGS) to undertake an 'Overview & Scrutiny Development Review' in 2021 as a way of further improving that function at the Council. Two relevant recommendations arising from that review were:

“Further strengthening the annual process for developing work programmes for each O&S committee - Engaging Members, Officers, partners and the public to prioritise the topics for review. This could include a selection criteria to identify appropriate topics for the work programme. Currently the work programme is also the last item on the agenda at O&S meetings, we would recommend bringing it to the beginning, so it can be given greater priority and benefit from more considered discussion, rather than being subject to the inevitable end of meeting fatigue.

Reviewing how the recommendations are made and how impact is measured – This could include putting the ‘recommendations monitoring report’ at the beginning of agendas to orientate O&S towards outcomes-focused meetings, alongside an emphasis on finding strong recommendations from questioning to present to Cabinet (or partners) as improvement or challenge proposals.”

The inclusion of the matters set out in the “purpose of this report” section above seeks to further re-enforce the inter-relationship of the matters referred to. As such, it is designed to further support consideration of work programming of the Committee and contribute to addressing progress with the Corporate Plan.

DETAILED INFORMATION

WORK PROGRAMME 2024/25

The detailed matters relating to the following matters are set out in the relevant Appendix identified:

- (1) Work Programme for 2024/25 approved by Full Council on 6 August 2024 – See Appendix A;
- (2) feedback to the Committee on the decisions in respect of previous recommendations from the Committee in respects of enquiries undertaken – See Appendix B; and
- (3) a list of forthcoming decisions for which notice has been given since publication of the agenda for the Committee’s last meeting – See Appendix C

In considering work programming matters, the Committee is further reminded of the other recommendations from the CfGS review undertaken in 2021:

“Considering greater use of task and finish groups – This more informal type of O&S can allow improved cross-party working and detailed investigation of a single issue focussed on producing substantive recommendations.

Improved agenda planning and management - Committees should focus on one or two substantive items per agenda to allow for cross-cutting themes to be properly identified and explored, and different insights brought to bear on critical issues.

Considering how to engage the public in the work of O&S - This could include O&S going on more site visits in the community, inviting the public to offer ideas for work programmes, and greater use of social media channels for resident input and communicating the progress and impact of scrutiny work.

A clearer focus on democratic accountability - Scrutiny of Cabinet Members should form a key part of the work programme, providing an opportunity to hold the Leader and portfolio holders to account for delivery of the corporate plan and any other issues O&S feel is important.”

The Community Leadership Overview and Scrutiny Committee is one of two overview and scrutiny committees established by the Council to specifically focus on the following areas of Council work (as detailed in Article 6.02(i) of the Council’s Constitution):

“To perform the role of Overview and Scrutiny and its functions in relation to

- *Community Leadership developing the external focus of overview and scrutiny on “district-wide” issues’ (and where appropriate sub regional, regional and national issues), in particular through collaborative work with local partner authorities, providers, stakeholders and members of the public.*
- *Approval of discrete researched and evidenced reviews on the effectiveness of partnership operating in the area with particular focus on:*
 - *Community Safety*
 - *Health and Well-being*
 - *Economy, Skills and Educational Attainment*
- *Community engagement, development and empowerment*
- *Economic Development, Regeneration and Freeport East*

- *Leisure and Tourism (except matters relating to budgets)*
- *Planning & Building Control and Strategic Planning (including the Local Plan)*
- *Emergency Planning*
- *To scrutinize/review the outcomes and implications for the Council of its financial support to community organisations and also from its receipt and use of funds received from local partner organisations.*

The Community Leadership Overview & Scrutiny Committee will also act as the Council's designated "crime and disorder committee" for the purposes of Section 19 of the Police and Justice Act 2006 and will have the power –

- (a) to review or scrutinise decisions made, or other action taken, in connection with the discharge by the responsible authorities[*] of their crime and disorder function;*
- (b) to make reports or recommendations to the local authority with respect to the discharge of those functions.*

**- "The responsible authorities" means the bodies and persons who are responsible authorities within the meaning given by section 5 of the Crime and Disorder Act 1998 (c.37) (authorities responsible for crime and disorder strategies) in relation to the local authority's area.*

In fulfilling that function the Community Leadership Overview & Scrutiny Committee will have the power (whether by virtue of section 9F(3) or 21(2) of the Local Government Act 2000 or regulations made under section 9JA(2) or 32(3) of that Act or otherwise) to make a report or recommendation to the local authority with respect to any matter which is a local crime and disorder matter in relation to a member of the authority.

The crime and disorder committee shall meet to review or scrutinise decisions made, or other action taken, in connection with the discharge by the responsible authorities of their crime and disorder function as the committee considers appropriate but no less than once in every twelve month period."

The Constitution provides for the two overview and scrutiny committees to submit a work programme to full Council for approval. Rule 7 of the Overview and Scrutiny Procedure Rules sets out the position as follows:

"Each Overview and Scrutiny Committee will submit a work programme for the year ahead and a review of the previous year's activities to the full Council for approval. In addition it will be responsible for co-ordinating and prioritising its work programme on an ongoing basis.

In preparing, co-ordinating and prioritising its programme, each Overview and Scrutiny Committee will take into account:-

- *The General Role and Principles of undertaking its functions, as set out in Part 2 Article 6;*
- *the planned work on the preparation of elements of the Budget and Policy Framework;*

- *provision for budget scrutiny and scrutiny of the Treasury Management Strategy, as appropriate;*
- *the need for statutory timetables to be met;*
- *the expressed wishes of the members of the committee;*
- *requests from the Cabinet to carry out reviews and/or suggestions from the liaison meetings held under the Cabinet Overview & Scrutiny Protocol; and*
- *requests from Members and/or Group Leaders in accordance with Rule 8.”*

In considering the Work Programme of enquiries, the Committee must have regard to the Corporate Plan 2024-28 and the themes of that Corporate Plan are:

- Pride in our area and services to residents
- Raising aspirations and creating opportunities
- Championing our local environment
- Working with partners to improve quality of life
- Promoting our heritage offer, attracting visitors and encouraging them to stay longer
- Financial Sustainability and openness

Members will be aware, that an update on NHS Dentistry Provision was due to be received at this meeting of the Committee. Unfortunately, due to a change in officer responsibilities at SNEE ICB and the annual leave of the new officer in charge, this item has had to be postponed until the next meeting of the Committee which is due to be held on 17 June 2025.

It should also be noted that the Committee will hold an Informal Meeting on Thursday 10 April 2025, with the Assistant Director (Corporate Policy and Support) to discuss the work programme and agenda for this meeting.

During the discussion of this report, it would be possible to receive an update of the work of the Task & Finish Groups established by the Committee, namely:

- Joint working with Parish and Town Councils; and
- Youth Provision for School Age Children outside of school

Work Programme – 2025/2026 Muncipal Year

Officers are beginning the process of developing the Committee's work programme for 2025/26. Initially, this will involve seeking suggestions from:-

- Members;
- the Leader of the Council and Deputy Leader of the Council (through a joint meeting under the Cabinet/Overview & Scrutiny Protocol with the Chairman of the two Overview and Scrutiny Committees, which will also involve the Chief Executive, the Corporate Director (Law and Governance) and the Assistant Director (Corporate Policy & Support);
- Management Team;
- Town and Parish Councils, partner agencies and community groups; and
- The public.

Officers will then collate the replies received that are relevant to this Committee, associating suggestions with a corporate plan theme, identifying information sources and possible invitees and what might be the benefit of the enquiries. That collation will then be firstly discussed with the Chairman of the Committee and then by the Committee at an informal meeting, which will be arranged in due course.

The proposed Work Programme for 2025/26 together with my annual review of the work undertaken by the Committee during 2024/25 will be formally submitted to the Committee for its approval at its meeting due to be held on 17 June 2025.

The Work Programme, as recommended by the Committee, together with the annual review of the work undertaken by the Committee during 2024/25, will then be submitted to the meeting of the Full Council due to be held on 15 July 2025 for its approval.

RECOMMENDATION(S)

- a) That the Committee considers and notes the progress with enquiries set out in its Work Programme 2024/25, plus any feedback to the Committee on the decisions in respect of previous recommendations and the list of forthcoming decisions; and**
- b) invites oral updates on the work of the two Task and Finish Groups established by the Committee (as referenced in the Work Programme at Appendix A):**
 - (i) Joint working with Parish and Town Councils (Cllr. Graham Steady is its Chairman); and**
 - (ii) Youth Provision for School Age Children outside of school (Cllr. Terry Barrett is its Chairman).**
- c) notes the arrangements that are being made for the Committee to consider and decide in due course its Work Programme for 2025/26.**

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COMMUNITY LEADERSHIP OVERVIEW AND SCRUTINY COMMITTEE FOR ENQUIRIES TO BE UNDERTAKEN IN 2024/25

Item	Date of Enquiry	Relevant Corporate Plan Theme/Annual Cabinet Priority	Information to be provided in advance	Those to be invited to attend	Articulated value of undertaking the review
To examine joint working with Parish & Town Councils in the District and opportunities and for the mutually beneficial collaboration to enhance that joint working.	Through a Task and Finish Group	<input type="checkbox"/> Pride in our area and services to residents <input type="checkbox"/> Working with Partners to improve quality of life	<p>Details of existing area of joint working between the District Council and Town and Parish Councils in the District.</p> <p>Examples of joint working elsewhere in the nation that may be beneficial to consider</p> <p>Oxfordshire Councils Charter (which sets out an accord on joint working between all Councils in that County) would be an item of information to be submitted to the enquiry (and an invitation would be sent to the Officers to address the enquiry).</p>	<p>Chief Executive</p> <p>Assistant Director, Partnerships</p> <p>The Chair/Secretary TDALC</p> <p>Representatives from the National Association of Local Councils</p> <p>Appropriate Officers/Portfolio Holders for areas of further joint work.</p> <p>Essex Association of Local Councils</p>	To develop options for the Cabinet/Council to develop collaborative working opportunities that are mutually beneficial.
To examine the extent of Youth Provision of	Through a Task and Finish Group	<input type="checkbox"/> Championing our local environment	The extent of Youth Provision outside of	Portfolio Holder, Partnerships	To explore further the benefit for

A.1 Appendix A

School age Children outside of that school/education and the opportunity for that provision to be adjusted/supported with improvements for mental health and reduced prosperity anti-social behaviour.		<input type="checkbox"/> Pride in our area and services to residents <input type="checkbox"/> Working with Partners to improve quality of life <input type="checkbox"/> Raising aspirations and creating opportunities	state education for school age children. The extent of demand for such out of School Activities. The opportunity for groups/individuals	Essex County Councils Portfolio Holder for Children's Services and Early years Assistant Director, Partnerships Essex County Councils Executive Director, Children, Families and Education Representatives of Voluntary Youth Provision in the District.	young people of out of school organised activities and events and provision around this age group.
Improving Access to NHS Dentistry for Residents in Tendring and Specifically Those Who Should Have Such Access Free of Charge.	At Committee on 17 June 2025	<input type="checkbox"/> Working with Partners to improve quality of life <input type="checkbox"/> Raising aspirations and creating opportunities	The number of dentists in the area now compared with 5-10 years ago, reasons for growth/decline. Public versus private. Legislative changes over the last 10 years that	Nicola Brunning, Deputy Director of Commissioning Pharmacy, Optometry, Dentistry and Vaccination	UPDATE To look at the provision of NHS dental provision in the District since the local Integrated care Board took responsibility for its commissioning

A.1 Appendix A

<p>(a) Under 18s and under 19s in full time education</p> <p>(b) Those on Income Support, Income-based Jobseeker's Allowance and Income related Employment and Support Allowance</p> <p>(c) Those below the income threshold and in receipt of child tax credits, working tax credit (including a disability element)</p> <p>(d) Pregnant women and those who have had a baby in the last 12 months</p> <p>(e) Those in receipt of a war Pension/Armed Forces</p>			<p>affected the service the NHS was obliged to provide, if any.</p> <p>Costs for procedures both public and private, waiting times.</p> <p>How many people are without a dentist in the district?</p> <p>How does Tendring sit against the rest of the UK in relation to the above questions?</p> <p>What steps are being taken to improve things?</p> <p>What sort of numbers are we now been seen by NHS Dentistry compared with previously?</p> <p>How many fast-tracked patients have there been?</p> <p>Evidence/stats/figures to show if service is stabilising.</p> <p>Visit to Essex University with post visit meeting,</p>	<p>The Portfolio Holder for Partnerships</p> <p>Head of Health and Partnership</p>	<p>and consider how the significant adverse health implications from poor dental health and gum disease in respect of:</p> <ul style="list-style-type: none"> • Respiratory infections • Diabetic complications • Cardiovascular problems • Kidney disease • Rheumatoid Arthritis <p>And thereby seek to ensure that the steps being taken by commissioners of NHS dentistry are seeking to mitigate against such issues.</p>
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A.1 Appendix A

Compensation scheme payments			but prior to the meeting in April		
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COMPLETED					
<p>To Consider Grant Funding by the Council and Others and its Appropriateness Given the Needs of the District.</p> <p>The enquiry would look at funding streams, processes, the implications of subsidy control, the accessibility of grants funding, the time formal streams of funding had, the extent to which the funded one off or ongoing work, a gap analysis of funding, and the value of funding outcomes.</p>	At a meeting of the Committee in January 2025	<p>□ Financial sustainability and openness</p>	The outcome of the complete review of the grant funding commissioned by Cabinet in 2023 and the progress with that review.	<p>Leader of the Council</p> <p>Portfolio Holder, Partnerships</p> <p>Assistant Director Finance and IT</p> <p>Assistant Director Partnerships</p> <p>Representatives of voluntary organisations in the District.</p>	<p>To consider the Councils approach to grants, the relationship between other grant funding organisations. The extent to which gaps in funding have been identified and addressed.</p>

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<p>Coastal Communities Unit</p> <p>To consider the work of the Coastal Communities Unit (CCU) and how this may help shape public policy.</p>	<p>At a Committee meeting to be determined.</p> <p>[It had been hoped to achieve this on 17 July 2024, but this was not possible].</p>	<p><input type="checkbox"/> Championing our local environment</p> <p><input type="checkbox"/> Pride in our area and services to residents.</p> <p><input type="checkbox"/> Working with Partners to improve quality of life.</p> <p><input type="checkbox"/> Raising aspirations and creating opportunities.</p>	<p>The impetus behind the creation of the CCU and its intended working and research to be undertaken.</p>	<p>Dr Emily Murray, Director of the CCU at the University of Essex</p>	<p>To be able to make recommendations around actions and activities that may have a beneficial impact on health inequalities locally.</p>
<p>NHS Dentistry off agenda briefing paper</p>	<p>For September 2024</p>	<p>See above</p>	<p>To update the Committee on the position of the Integrated Care Board's progress with its action plan to improve dentistry provision.</p>	<p>Assistant Director (Partnerships)</p>	<p>To give the Committee an update so as to help it develop its enquiry, set for 15 April 2025.</p>

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<p>To Consider the New District Wide Sports and Activity Strategy and its Related Action Plan and the Extent to Which this Address the Needs of the District.</p>	<p>At Committee meeting on 15 Oct 2024</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Pride in our area and services to residents <input type="checkbox"/> Working with Partners to improve quality of life <input type="checkbox"/> Raising aspirations and creating opportunities <input type="checkbox"/> Financial sustainability and openness 	<p>Data over a 5 year period on the extent to which residents are inactive, moderately active and very active and the different provisions to support activity among those different sectors of the Community.</p>	<p>The Portfolio Holder for Sports and Leisure</p> <p>Corporate Director, Place and Economy</p> <p>Representatives of organised sports operations in the area.</p> <p>Representatives from Active Essex.</p>	<p>To consider the extent to which the District wide Strategy achieves the following, from national strategy published on 30 August 2023 of:</p> <ol style="list-style-type: none"> 1. Being ambitious to making the area more active 2. Making sport and physical activity more inclusive and welcoming for also that everyone can have confidence that there is a place in sport for them. 3. Moving towards a more sustainable sector that is more financially resilient and robust. As well as not inadvertently damaging existing
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A.1 Appendix A

					opportunities for physical activity.
<p>Crime and Disorder (Familial Violence/Abuse) –</p> <p>To look at all types of familial violence, elder abuse and FGM.</p> <p>What support mechanisms exist locally? Looking at funding for voluntary sector organisations working in this area. What support is there for victims/survivors.</p>	Through a Task and Finish Group	<p>□ Working with Partners to improve quality of life</p>	<p>Levels of recorded violence against Women + Girls (and violence of children against parents etc) for Tendring over a 5-year period.</p> <p>Measures being taken by public authorities to address/reduce/eliminate violence and tackle behaviours by perpetrators. What services are available locally by voluntary sector arrangements for victims of violence.</p>	<p>Insp, Wendy Byrne, Essex Police.</p> <p>Portfolio Holder, Partnerships</p> <p>Assistant Director Partnerships Community Safety and Safeguarding Manager.</p> <p>PFCC Essex</p> <p>Representatives of organisations who provide support to victims of violence.</p>	<p>To shine a light on unacceptable behaviours within families and the benefit this created for so many families. It will also look at prevention and support measures to consider strengthening these where possible.</p>

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<p>To examine evidence around water quality in the District – including sea water, freshwater courses and drinking water.</p>	<p>At a Committee Meeting on 28 Jan 2025</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Championing our local environment <input type="checkbox"/> Pride in our area and services to residents <input type="checkbox"/> Working with Partners to improve quality of life <input type="checkbox"/> Promoting our heritage offer, attracting visitors and encouraging them to stay longer 	<p>Water quality data over previous 5 years for sea water, fresh water and drinking water.</p> <p>Activities already planned to improve water quality over the next 5 years by organisations responsible for that water quality.</p> <p>The recent article the Portfolio Holder from Kings Lynn and West Norfolk Council on the role of District Councils in championing water quality in coastal areas would be submitted to the enquiry.</p> <p>Case of material from an earlier study by the Council into coastal water quality that should be referenced to the enquiry.</p>	<p>Water and wastewater services in the District.</p> <p>Environmental Agency</p> <p>Maritime Marine Organisation</p> <p>Harwich haven Port Authority</p> <p>Brightlingsea Harbour Commissioners</p> <p>Surfers Against Sewage</p> <p>Portfolio Holder, Environment</p> <p>Corporate Director, Operations and Delivery</p> <p>LGA's special interest group on coastal matters.</p>	<p>To establish information on water quality in different settings and measures to improve water quality with a view to consider the appropriateness of that measure.</p>
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A.1 Appendix A

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COMMUNITY LEADERSHIP OVERVIEW AND SCRUTINY COMMITTEE

15 APRIL 2025

RECOMMENDATIONS MONITORING REPORT

Recommendation(s) Including Date of Meeting and Minute Number	Actions Taken and Outcome	Completed, follow-up work required or added to Work Programme
<p><u>This Committee's meeting on 14 January 2025</u></p> <p><u>SCRUTINY COMMITTEE IN RESPECT OF GRANT FUNDING ENQUIRY</u></p> <p>Recommended to Cabinet that:</p> <p>(1) Welcomes the report on Grant Funding from/through the Council and the statements and responses from the Portfolio Holder and Officers to the Committee and further welcomes the flowchart and checklist adopted internally to identify when matters can follow an 'open call' grant arrangement and when a 'procurement;</p>	<p>Cabinet considered the recommendations of the Grant Funding Enquiry at its meeting held on 31 January 2025.</p> <p>At that meeting Cabinet had before it the following written response of the Portfolio Holder for Partnerships:-</p> <p><i>"I thank the Committee for their recommendations, and these will be considered as the forthcoming Grant Policy is developed. I note the comments in respect of a voluntary sector funding day and consideration will be given to supporting or running such an event to assist the voluntary sector."</i></p> <p>Having duly considered the recommendations made by the Community Leadership Overview & Scrutiny Committee together with the written</p>	<p>Completed</p>

<p>(2) Records its thanks to all those who contributed to the enquiry into Grant Funding by/through the Council including written submissions from Headway Essex and Inclusion Ventures and the attendance by representatives from Jaywick Sands Community Forum, Ketchup Clothes and from Clacton Art Centre and their insight into the processes and value of grant opportunities for community activities;</p> <p>(3) urges Cabinet to seriously consider the following recommended actions:</p> <p>(a) the establishment of an Oversight Group of Members (such as a Portfolio Holder Working Party) for grant schemes across the Council to promote learning between schemes;</p> <p>(b) that at least some form of gap analysis of services/activity provided by community/voluntary groups be undertaken to inform future policies, even if a full analysis would be too large a project to be achieved, and that the opportunities to 'flex' grant</p>	<p>response of the Portfolio Holder for Partnerships thereto:-</p> <p>It was RESOLVED that the recommendations made by the Community Leadership Overview and Scrutiny Committee be noted and be given consideration for inclusion in the forthcoming Grant Policy which is currently being developed.</p>	
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<p>giving to maximise the range of organisations receiving financial support in the District across the years;</p> <p>(c) Further standardised processes for different grant giving arrangements to help deliver best practice across those separate grant giving arrangements (eg around the length of time between opening invitations for applications and the closing date, common and plain language to explain the processes (that could also be made available on the internet), details of other grants received, the time between closure of application and determination/notification of outcomes, and the post grant-giving monitoring arrangements);</p> <p>(d) Adopt a consistent 'you said, we did' opportunity for organisations applying for grant funding to feed back on their experiences;</p> <p>(e) Look at organising an open day for community/voluntary groups in conjunction with other grant funding organisations (and CVST) to disseminate</p>		
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<p>information on those grant schemes and help to break down barriers to access grant funding for these community/voluntary groups;</p> <p>(4) Request that the Chairman of the Committee and the Portfolio Holder meet to consider the recommendations above and to encourage a positive response to them from Cabinet; and</p> <p>(5) Note that there are proposals for Local Government Reorganisation (LGR) in Great Essex and that we are awaiting confirmation from Government to whether these will proceed and over what timetable. On the basis that Government does approve the principle of LGR in Greater Essex, the Committee record that it would wish to undertake an enquiry into the implications of LGR on areas within its responsibility (including grant funding) in the work programme for 2025/26 and that this enquiry would look at possible areas where the</p>		
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<p>transition to a new unitary structure could be supported.</p> <p>This Committee's meeting on 28 January 2025:-</p> <p>CONSIDERATION AND DEVELOPMENT OF A CRIME AND DISORDER REDUCTION STRATEGY 2025-2028</p> <p>“RESOLVED that –</p> <p>(a) the Crime and Disorder Strategy presented to the Committee be supported and Cabinet advised of this support for delivery by the appropriate partners including Essex Police;</p> <p>(b) the Committee –</p> <ul style="list-style-type: none"> (i) commends the Strategy authors for ensuring that the language and format and use of graphics to create what is an accessible document for most readers; (ii) urges the Cabinet to ensure that all reasonable and appropriate steps are taken to care for the health, safety and wellbeing of all staff involved in enforcement activities and community safety; 	<p>Cabinet will consider the Committee's comments and recommendations at its meeting due to be held on 11 April 2025.</p>	<p>Ongoing</p>
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<p>(iii) recognises the increasing levels of violence against the person, shoplifting, possession of weapons, personal robbery, hate crime and domestic abuse and the need for robust action to address these growing crime problems in the District;</p> <p>(iv) urges the Community Safety Partnership to adopt, as a priority, the need to educate and encourage confidence in the reporting of crime by the public and business managers to reduce significantly the current levels of under reporting by victims; and</p> <p>(v) expresses its concern for delivery of the priorities on the basis of the plans announced on the day of the meeting for all 99 PCSOs in Essex to be made redundant.”</p>		
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Recommendations monitoring for those recommendations from earlier meetings of the Committee have been previously reported to the Committee and, as such, are not repeated here as there is no further update to be provided on them.

A.1 APPENDIX C

Community Leadership Overview and Scrutiny Committee – 15 April 2025

OVERVIEW AND SCRUTINY PROCEDURE RULE 13 – SCRUTINY OF PROPOSED DECISIONS

(Prepared by Katie Koppenaal)

The below forthcoming decisions are those published and currently 'live' on the Council's corporate business schedule.

In presenting the following, the Committee's attention is drawn to the agenda item notes in respect of Overview and Scrutiny Procedure Rule 13.

DESCRIPTION OF DECISION	KEY DECISION – YES/NO	DECISION MAKER	Decision Due Date
Proposal for an Active Wellbeing Centre in Tendring	YES	Cabinet	9 May 2025
Football Foundation Playzone Scheme – Finding Application Outcome	YES	Cabinet	9 May 2025
Career Track – Annual Update and Outturn Report & Alternative Solutions	YES	Cabinet	6 June 2025
CRP2 Ten_06 Healthy Homes Initiative – Initiating Property Dealing Procedure	YES	Assets & Community Safety Portfolio Holder	Not before 10 April 2025
Urban Tree Challenge Fund	YES	Leisure & Public Realm Portfolio Holder	Not before 21 November 2024

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COMMUNITY LEADERSHIP OVERVIEW AND SCRUTINY COMMITTEE

15 APRIL 2025

REFERENCE FROM THE COUNCIL'S CRIME AND DISORDER (FAMILIAL VIOLENCE/ABUSE) TASK AND FINISH GROUP

A.2 FINAL REPORT - CONCERNING CRIME AND DISORDER (FAMILIAL VIOLENCE/ABUSE)

(Report prepared by Keith Simmons)

PURPOSE OF THE REPORT

To enable the Committee to consider the recommendations made to it as set out in the final report from the Council's Crime and Disorder (Familial Violence/Abuse) Task and Finish Group.

EXECUTIVE SUMMARY

The Task and Finish Group, having concluded the elements of its enquiry into Crime and Disorder, focussed its attention on the issue of familial violence/abuse. There were four meetings of the Task and Finish Group between November 2024 and April 2025. The Task and Finish Group's report is set out at Appendix A.

RECOMMENDATION

That, subject to the Committee's consideration of the report of the Council's Crime and Disorder (Familial Violence/Abuse) Task and Finish Group (set out at Appendix A to this report), the recommendations to Cabinet on this matter be determined.

BACKGROUND PAPERS

None.

APPENDICES

Appendix A – second report from the Council's Crime and Disorder (Familial Violence/Abuse) Task and Finish Group.

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A.2 APPENDIX

Community Leadership Overview and Scrutiny Committee

Final Report of the Crime and Disorder Task & Finish Group (Familial Violence and Abuse)

Investigating the types of familial violence that is prevalent in Tendring.

Highlighting preventative measures, and the support available for victims and survivors.

15th April 2025

A.2 APPENDIX

TERMS OF REFERENCE OF THE TASK & FINISH WORKING GROUP

At the meeting of Council on 6 August 2024, the work programme for the two Overview and Scrutiny Committees were approved. This included, within the scope of the Community Leadership Overview and Scrutiny Committee to ask the cross-party group of councillors to compile a report. The report identifies the prevalence of familial violence and its impact on people living in Tendring, setting out what support is offered to victims and survivors, including the work that Tendring District Council (TDC) contributes to as part of partnership working, within its role as a partner of the Community Safety Partnership.

In order to stay on track the working group recognise that this is a highly emotive subject, and whilst recommendations will be included in the final report, any recommendations will demonstrate that solutions will continue to be sought by working with our colleagues across the many statutory and voluntary service provisions.

The final report seeks to set out the process of the enquiry into the above and its conclusions and recommendations concerning the types of familial abuse, Elder abuse and Female Genital Mutilation (FGM), what support mechanisms exist locally and what support is available for victims and survivors and for perpetrators of Domestic Abuse.

THE AIMS AND OBJECTIVES OF THE ENQUIRY

The enquiry supports the Council's Corporate Plan themes of:

- Working with partners to improve quality of life
- Pride in our area and services to residents

MEMBERSHIP OF THE TASK & FINISH WORKING GROUP

On 17 August 2023, a decision in the name of the Chief Executive was published constituting the Task and Finish Group. Authority for the decision derived from Minute 5 of the Resources and Services Overview and Scrutiny Committee on 27 June 2023. That provided for Officers to be authorised, in consultation with the Committee Chairman, to make appointments to a Task and Finish Group as approved by Council (Minute 37 of 11 July 2023).

The Membership of the Task and Finish Group was :

Cllr. Carrie Doyle – Chairperson.
Cllr. Geeta Sudra
Cllr. Bernie Goldman

Cllr. Tanya Ferguson
Cllr. Gina Placey
Cllr. Ann Oxley

OFFICER SUPPORT FOR THE TASK & FINISH WORKING GROUP

Management Team identified lead officer Damian Williams, Corporate Director Operations and Delivery for this whole enquiry:

A.2 APPENDIX

Otherwise, the Task and Finish Group was supported by:

Bethany Jones – Committee Service officer – Clerk for Task & Finish Group
Leanne Thornton – Community safety & Safeguarding Manager

INVITEES AND PARTICIPANTS

The Group requested partner agencies to attend the meeting on 13th of March 2025.

The Partner Agencies invited were:

Essex Police – Domestic Violence Team

Mankind – Supporting Male Victims of Domestic violence. (Did not respond to invite)

Next Chapter – Supporting women and their children plan towards a future free from violence.

Change Project – Helps perpetrators to recognise their abusive behaviours and to break the cycle of domestic abuse.

EXPECTED OUTCOME(S) OF THIS ELEMENT OF THE ENQUIRY

The section above sets out the broad “Aims and Objectives of the Enquiry” which were the expected outcomes of this element of the enquiry also, to inform The Council regarding: -

- What types of familial violence are prevalent within Tendring District?
- What are current trends, and do they differ from the national picture?
- What support is in place to support victims & survivors?
- What support if any is provided to perpetrators of familial violence.
- How do we keep our people safe.

The objective of this enquiry is for panel members to:

- Highlight any gaps in provision that may exist, where we could work with partners in finding ways to support the residents of Tendring, who are currently experiencing Familial violence.
- What will improve residents experience, when seeking support from TDC regarding familial violence. This may be by improved pathways of communication and safeguarding.
- To highlight areas of excellent work currently being undertaken by staff at TDC in partnership with other agencies.

It was intended that there would be an informed position to make recommendations to support the intentions set out in the “Aims and Objectives of the Enquiry” section above.

ACTUAL OUTCOME(S) OF THIS ELEMENT OF THE ENQUIRY

Through the four meetings of the Task and Finish Group on this element of the enquiry, and the receipt of information outside of those meetings from those invited to attend, the Task and Finish Group Members consider that they are in a position to make the recommendations set

A.2 APPENDIX

out below which themselves are designed to meet the intentions set out in the “Aims and Objectives of the Enquiry” section above.

Unfortunately, the statistics for Familial Abuse were not available as incidents of Familial Domestic Abuse are not recorded. However, all types of Domestic Abuse were discussed at the meetings.

RECOMMENDATION(S) FROM THIS ELEMENT OF THE ENQUIRY

That the Resources and Services Overview and Scrutiny Committee be recommended to approve the following on the basis that the relevant recipient of the approved recommendation will have the recommendation concerned referenced to them:

- (1) Analyse data from the National Centre for Domestic Abuse in relational to familial abuse;**
- (2) Ensure the Community Safety Partnership and the Council’s Community Safety Team advocate and champion where possible local support services for survivors of domestic abuse;**
- (3) Make sure the County Wide Strategy for tackling Domestic Abuse reflects the new Authorities once Local Government Reorganisation and Devolution is complete;**
- (4) Ensure training about types of domestic abuse and how to signpost to domestic abuse support services are available to Reception and Admin staff across the Council;**
- (5) Advocate and champion where possible local refuge services for domestic abuse survivors and their children;**
- (6) Community Safety Partnership to encourage schools to take up the sessions provide by the Police and Fire Joint Education Team; and**
- (7) Encourage Tendring Secondary schools to participate in the Stronger Together Show 2025 funded by Tendring District Council (Link below)**

https://youtu.be/aAZ73nXbY_c

CHRONOLOGY

The enquiry was (and its terms of reference were) approved by full Council on 6 August 2024.

Between 12 November 2024 and 7 January 2025, the Task and Finish Group undertook the first element of its enquiry and this related to understanding if there has been an increase or decrease in reports of Domestic Abuse and compare data sets. Also to discuss information provided by the Community Safety and Safeguarding Manager, such as the support services available to Tendring residents, information about the Southend, Essex and Thurrock Domestic Abuse Board (SETDAB) and the SET DAB Annual Report.

In that phase of the entire enquiry the Task and Finish Group met twice. As such, this phase of the enquiry commenced with meeting three of the Task and Finish Group.

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The third meeting of the Task and Finish Group took place on 13 March 2025 (External Agencies Presentations).

The fourth and final meeting of the Task and Finish Group took place on 3rd April 2025.

DETAILED FINDINGS OF THE ENQUIRY

Through the several meetings of the task and Finish Group it received a great deal of information around the issue of Domestic Abuse. This included the following grouped under the sub-headings shown:

Statistics – Essex Police Recorded Incidents of Domestic Abuse – Comparison September 2023 – September 2024.

Victim Based Crime		Offences			
Crime Type		2023	2024	# diff.	% diff.
- Stalking and Harassment		1942	1696	-246	-12.7

Victim Based: Under Reported		Offences			
Crime Type		2023	2024	# diff.	% diff.
Domestic Abuse		2449	2648	199	8.1
- High Risk Domestic Abuse		218	259	41	18.8
- Medium Risk Domestic Abuse		281	501	220	78.3
- Standard Risk Domestic Abuse		1805	1794	-11	-0.6
- No Risk Assessment		145	94	-51	-35.2

Statistics – Essex Police Recorded Incidents of Domestic Abuse – Comparison November 2023 – November 2024

Victim Based Crime		Offences			
Crime Type		2023	2024	# diff.	% diff.
Domestic Abuse	2616	2390	2616	226	9.5
- High Risk Domestic Abuse	271	198	271	73	36.9
- Medium Risk Domestic Abuse	515	318	515	197	61.9
- Standard Risk Domestic Abuse	1737	1675	1737	62	3.7
- No Risk Assessment	93	199	93	-106	-53.3

Support Services available in Tendring

A full list of support services and details were sent to members of the Task & Finish Group including services for:

- Older People experiencing Domestic Abuse
- Children and Young people experiencing Domestic Abuse
- Drug and Alcohol related Domestic Abuse
- Gypsy and Traveller Communities

A.2 APPENDIX

- Male Victims of Domestic Abuse
- Honour Based Abuse (including FGM)
- Stalking

Following a robust procurement process, the following four providers have been confirmed to deliver domestic abuse support services in Essex, Southend and Thurrock from 1 April 2025:

- Safe Steps
- The Next Chapter (East of England)
- Changing Pathways
- Cranstoun Services Ltd.

The Next Chapter, Safe Steps and Changing Pathways are existing providers of domestic abuse services and will be working as a consortium called Ending Violence in Essex (EVIE). EVIE will deliver support for both adult and child victims. Cranstoun Services Ltd is an incoming provider and will deliver perpetrator support.

Building on the strengths of current services, and jointly commissioning services with partners, will help ensure there is consistent, high-quality support in place across Essex, Southend and Thurrock.

Essex Compass will remain the single point of access for people needing support across Greater Essex up to and from 1 April 2025. Therefore, colleagues will need to continue using the current referral process. Perpetrator support will also be accessed through Essex Compass from 1 April 2025.

The Nest at Next Chapter provides specialist safe accommodation in North East Essex for women who are experiencing domestic abuse and substance use challenges. Delivered by Next Chapter, and supported by Open Road, The Nest offers a secure, trauma-informed environment where women can rebuild their lives with safety, stability, and support.

A full programme of support is usually around six months and residents will be supported with suitable ongoing housing options and will be provided with resettlement support, as well as longer term community support for those settling locally.

Southend, Essex and Thurrock Domestic Abuse Board – Information and Annual Report

The link below is for the SETDAB Annual Report

<https://setdab.org/wp-content/uploads/2021/09/SETDAB-Annual-Report-2020-2021-Web-Version-1.pdf>

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The SETDAB Strategy for 2020 – 2025 has five outcomes. A new strategy for 2025 – 2030 is being developed.

2020-2025 Strategy and our 5 outcomes:

The Southend, Essex and Thurrock Domestic Abuse Strategy was launched in May 2020 and the five outcomes identified within the Strategy are the focus of our work. All our outcomes have delivery plans in place which are monitored by SETDAB.

Outcome 1:

Children and young people can recognise and form healthy relationships.

Outcome 2:

People experiencing and at risk of experiencing domestic abuse are supported to be and feel safe.

Outcome 3:

Everyone can rebuild their lives and live free from domestic abuse.

Outcome 4:

Supporting and disrupting perpetrators to change their behaviour and break the cycle of domestic abuse.

Outcome 5:

Communities, professionals and employers are able to recognise domestic abuse at the earliest opportunity and have the confidence to take action.

Presentations from Essex Police (verbal presentation), Next Chapter (Powerpoint) and The Change Programme (they were not available to attend on the day but sent a video clip of their service area).

[Who are NEXT CHAPTER.pptx](#)

<https://youtu.be/dwFFS9FvP18>

WENDY BRYNE – ESSEX POLICE

Wendy is responsible for the Domestic Abuse Problem Solving Team (DAPST) which are based as part of the North LPA (Local Policing Area) this team covers the Tendring District.

The team was set up to target high risk offenders who have been identified as a potential domestic homicide perpetrator.

There are four main strands that the team deal with:

- **Puffin nominals**

- The nominals are run through an algorithm and if the nominal meets different parts of the algorithm, the system will flag them up. (This will then allow the team to manage the perpetrator and disrupt them so they are less of a risk to their victims.)

- **MAPPA (Multi-Agency Public Protection Arrangements)**

- MAPPA meetings take place weekly to discuss high-risk offenders that are coming out of prison being released back into the community and their trigger offence is DA (Domestic Abuse) related.

A.2 APPENDIX

- At present, Wendy manages 18 MAPPA and 48 Puffin Nominals in North LPA

- Orders

- Police Officers can utilise certain orders for victims of domestic assault. Officers can use orders that assist with the management of victims and defendants.
- DVPN (Domestic Violence Protection Notice) which can become a DVPO (Domestic Violence Protection Order), once the order is granted at the court, they usually last for around 28 days and are designed to give the victim space from the perpetrator.
- DAPST Officers police the orders and make sure that they are being adhered to.
- Similarly, there are also Stalking Protection Orders. This is often a trigger offence in a Domestic Homicide Review (DHR).

- Clare's Law/Domestic Violence Disclosure Scheme

- Police have a power where they can go and tell somebody that their new partner have a history of domestic abuse convictions.
- Gives people the chance to make informed decisions and then the DAPST can offer ongoing safeguarding and protection going forward.

DAPST are a team of 19 in the area. Essex Police lead the way with regards to Problem Solving Domestic Abuse cases, they set the precedence for all the other Police forces how they deal and manage domestic abuse perpetrators.

DAPST do not get involved in investigation of cases, that is a different team within Essex Police.

QUESTIONS:	ANSWERS:
<i>Is there a big case load in the Tendring area that TDC Officers and Councillors should be aware of?</i>	<p><i>If we look at MAPPA Cases, which are people coming out of prison and being put on Probation, Tendring have 4 out of 13. That is a significant proportion just for Tendring alone.</i></p> <p><i>DAPST probably split 50/50 of their resources between Colchester and Tendring. There is a sub-office in Clacton which Officers can work out of and integrate with the teams that are at that police station, they will brief other teams on the people that are being targeted.</i></p>
<i>How does being a 'disrupter' work?</i>	<p><i>The team give a perpetrator the chance to change their behaviour.</i></p> <p><i>We current use the Change Project who work with offenders to find out why they offend and how to stop it from happening. They identify the risk factors/trigger points and they run a Government approved programme that enables them to work with these people in hope that they can turn their behaviour around. Sometimes punishment is not the answer.</i></p> <p><i>There are offenders out there that do not want to engage and get the help and as soon as DAPST know they have a new partner then someone from DAPST will go to their house and give them the Clare's Law disclosure.</i></p>

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	<i>We also use covert tactics.</i>
<i>Once on licence and offenders fail to go to their approved premises, do you send them back to prison?</i>	<i>Probation will generate a warrant. DAPST will have a covert team secretly watching the offender, Probation will confirm the warrant has been secured, the covert team are told that they can arrest the offender.</i>
<i>Do you co-manage offenders that come from other areas outside of Essex?</i>	<i>Yes, if they are a MAPPA nominal. As a Puffin nominal, not every police force has a DAPST team yet so do not have Puffin nominals. As long as the perpetrator has a domestic abuse offence then it would be flagged up to the team in the area.</i>
<i>What have you found that causes people to commit domestic abuse?</i>	<i>That is difficult to answer. Around 30% of domestic abusers have been in a house that has had domestic violence happen historically. Or have been in a abusive relationship during their childhood. A lot of the time, it comes down to power and control. The DAIT (Domestic Abuse Investigation Team also deal with incidents of Grooming, Love Bombing and other types of narcissistic behaviour (the sort of behaviour that Andrew Tate portrays). Nikki from Next Chapter mentioned adverse childhood experiences and perpetrators tend to build a unhealthy co-dependant relationship with their victims.</i>
<i>Can you see a pattern of behaviour?</i>	<i>You usually can yes. There is a training package within Essex Police outlining signs and symptoms. In the case of stalking, stalkers tend to mirror their patterns of behaviour for example leaving flowers / gifts, hacking accounts, using Spyware or infiltrating victims social media.</i>
<i>Do you find that offenders are being released too early?</i>	<i>We manage them when they come and if they breach their licence then they are sent back to prison and DAPST have not received any push back on being sent back to prison if they breach their licence.</i>
<i>Do you get a lot of female violence against men?</i>	<i>There is not a lot of female violence, but they are treated the exact same.</i>

NIKKI TAYLOR – NEXT CHAPTER:

- ▶ Vision: Life without Domestic Abuse
- ▶ Mission: Providing rapid responses to domestic abuse that increase safety for all victims, enabling them to rebuild their lives & create lasting change. Raising awareness through education, training & partnerships in our community
- ▶ History: We have been in existence since the early 70's when the feminist movement began to take action towards creating safe space for women who were being abused by their husbands. Formerly known as Colchester and Tendring Women's Refuge.
- ▶ Today: in 2019 we underwent a rebrand and became known as Next Chapter. We support survivors regardless of their gender and we work with clients in the community as well as those seeking refuge. We became the PFCC commissioned service in 2019 to provide domestic abuse support to anyone living across North and Mid Essex

What services do we provide?

- ▶ Refuge
 - ▶ 12-unit standard refuge accommodation
 - ▶ 9-unit recovery refuge
 - ▶ Dispersed Housing

A.2 APPENDIX

- ▶ Resettlement Worker
- ▶ Community outreach
 - ▶ High risk – IDVA support
 - ▶ Medium and standard risk - DAP support
 - ▶ RISE programme / Ready to RISE guided learning programme
- ▶ Children Young Person's Team
 - ▶ Family Practitioners – one to one recovery with the children alongside parenting support to the non-abusive parent
 - ▶ YIPVA – support high risk young people to reduce risk
 - ▶ Hand in Hand – parenting / child programme TRIBE – child only programme
 - ▶ CAPVA – Child to parent violence programme

What support do we offer?

- ▶ Walk alongside our clients to offer client led support which is both practical and emotional and is specifically about meeting their needs in relation to what is happening and where they want to do.
 - ▶ Trauma informed and support therapeutically
 - ▶ Validating and allowing clients to feel safe and able to build trust
 - ▶ Empowering survivors to engage in a journey of change – strengths-based approach
- ▶ Advocacy to ensure clients' needs and circumstances are recognised and considered.
 - ▶ Elegantly challenge victim blaming
 - ▶ Education around what is domestic abuse and the impact of trauma and how this can present
- ▶ Risk led.
 - ▶ Ongoing risk assessment monitoring and safety planning
 - ▶ Safeguarding
- ▶ Practical support
 - ▶ Housing, benefits, legal signposting, mental health signposting

QUESTIONS:	ANSWERS:
<i>Has the refuge seen an uptake in victims that would become homeless?</i>	<p><i>Being homeless can be a barrier as to why people do not leave abusive relationships because they have got nowhere else to go. They do not have the financial ability to do so and so on. Domestic abuse can be an imbalance of power. One person going into a relationship that wants all of the power and holds all the cards and then the other who does not have an equal say or have the ability to have their voice heard.</i></p> <p><i>There are far more routes for people to report domestic abuse these days and to get advice and guidance which is now at the fingertips of people to get the support they need and to get them to a place where they do feel okay to seek professional support.</i></p>
<i>Are you on the frontline app?</i>	<i>Yes, we are.</i>

A.2 APPENDIX

<i>Do you get the children that abuse parents that have no domestic abuse history in the household?</i>	<i>We do not look at that data so that could not be answered correctly but from a professional opinion, usually some sort of violence or abuse in their childhood has happened.</i>
<i>How is the refuge funded?</i>	<i>It is funded by Councils, but it is funded almost on a reciprocal arrangement. It is County funded and also part of the PFCC funding as well as it runs the domestic abuse services. Refuge space is covered by housing benefits. People in employment would have to pay themselves.</i>
BACKGROUND PAPERS AND PUBLISHED REFERENCE MATERIAL	
None	
APPENDICES	
None	
REPORT CONTACT OFFICER(S)	
Name:	Leanne Thornton
Job Title:	Community Safety & Safeguarding Manager
Email/Telephone:	lthornton@tendringdc.gov.uk / 01255 686353 / 07850 090670

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COMMUNITY LEADERSHIP OVERVIEW AND SCRUTINY COMMITTEE

15 APRIL 2025

REPORT OF THE ASSISTANT DIRECTOR (CORPORATE POLICY & SUPPORT)

A.3 HEALTH AND WELLBEING STRATEGY (Report prepared by Ian Ford)

PURPOSE OF THE REPORT

To enable the Committee to consider the Council's draft Health and Wellbeing Strategy, as outlined in the appendix to the Portfolio Holder report submitted to Cabinet on 21 February 2025.

EXECUTIVE SUMMARY

In accordance with the Constitution:-

Article 6.02 Terms of Reference (extract):

(i) Community Leadership Overview and Scrutiny Committee

To perform the role of Overview and Scrutiny and its functions in relation to:-

- Community Leadership developing the external focus of overview and scrutiny on “district-wide” issues’ (and where appropriate sub regional, regional and national issues), in particular through collaborative work with local partner authorities, providers, stakeholders and members of the public.
- Approval of discrete researched and evidenced reviews on the effectiveness of partnership operating in the area with particular focus on:
 - Community Safety
 - **Health and Well-being**
 - Economy, Skills and Educational Attainment
- Community engagement, development and empowerment
- Economic Development, Regeneration and Freeport East
- Leisure and Tourism (except matters relating to budgets)
- Planning & Building Control and Strategic Planning (including the Local Plan)
- Emergency Planning
- To scrutinize/review the outcomes and implications for the Council of its financial support to community organisations and also from its receipt and use of funds received from local partner organisations

As such the Committee will look at the Council's draft Health and Wellbeing Strategy which was approved for consultation purposes at the formal meeting of the Cabinet held on 21 February 2025. At that meeting (Minute 134 refers), it was:-

“RESOLVED that Cabinet –

- (a) approves the Health and Wellbeing Draft Strategy for public consultation;*
- (b) agrees that Officers, in consultation with the Portfolio Holder for Partnerships, initiate a minimum eight-week consultation process and seek stakeholder comment on the Health and Wellbeing Draft Strategy; and*
- (c) agrees that following that consultation the final Health and Wellbeing Strategy be presented to Cabinet for its approval and adoption.”*

As a stakeholder, this Committee is now being consulted for its comments.

RECOMMENDATION

That, subject to the Committee’s consideration of the report and its appendix provided, that its recommendations and/or comments et cetera (if any) to Cabinet and/or the Portfolio Holder on this matter be determined.

BACKGROUND PAPERS

Published Minutes of the formal meeting of the Cabinet held on 21 February 2025.

INVITEES

- Partnerships Portfolio Holder
- Head of Health and Partnership

APPENDICES

Appendix A – Report and Appendix of the Portfolio Holder for Partnerships (A.7) - Health & Wellbeing Draft Strategy for Tendring which was submitted to the formal meeting of the Cabinet held on 21 February 2025.

A.3 APPENDIX A1

CABINET

21 FEBRUARY 2024

REPORT OF THE PORTFOLIO HOLDER FOR PARTNERSHIPS

A.7 HEALTH & WELLBEING DRAFT STRATEGY FOR TENDRING

PART 1 – KEY INFORMATION

PURPOSE OF THE REPORT

To present a draft Health and Wellbeing Strategy for Cabinet approval to then be consulted on through a stakeholder and public consultation process.

EXECUTIVE SUMMARY

Cabinet is presented with a new evidence-based Health and Wellbeing Draft Strategy, to support delivery of the Council's priorities as set out in the Corporate Plan. This draft Strategy will set the direction for the Council's focus on supporting residents to live a healthier, independent and fulfilling life.

Evidence from data shows that although there are some improving figures, when compared to other areas in Essex, Tendring still has higher than average levels of certain preventable long-term conditions, poorer mental health, overweight/obesity and lower physical activity levels.

Adoption of this Strategy and the action plan within it, will help support partnership working to deliver improvements around the wider determinants of health in our area which will have a direct impact on health and wellbeing outcomes.

Taking into account the data and partner feedback as detailed in the draft Strategy, the following strategic objectives are considered key to improving the health and wellbeing of residents:

- 1. The Wider Determinants of Health*
- 2. Improving Wellbeing & Resilience*
- 3. Encouraging a healthier lifestyle*
- 4. Improve Long Term Condition Prevention and Management*
- 5. Suicide Prevention*

The draft Strategy is presented with an action plan, to impact on all of the objectives set out above. Although it will not be possible for the Council to fund all the actions listed, adopting an action plan will allow the Council to proactively look for external funding opportunities.

A key focus of this work is to ensure that all residents feel represented by the draft Strategy and are supported in living a healthier, independent and fulfilling life.

A.3 APPENDIX A1

This can be achieved by working closely with health partners to deliver initiatives that help to tackle some of our district's health needs. Understanding how the wider determinants of health can have a real impact on health outcomes is critical to improving the quality of life for many of our residents.

The draft Health and Wellbeing Strategy aligns with the Sport and Physical Activity Strategy. The feedback from the consultation showed that the majority of participants took part in 150+ minutes of exercise a week, using cycle paths, footpaths and recreation grounds. The main barriers to exercise were shown to be access to facilities close to where the participants lived. We will continue to work in partnership across the organisation to connect the health and physical activity agendas.

The draft strategy sets out a plan for considering funding some projects through the public health grant which is allocated by Essex County Council (ECC). Working within the agreed priorities within the grant, projects could be funded that deliver health improvements. We will share significant projects with our partners at the Community Safety Partnership and Health and Wellbeing Board to help facilitate success in delivery.

Subject to Cabinet agreement, it is important to seek comments on the draft Strategy from partners in the Health Alliance, the Community Safety Partnership and Health and Wellbeing Board, stakeholders and residents. This will ensure that partners can scrutinise, comment and make suggestions for the completed Strategy, prior to adoption.

Upon approval of the draft Strategy, an eight-week consultation process will begin. The findings of the consultation will be analysed and included when the final Strategy returns to Cabinet for adoption. This Strategy has been set without an end date but is due for review in three years' time.

Following an announcement by the Deputy Prime Minister in February 2025, six new areas have been confirmed to join the government's Devolution Priority Programme, which includes Greater Essex. As such, Mayoral elections will take place in 2026 and in addition, local government reorganisation is likely to be implemented in Greater Essex during the period of this Strategy. In terms of any reorganisation, the Strategy will allow for consistency whilst any new unitary authority considers its health and wellbeing priorities.

The Strategy aligns with partners such as ECC and the Alliance in terms of their emerging place plan approach and supports a wider determinants, prevention and early intervention model. This model recognises the Government's thinking around its 10 Year Health Plan which as one of the strands includes tackling the causes of ill health and therefore is well placed to ensure an ongoing consistent approach is maintained during any period of local government reorganisation.

RECOMMENDATION(S)

It is recommended that Cabinet:

- (a) approves the Health and Wellbeing Draft Strategy for consultation;**
- (b) agrees that Officers initiate a minimum eight-week consultation process and seek stakeholder comment on the Health and Wellbeing Draft Strategy, in consultation with the Portfolio Holder for Partnerships; and**

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(c) agrees that following consultation the final Health and Wellbeing Strategy is presented to Cabinet for approval and adoption.

REASON(S) FOR THE RECOMMENDATION(S)

For the Council to adopt a strategic approach towards Health & Wellbeing, to support local people and local communities to live healthier, independent and fulfilled lives.

ALTERNATIVE OPTIONS CONSIDERED

To work without an approved Health & Wellbeing Strategy. This would limit the ability to share our stated objectives with partners, and lead to a potential lack of direction for the Council's work on health & wellbeing. Without an adopted Strategy, and delivery plan, funding opportunities would be minimised.

PART 2 – IMPLICATIONS OF THE DECISION

DELIVERING PRIORITIES

Delivering the strategic objectives and accompanying targets set out in the delivery plan will impact on the following themes, from the Council's Corporate Plan:

- Pride in our area and services to residents.
- Championing our local environment
- Raising aspirations and creating opportunities.
- Working with partners to improve quality of life.

As a Community Leader the Council will support, influence and facilitate improved health and wellbeing across the district. Through the consultation process, it is imperative that the views of residents, organisations and local businesses are taken into consideration in the formation of the final Strategy.

In addition, the Health & Wellbeing Draft Strategy should be considered in conjunction with a range of approved and emerging Council strategies and a range of national and regional strategic documents.

OUTCOME OF CONSULTATION AND ENGAGEMENT (including with the relevant Overview and Scrutiny Committee and other stakeholders where the item concerns proposals relating to the Budget and Policy Framework)

The important link with the priorities within the Health and Wellbeing Alliance and the Essex Health and Wellbeing Strategy has been considered in the production of this draft Strategy.

The next stage will be to consult with a full range of partners and the wider community on the content. The outcome from that consultation process and respective changes made as a result, will be set out in the covering report when the final Strategy returns to Cabinet for adoption.

LEGAL REQUIREMENTS (including legislation & constitutional powers)

Is the	Yes	If Yes, indicate which	X Significant effect on two or
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recommendation a Key Decision (see the criteria stated here)		by which criteria it is a Key Decision	more wards <input type="checkbox"/> Involves £100,000 expenditure/income <input type="checkbox"/> Is otherwise significant for the service budget
		And when was the proposed decision published in the Notice of forthcoming decisions for the Council (must be 28 days at the latest prior to the meeting date)	

Partnerships and Community Engagement is one of the strands expected for demonstrating the Council's Best Value Duty under Local Government Act 2003. In the draft Statutory Guidance published in May 2024, government has described a number of expected standards for Councils to be meeting as a Best Value authority. Authorities should have a clear understanding of and focus on the benefits that can be gained by effective collaborative working with local partners and community engagement in order to achieve its strategic objectives and key outcomes for local people.

Key characteristics for Partnership and Community Engagement are:

- Early and meaningful engagement and effective collaboration with communities to identify and understand local needs, and in decisions that affect the planning and delivery of services; and
- Evidence of joint, planning, funding, investment and use of resources to demonstrate effective service delivery, but transparent and subject to rigorous oversight. The Council needs to be clear.

Through the consultation and engagement process on the draft Strategy, the Council needs to be clear what it is intending to be responsible for in delivery and areas it will work together with others to take forward.

The approval of a draft Strategy for consultation does not commit the Council to its aspirations and further decisions will be required within the Council's Constitution and governance framework to take the projects forward once adopted.

YES	The Monitoring Officer confirms they have been made aware of the above and any additional comments from them are below:
------------	--

The Local Government Association produced a Guide in September 2024 ***“Empowering healthy places: Unveiling the powers and practices of local councils in fostering healthy neighbourhoods”***. Extracts have been included to show the input local government can and should have in consideration to Health and Well-being practices.

The importance of health and wellbeing of the population has been recognised within Council duties and powers since the 19th century when reforms brought about by town planners and public health practitioners resulted in improved health and life expectancy. In 1848, a new

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Public Health Act was introduced which established local health boards to oversee a coordinated water, sewerage and drainage scheme to overcome the persistence of cholera outbreaks and prevent ill health. This was followed by the 1858 Local Government Act which extended the powers of these boards.

The later emergence and expansion of the NHS has meant that councils have a less direct role in tackling ill health. Healthcare is considered as a tool to treat illness, rather than a system that can create the conditions for people to be healthy and prevent illness in the first place.

The 2010 Marmot Review and [2020 update](#), drew attention to the flaws of this approach, which has contributed to declining life expectancy in some communities and specific groups and [widening health inequalities](#) across England. The Marmot Review significantly raised the profile of the 'wider determinants of health'. These are the social and economic conditions that influence people's health and wellbeing and are shaped by where and how we live. These wider determinants include factors such as having access to safe and secure housing, quality employment, access to green and open spaces and a sense of community.

The NHS was not set up to influence these wider determinants of health, however many can be influenced to some degree by councils. In recognition of this, all stakeholders who can influence the wider determinants of health must work together, expanding the definition of "healthcare" to capture activities and opportunities that can positively "create health". Creating health, as defined by Lord Nigel Crisp, former CEO of the NHS, "means providing the conditions in which people can be healthy and helping them to be so".

Councils are well placed to lead on health creation given their historic scope, current practices and potential. Councils have, for example, significant influence over our health through their planning functions. An objective of England's planning system, as defined by the [National Planning Policy Framework](#) (NPPF), is to 'support strong, vibrant and healthy communities'. Furthermore, public health powers were transferred to councils () from the NHS through the 2012 Health and Social Care Act. As a result, councils have a duty to take appropriate steps to improve the health of people in their area, through various powers and practices.*

Notwithstanding the extreme funding pressures being faced, and the need for this to be resolved to allow councils to realise their potential, reconsidering existing powers and practices available to local government through the lens of health creation, facilitated by strong leadership and partnership working that puts health and wellbeing first, has the power to create significant and positive change.

Health and Wellbeing can be wide reaching, and it is recognised as good practice to have a strategy showing how the Council wishes to contribute to this agenda and support decision making.

FINANCE AND OTHER RESOURCE IMPLICATIONS

With Local Authorities under increasing financial pressures and competing priorities for expenditure, it will not be possible for the Council to fund all the proposed actions in this draft Strategy. Adopting a final action plan however, will ensure the Council and other partners are able to maximise opportunities from emerging external funding bodies, as and when they become available.

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The adoption of an action plan will ensure the Council and partners, can move quickly in making cases to funders, that there is a considered, evidence-based plan to improving health inequalities, wellbeing and quality of life.

YES	The Section 151 Officer confirms they have been made aware of the above and any additional comments from them are below:
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There are no further comments over and above those already set out elsewhere within the report.

USE OF RESOURCES AND VALUE FOR MONEY

The following are submitted in respect of the indicated use of resources and value for money indicators:

A) Financial sustainability: how the body plans and manages its resources to ensure it can continue to deliver its services;	Although a delivery plan is identified in the draft Strategy, implementation will only proceed should funding be available.
B) Governance: how the body ensures that it makes informed decisions and properly manages its risks, including; and	Once adopted by Cabinet, each individual project will be subject to stand alone governance arrangements and in some cases, business plans. This will highlight any risks and financial resources, including sustainability.
C) Improving economy, efficiency and effectiveness: how the body uses information about its costs and performance to improve the way it manages and delivers its services.	This draft Strategy will ensure good value for money, by focussing attention on objectives approved by the Council.

MILESTONES AND DELIVERY

Following agreement by Cabinet to seek stakeholder comments on the Health & Wellbeing Draft Strategy through consultation process, the milestones will be as follows:

March 2025 Consultation Commences

May 2025 Consultation Closes

June 2025 Consideration of consultation responses

July 2025 Health & Wellbeing Strategy presented back to Cabinet with consultation responses and any changes made as a result.

ASSOCIATED RISKS AND MITIGATION

Risk: The delivery plan is unable to be implemented due to lack of funding.

Mitigation: It is clear in the draft Strategy that the implementation of the delivery plan is subject to funding, therefore the Council is not committed to delivery where there are no funds. Being part of the Health Alliance, and working closely with ECC Public Health team, means that opportunities for future funding are shared.

Risk: Health & wellbeing needs change at short notice.

Mitigation: The Covid 19 Pandemic highlighted how quickly priorities can change in health. However, the vision to ensure residents live a healthier, independent and fulfilled life will remain the same, and the delivery plan can be updated to reflect changing needs.

In addition, the Strategy focusses on a partnership approach which allows for a combined response to changing demands.

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EQUALITY IMPLICATIONS	
<p>Reducing health inequalities is an integral part of this draft Strategy as improving health in the most deprived communities and working in a partnership approach will help address inequality.</p> <p>Any significant changes to service provision can be considered through an equality impact assessment prior to implementation.</p>	
SOCIAL VALUE CONSIDERATIONS	
<p>The draft Strategy sets out the need to work closely with partners and the community through the adoption of a place-based approach. This will ensure that services and opportunities are delivered where they are most needed.</p> <p>The Strategy highlights the importance of the wider determinants of health such as housing and skills and employment which will help deliver improved social value and opportunity.</p>	
IMPLICATIONS FOR THE COUNCIL'S AIM TO BE NET ZERO BY 2030	
There are no risks associated with this Strategy	
OTHER RELEVANT CONSIDERATIONS OR IMPLICATIONS	
Consideration has been given to the implications of the proposed decision in respect of the following and any significant issues are set out below.	
Crime and Disorder	Close working links with Police through the Community Safety Partnership and Health & Wellbeing Board facilitates an understanding of the impact that Crime and Disorder has on Health and Wellbeing and the close links in respect of areas such as mental health. Work highlighted in the delivery plan can help seek to address some of these issues.
Health Inequalities	The draft Strategy recognises that whilst there are some areas of improvement in health data, health inequalities are still an issue in Tendring. The draft Strategy uses data in order to set objectives that will help to reduce the inequalities over time.
Subsidy Control (the requirements of the Subsidy Control Act 2022 and the related Statutory Guidance)	There are no subsidy control issues anticipated through this draft Strategy and any funding issued as a result, will be subject to competition and the Council's procurement rules and with reference to the Subsidy Control Act 2022 to ensure the Council is compliant. Allocation of any funding will also follow the external funding review approved by Cabinet in September 2024
Area or Ward affected	This draft Health & Wellbeing Strategy will impact on all wards in the District.

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PART 3 – SUPPORTING INFORMATION

BACKGROUND

Draft Health & Wellbeing Strategy

Since the last Strategy, Tendring has faced many challenges, such as the Cost of Living crisis and the Covid 19 Pandemic. Evidence shows that those living in the most deprived areas of England face the worst health inequalities, for example in relation to healthcare access, experience and outcomes.

There are some areas in Tendring with significant deprivation and 28% of Tendring's neighbourhoods (Lower Super Output Areas, or LSOAs) are in the most deprived 20% nationally.

Tendring District has the largest Old Age Dependency Ratio (OADR) compared to other areas in Essex with an estimated rate of 544 in 2019. Estimated figures up to 2034 indicate that this trend is forecast to continue. If a healthier lifestyle is not adopted, there is a risk that there will be more people living with long term conditions, and fewer people able to live healthy independent lives.

Data has identified that there are some areas of improvement in the health and wellbeing of residents. Most notably, the Health Index Score has improved from a score of 85 in 2015 to 93 in 2023.

Physical Activity levels in young children and adults has increased, and rates of overweight/obesity in reception age children and adults has fallen. However, the data also shows rates of overweight/obesity in year six age children continues to increase, and the number of residents living with certain preventable long term medical conditions is still high, when compared to other areas in Essex.

Looking across the system, it can be noted that the priorities set in partner strategies, there is a cross over with those identified as priorities for Tendring.

During the lifespan of the last Health and Wellbeing Strategy, the Partnership team have implemented a range of projects to help address health inequalities including:

- Seed funding the highly successful Park Run.
- Worked with the Sport England Local Delivery Pilot Scheme to deliver projects that encourage physical activity such as Pedal Power and Beat the Street. Other projects sought to tackle isolation and poor mental health such as Walton's Feel Good Choir.
- Set up Wellbeing Hubs in primary schools, improving resilience in young people.

These projects are ongoing and making real improvements to resident's health & wellbeing.

The Health and Housing Initiative funded jointly funded with the Health Alliance supported the provision of mental health nurses who can work alongside our housing team to address mental health issues identified as part of wider work.

The Council is committed to promoting health and wellbeing, and recognises that the wider

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determinants of health, such as socio-economic factors and the built environment, are likely to impact an individual behaviour. In turn this leads to poor lifestyle choices, resulting in poorer health.

Addressing the wider determinants of health and utilising this approach is likely to have the biggest impact on the health and wellbeing of our residents.

Many of the Council's services have a direct impact on improving health and wellbeing for example through delivery of good housing provision, physical activity opportunities or the provision of green space.

The Council has long-standing relationships with our partners through our local Alliance, Public Health and Active Essex. As a joint place-based approach develops around the wider determinants of health, building resilience in communities and supporting opportunities for a healthier lifestyle including those with long term conditions, there is huge potential for improving health and wellbeing.

The delivery plan within the Strategy highlights the potential activities that the Council can take including with partners to deliver improvements.

Devolution and Local Government Reform Implications

The Strategy is set to be reviewed within three years. Following the response from Government, Essex is now on the priority programme and devolution will occur during the period of this Strategy and local government reform (LGR) may occur which may impact on the Strategy.

In particular, devolution would see an elected mayor for Essex who would be the vice chair of the Integrated Care Board which oversees health and so may have a particular way in which they would seek to address health issues.

The Strategy has specifically not been provided with an end date which would have coincided with devolution and potentially LGR. This will allow some consistency to occur over and beyond the timescale of any potential local government changes. This will ensure that any new administration has time to consider if and how it wishes to amend any health and wellbeing approach.

Although it is not possible to determine what health and wellbeing priorities will be important following any possible local government changes, the Strategy takes a wider determinants approach which will support early intervention and prevention and is strongly aligned with our partners particularly in relation to the Alliance and Essex County Council's approach in terms of public health.

In addition, the Integrated Care Board for Suffolk and North East Essex under which the Alliance sits, is regarded as one of the country's leading ICB's developing innovative approaches which are followed elsewhere.

As part of the Government's 10 Year Health Plan, it is currently undertaking a public conversation to deliver a health service fit for the future. Within this the Government is considering three big shifts about how health is delivered and one of these is about a

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preventative approach to help people stay independent for longer.

The Strategy aligns to the approach by partners and is in line with current government thinking and therefore is likely to form the basis of any actions during and after any potential local government reform.

Colchester City Council as part of the Alliance are also aligned and committed to the developing place plan approach from the Alliance referred to within the Strategy which should help a consistent approach moving forward.

As part of the consultation with stakeholders and partners the approach within the Strategy can be verified or amended to ensure that it aligns with current partners thinking.

PREVIOUS RELEVANT DECISIONS

None

BACKGROUND PAPERS AND PUBLISHED REFERENCE MATERIAL

Essex Joint Health & Wellbeing Strategy [Essex Joint Health and Wellbeing strategy | Essex County Council](#)

APPENDICES

Appendix A: Health & Wellbeing Draft Strategy for Tendring

REPORT CONTACT OFFICER(S)

Name	John Fox
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Tendring
District Council



Image

Tendring Health & Wellbeing Strategy



CONTENTS

1. Foreword
2. Executive summary
3. Why we need a strategy
4. Tendring population health
5. Partnership working
6. Corporate perspective
7. Strategic objectives
8. Strategic priorities and delivery plan

1. Foreword



This new Health and Wellbeing Strategy seeks to set out how, by working with partners, we can help deliver improvements to the health and wellbeing of our population; recognising the challenges, but at the same time appreciating the strong assets we have in terms of our place, our communities and our partners.

We know that our population faces challenges in terms of their health and wellbeing; for example increasing numbers of older residents, deteriorating mental health, increasing obesity and a growing need for people to be more active. This is often exacerbated in our most deprived communities.

However, at the same time there is huge opportunity with some of the best open space and coastline in the County, a thriving community sector and a partnership approach which is developing a preventative place-based agenda to protect our communities going forward.

The Strategy aligns with the Council's Corporate Plan and wider strategies including the Sport and Activity Strategy and the Economic Development Strategy. It also aligns with the key strategies of our partners including the Joint Forward Plan in our Local Health Alliance and the Joint Health and Wellbeing Strategy developed by Essex County Council. With everyone striving to work together, towards the same priorities and objectives, we can better improve the quality of life for our residents.

To be effective any actions need to be evidence based and this Strategy is firmly based on local insight and knowledge identified by the Council and its partners.

The opportunity offered by partnership working with the North East Essex Health and Wellbeing Alliance (The Alliance) provides a powerful basis to drive change. The Alliance sees a number of key organisations coming together as partners to support the health and well-being of the communities in our place and this Strategy feeds in to and supports the shared objectives within the Alliance.

In particular, I welcome the emerging Alliance Place Plan which sees a focus on the wider determinants of health to ensure we can start to address some of the issues causing ill health using an early intervention and preventative approach.

There are welcome positive results for our District, in particular the continued increase in the Health Index score for Tendring. This Strategy seeks to build on and help support a sustainable change in the Health Index, and to see improvements in the healthier life expectancy of our residents.

The Council's Health & Wellbeing Board has a collaborative approach to addressing the wider determinants of health and has been joined with the Community Safety Partnership in recognition of the shared agenda and incredibly close links between community safety and health and wellbeing.

As already mentioned, this strategy aligns with the Council's Sport and Activity Strategy and clearly identifies the importance of physical activity and the contribution it can make to overall health and wellbeing and wider benefits. Similarly, there is close alignment with our Economic Development Strategy and a clear understanding that improving attainment, skills and employment directly affects the long-term improvement of health and wellbeing for our residents.

There are already many great examples of how a partnership approach to address the wider determinants of health can make a real change to our communities, an exemplar being the Essex Pedal Power scheme which has seen in excess of 2000 bikes being given away and has led to increased activity, employment opportunity, reduced social isolation and increased resilience.

This Strategy seeks to build on these great examples and deliver an early intervention and preventative approach to support the health and wellbeing of our communities.

I recognise with devolution now approaching and the potential for local government reform as well that they may impact on the Strategy as different arrangements for local government come into place. However, the aligned partnership approach including the emerging 10 year place plan from the Alliance means an early intervention, preventative approach focusing on the wider determinants can be implemented.

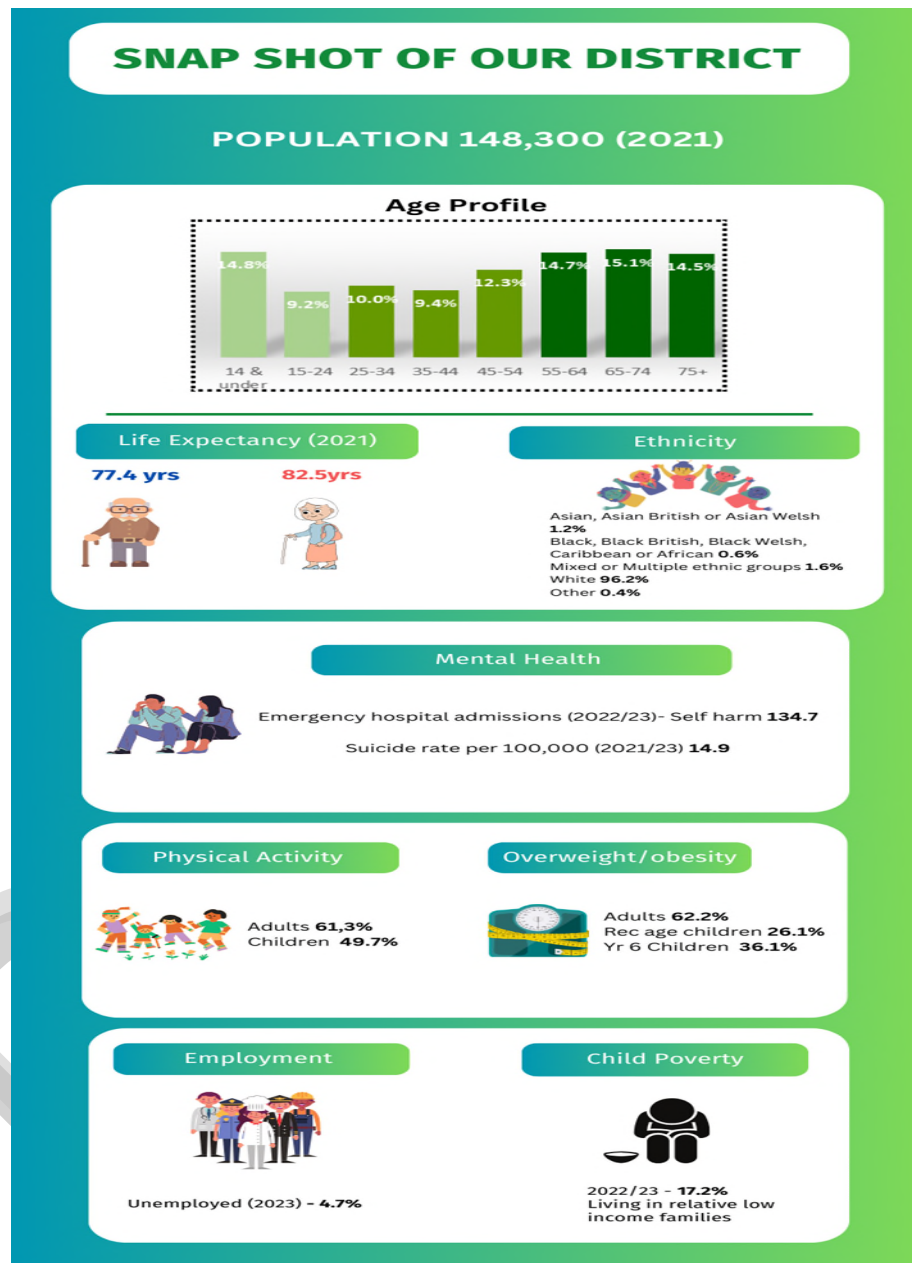
This is consistent with current Government thinking within their 10 Year Health Plan that recognises the importance of prevention. This means the Strategy is well placed to provide consistency over that period of local government reorganisation.

Councillor Gina Placey

Portfolio Holder for Partnerships

and Chair of the Tendring Community Safety Partnership and Health and Wellbeing Board

IMAGE- Tendring



Data correct at time of publication

2. Executive Summary

The Health and Wellbeing Strategy sets out how we can improve the health and wellbeing of Tendring residents, and in doing so help residents to lead a healthy, fulfilled and independent life for longer.

Tendring is a great place to live and work, with an abundance of assets including 36 miles of outstanding coastline with stunning beaches and long stretches of promenades, allowing free access to outdoor activity.

The coastline is a significant draw for tourists which means there is a thriving tourism industry, increasing footfall in the area, and offering opportunities for employment.

However, there are still many challenges such as lower levels of physical activity, increased levels of overweight and obesity, and more people living with long term conditions, particularly in Clacton and Harwich, than other areas in Essex.

The latest data shows only a 3.84% increase in the average Gross income when compared to the previous year. Taking into consideration the much higher cost of living, there are concerns that the number of residents who experience poor mental health, including those for the first time, will increase.

With the high proportion of older people in the district, and a lower than average healthy life expectancy, residents may live for many years in poor health.

There are wider concerns around those in employment, transport barriers and deprivation, there is an increased risk of isolation, contributing to poor mental health.

The Chief Medical Officers Annual Report 2021 into coastal communities highlighted some of the issues that face residents living on the coast. Some of the major points from the report which are clearly demonstrated within Tendring include older people retiring to the area who have more and increasing health problems. However, the same healthcare provision is not available in the areas they retire to when compared to the more urban areas they originated from.

“The prevalence of multimorbidity (people with more than two illnesses or diseases) is between two and three times greater in the plus 75-year-old population relative to working age adults, and an ageing population will have a greater health and care need”

North East Essex Integrated Care Board Joint forward plan 2024-2029

The report highlights that, despite the significant efforts of local leaders, coastal communities across the country continue to have a high burden of health challenges across a range of physical and mental health conditions, often with lower life expectancy and higher rates of many major diseases.

Exacerbating this is the difficulty of attracting NHS and social care staff to work in peripheral areas like Tendring. Overall coastal communities have 14.6% fewer medical trainees, 15% fewer consultants and 7.4% fewer nurses than the national average even though the healthcare needs are greater.

As identified for wider coastal communities, Tendring has an oversupply of guest houses which have now become houses in multiple occupation (HMOs) where there is a concentration of deprivation and ill health. HMOs also tend to encourage the migration and concentration of vulnerable people often with multiple and complex health needs.

“Overcrowding can lead to increased rates of intestinal and respiratory infection and risks to mental health from frequent sleep disturbance as adults share beds or bedrooms with children”. *The Marmot Review 2010- 10 years on report*

There are often significant issues in relation to transport opportunities, which may also limit job opportunities. Attracting staff can be difficult in peripheral areas, and this peripheral nature can also shorten catchment areas for health services. However, the report also identifies that there are benefits in terms of living near to the coast with better access to outdoor space for exercise, social contact and lower air pollution.

Despite these challenges, and as a result of investment, and a desire to think differently where needed, there is much to feel optimistic about.

There are strong communities, and an improving Health Index, (a measure of health in our area), which is encouraging to see.

The Council is committed to promoting health and wellbeing, and recognises the role it plays in addressing the wider determinants of health through its core business:
 Developing a positive socio-economic environment through employment and skills creation and supporting wellbeing in schools to encourage learning.
 Improving the built environment by supporting affordable housing provision and addressing poor housing.
 Encouraging a healthier lifestyle through access to leisure centres, including those in poorer health through the Back to Health Scheme.

Addressing these wider determinants of health is likely to impact individual behaviours, including better lifestyle choices, leading to improved health. This may have the biggest impact on the health and wellbeing of our residents.

The Council has long-standing relationships with our partners through our local Alliance, Public Health and Active Essex. As a joint place-based approach develops around the wider determinants of health, building resilience in communities and supporting opportunities for a healthier lifestyle including those with long term conditions, there is huge potential for improving health and wellbeing.

It is proposed that this Strategy will be reviewed in three years' time in 2028 to ensure it is still current.

Vision

To support residents to live healthier, fulfilled and independent lives for longer.

IMAGE

3. Why we need a Strategy

Tendring has strong assets in terms of its strong communities. A diverse and great place to live with a stunning coastline which provides great access to beaches, walks along miles of promenade, cycle paths and coastal towns. The more rural areas of the District offer beautiful open spaces and parks.

There are also some excellent potential employment and skills opportunities developing, including the Garden Community development to the west of the district, and Freeport East, which will have its main hub in Harwich.

At the same time, there are some significant challenges facing the area, and since the last strategy in 2018 there have been many challenges that impact on the health and wellbeing of residents.

The impact of the Covid 19 pandemic in terms of social isolation, deconditioning and mental health has highlighted the need for increased support and development of community resilience. The increased cost of living has had a significant impact on families who are already struggling to make ends meet, as well as others, who find themselves struggling for the first time.

Tendring is now in the bottom 10% of most deprived Lower Tier Local Authorities and is the only one in Essex in this category.

Although the latest data also shows a 3.84% increase in the average gross income on the previous year, this needs to be considered against the significant cost of living increases. The average salary within Tendring of just over £31,000 is 6.5% below the average in the UK. Tendring has the highest percentage of jobs (20%) with pay at two thirds below UK hourly gross median pay.

Tendring has real challenges especially in coastal populations, with Bluehouse ward having 25.2% of children living in child poverty (the proportion of children living in households with income less than 60% of the national median). Within Harwich and Kingsway it is 23.2%.

Evidence shows that those living in the most deprived areas of England face the worst health inequalities, especially in relation to healthcare access, experience and outcomes.

This Strategy will work alongside other strategies and policies, both in place, and emerging and with reference to those strategies of our partners.

The Council's Corporate Plan identifies the importance of working with partners to help deliver safer, healthier, well connected and inclusive communities.

This Strategy will highlight how the Council can work with its partners to deliver a preventative and wider determinants approach, which will be based on data and insight to ensure the approach is targeted. As part of this, maintaining a flexible approach to adapting to changing circumstances will be crucial to success.

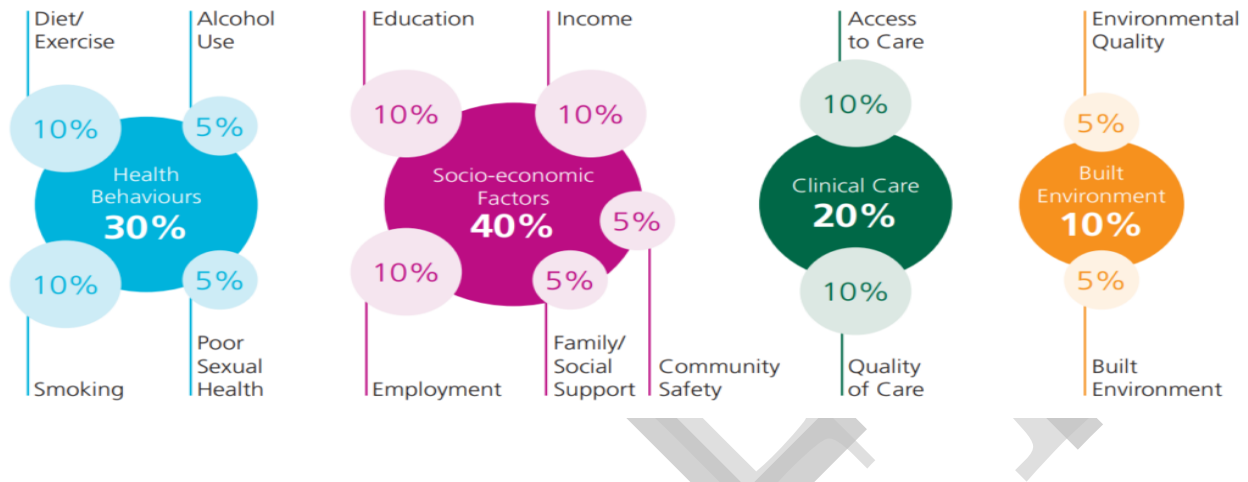
This Strategy aligns closely with The Essex Joint Health & Wellbeing Strategy 2022-2026 and wider Council strategies, for example the Sport and Activity Strategy as physical activity is a critical wider determinant of health. Providing support to residents to have the opportunity to undertake more activity will contribute to the effective prevention and management of many health conditions, as identified by the Department of Health, including those which most significantly affect our populations such as heart disease, diabetes, frailty, cancer and poor mental health.

Tendring has increasing numbers of those living with long term conditions, some of which are preventable. Through the Strategy the Council will work with partners to address the reasons and factors behind this, and look at how to prevent future incidences, whilst supporting those living with long-term conditions.

IMAGE- Tendring

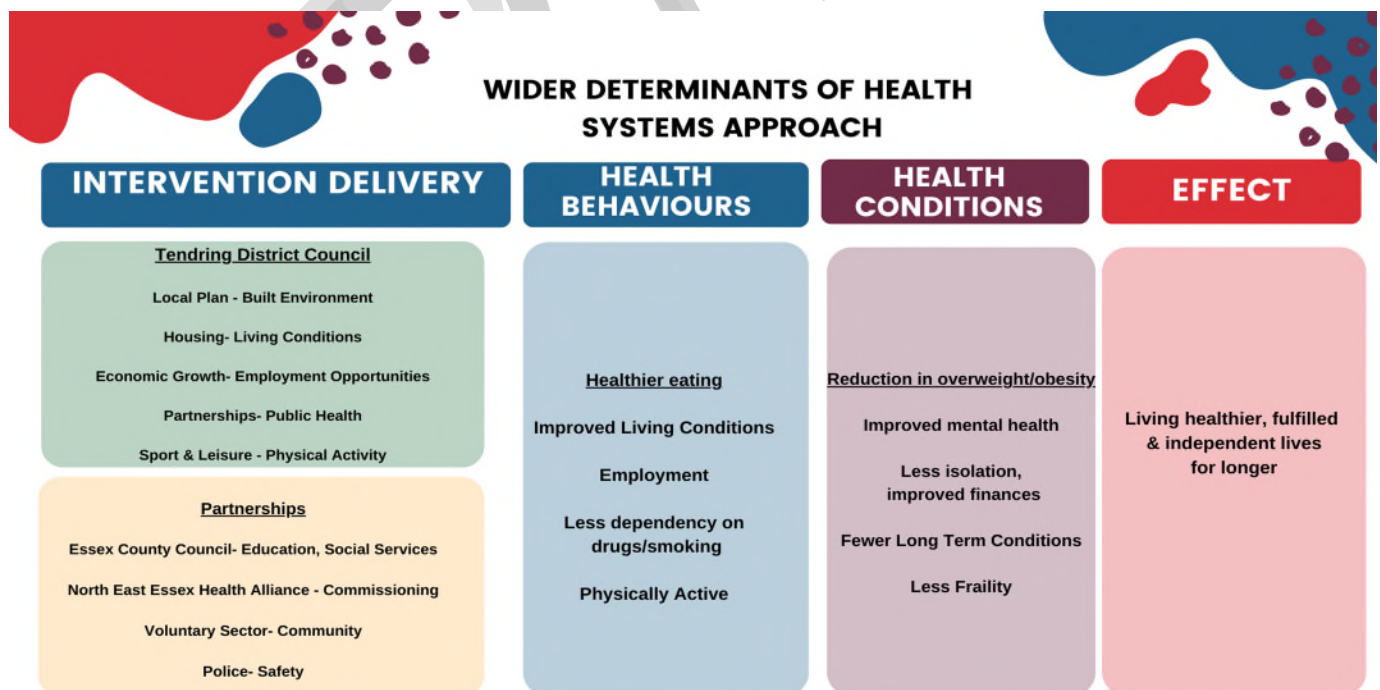
The Wider Determinants of Health

The Robert Wood Johnson Foundation approach to the social determinants of health provides a framework which recognises the contributing influences on health – the causes of the causes.



The mechanisms by which the wider determinants influence both mental and physical health can be complex. The Health Index, which is now improving in Tendring, demonstrates that there is no single solution, however improvements are possible through a series of diverse interventions.

These interventions are across a wide number of our partners, and we will seek to work together on shared objectives to make a real difference.



The use of data in each area will help address where the focus will be seeking to address challenges, building on existing success and to address health inequality.

Socio-economic Factors		
Education	Unemployment	Income
KS1 reaching good level of development 2022 51.1% 2023 55.7%	Age 16-64 years unemployment 2022 4.6% 2023 4.7%	Ave amount of money remaining after paying direct and indirect taxes and receiving benefits 2019 £19,000 2021 £19,916
KS2 higher level in reading, writing & Maths 2022 45% 2023 52.0%		
KS4 achieving grades 9-4 in Eng & maths 2019 51.5% 2022 55.1%		
Sources :JSNA Search Datasets Essex Open Data Socioeconomic – Education Socioeconomic - Employment Socioeconomic - Income Data correct at time of publication		
Health Behaviours		
Lifestyle		Dependencies
Overweight/Obesity	Physical Activity	Population of Smokers
Reception age children 2022/23 24.9% 2023/24 26.1%	Children & Young adults 2021/22 43.7% 2022/23 49.7%	2021/22 15.4 2022/23 11.3
Year 6 Children 2022/23 39.4% 2023/24 36.1%	Adults 2022/22 63.5% 2022/23 61.3%	Admission episodes for alcohol related conditions 2021/22 449 2022/23 426
Adults 2021/22 64.5% 2022/23 62.2%		Deaths from drug misuse 2019/21 7.2 2020/22 6.9
Sources JSNA: Search Datasets Essex Open Data Health Behaviours- Obesity Health Behaviours Diet & Exercise Health Behaviours Tobacco Use Health Behaviours Drug & Alcohol Use Data correct at time of publication		

IMAGE**4. Tendring Population Health**

The population within Tendring is growing and has expanded by 7.3% since the last census to 148,300 residents.

The majority of the population live in the coastal communities around the fringe of the district.

The Government's new mandatory housebuilding targets for local authorities will require the Council to plan for significant housing growth through the review of its Local Plan at an average rate of 1,034 homes a year, which could see the rate of population growth increase substantially in future years.

Tendring has the highest percentage of residents aged 65 and over, at over 30.3%, compared to Essex at 29.5% and a national figure of 18%. This is expected to continue to rise to 32% over the next 10 years.

Correspondingly there are lower levels of children and young people (16%) and those between 16-64 (54%) compared to Essex (19% and 60% respectively).

28% of Tendring's neighbourhoods (Lower Support Output Areas (LSOA's)) are in the 20% most deprived nationally. Only 4.1% of residents live in the three least deprived groups, which compares to an average of 30% in other areas.

There has been an almost 20% increase in people claiming out of work benefits between March 2020 and January 2022.

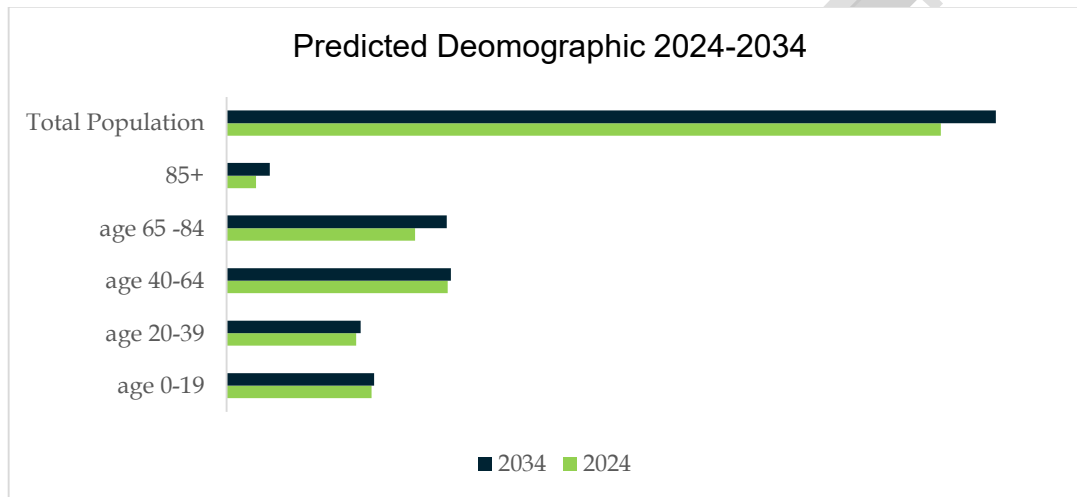
Tendring has high levels of residents living with long term conditions, some of which are life limiting, and in some cases preventable, such as COPD.

The smoking of tobacco and other substances are the main contributors to those experiencing COPD. The diagnosis of COPD at a much younger age is being reported by health partners, and this is linked to the smoking of other substances. This results in more people living in poorer health for longer.

This Strategy supports the themes of the Corporate Plan 2024-28 by supporting our communities through community leadership, and in the key areas of working with partners to improve quality of life promoting safer, healthier, well connected and inclusive communities.

In order to understand the current profile for Tendring, data from the following sources will be used:

- Census 2021
- Office for National Statistics (ONS) Health Index for England
- Essex Joint Strategic Needs Assessment 2022.
- The Health Index



Source: *The Office for National Statistics*

Life Expectancy

Healthy life expectancy is the number of years a baby born today is expected to live in 'good health', provided that current mortality and health trends remain fixed over their lifetime.

There is significant inequality in healthy life expectancy across Essex, and the gap between the areas with the highest & lowest healthy life expectancy is widening over time.

Tendring has the highest under 75 mortality rates in Essex at 388 per 100,000 population.

The Suffolk and North East Essex Integrated Care Board Joint Forward Plan identifies the reduced life expectancy across the wider area, that those living in the most deprived wards are experiencing, compared to those in the least deprived wards, as on average 7.4 years for men and 5.9 years for women.

The latest figures for 2018-2022 show that the **healthy life** expectancy for males in Tendring is 61.09 and for females is 63. These figures are below the England average.

Taking into consideration that the life expectancy for males is 77.4 this means that men in Tendring are likely to live for approximately 16 years in poor health.

Although the life expectancy for females is higher at 82.5 for females, if the healthy life expectancy is 63 years, females are likely to live for 19.5 years in poor health.

Although different causes of death contribute to this variation in life expectancy, leading causes include circulatory conditions, cancer and respiratory conditions and also poor mental health.

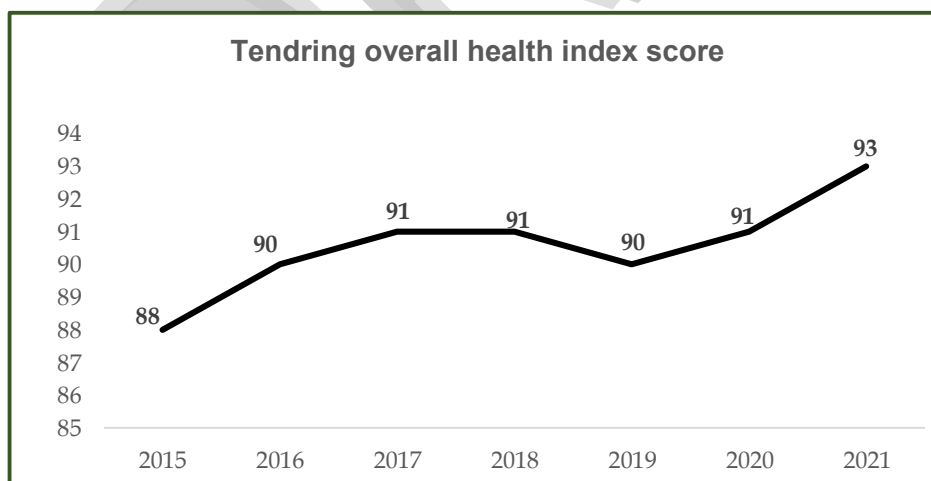
Several underlying risk factors may be involved and include tobacco, high body mass index, diabetes, dietary risks, high blood pressure and alcohol. These factors are driven by wider causes such as access to employment and therefore economic stability, how physically active individuals are, or the type and stability of their housing and its tenure.

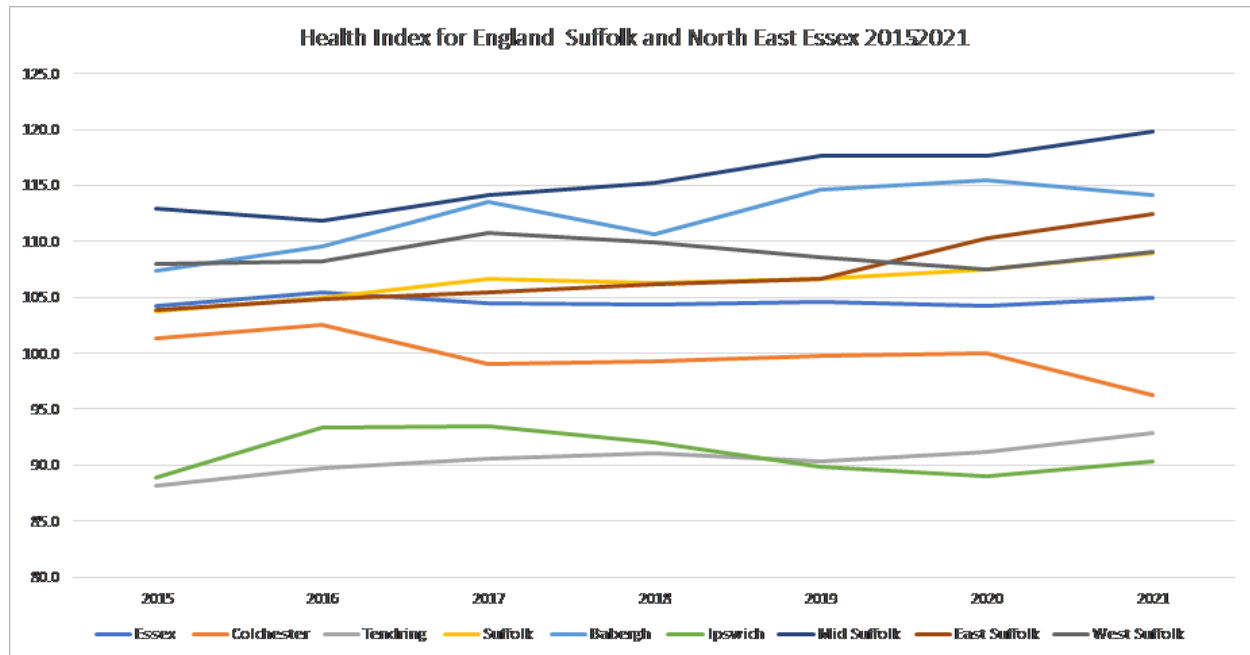
If an early intervention approach is not adopted which addresses the underlying causes such as housing, physical activity, skills and employment, then the goal of supporting people around developing a healthier lifestyle cannot be fully realised.

Health Index

The Health Index provides a single value for health that can show how health changes over time. A score of over 100 indicates better performance when compared to the England 2015 position. A score below 100 indicates a worse performance.

The 2021 Health Index Score for Tendring is **92.9** this shows a good improvement when compared to the 2015 score of 88, and the figure is improving yearly.





The Health Index shows a sustained improvement within Tendring but also identifies that Tendring still lags behind other areas in terms of the wider area within the Integrated Care Board footprint of Suffolk and North East Essex.

Most notably, the key areas of improvement, which contributed to the increase in the overall score in Tendring are broken down as follows:

Healthy People

- Frailty
- Self-Harm
- Infant Mortality
- Personal Wellbeing
- Happiness
- Life Satisfaction

Healthy Lives

- Behavioral risk factors
- Alcohol misuse
- Physical Activity
- Sedentary behaviour
- Sexually Transmitted Infections
- Smoking
- Early Years Development
- Pupil Attainment
- Teenage Pregnancy

Healthy Places

- Living Conditions
- Job Related Training
- Air Pollution

Source: [Health Index Dashboard | Essex Open Data](#)

Healthy People

Key areas of change within this domain include a significant deterioration in terms of children's social, emotional and mental health and also broader mental health conditions. However, there has been an increase in the happiness and life satisfaction scores. The rates of infant mortality and self-harm are reduced.

The rates of hospital admissions due to self-harm have fallen from 170.8 (2021/22) to 134.7 (2022/23). This appears to be a consistent trend across Essex, however, the Tendring rate is the highest in Essex.

The latest suicide figures have shown a recent increase from 11.3 (2020-22) to 14.9 (2021-23) and are currently the highest rate across the districts in Essex. Suicide remains a key focus for Alliance partners due to historically high numbers in Tendring.

Partners in The Health Alliance and local Police are reporting that poor mental health continues to be a real area of concern for Tendring.

The Council has responded to this and has supported young people in terms of their mental health and resilience by helping to deliver the Wellbeing Hubs in primary schools to help equip young people with a rucksack of skills to develop resilience and address concerns. This includes working with their families as well.

In addition, the Council jointly funds with three other partners the Mental Health Hub operated by our partners at Citizen's Advice Tendring. The Mental Health Hub helps deliver support and resilience to those facing lower level, but enduring mental health challenges via a 12 month supported placement in their charity shop. The scheme addresses mental health concerns, physical wellbeing, employment skills and support in accessing wider services.

The aim is to give volunteers a tailored, positive move-on at the end of their 12 month placement, including entry into paid employment, through to finding the perfect social group.

As a major employer in Tendring, the Council has a Wellbeing Policy for staff and supports the workforce by providing a free and confidential Employee Assistance Programme (EAP). The EAP can provide practical information, fact sheets and packs, resource information on support services in your local area and even short-term face-to-face or telephonic counselling. The website offers extensive resources including interactive tools and regular online seminars.

Healthy Lives

Changes within this domain include deteriorations in terms of drug misuse, pupil absence, young people in education, training or employment and childhood obesity.

There have been significant reductions in sexually transmitted infections and smoking.

In terms of pupil attainment, Tendring tends to have the lowest performance on most attainment measures (Good Level of Development – assessed at the end of reception year, Key Stage 2 – assessment in relation to English and Maths at the end of primary school and Key Stage 4. One measure of which is passes at GCSE English and Maths).

However, the latest 2023 data is promising and shows that there is an improvement in the level of attainment in Key Stage 1 and Key Stage 2 children. There is also a slight improvement in the figure for Key Stage 4 children.

Although, according to the latest figures, the rates of overweight/obesity are reduced in year six children, the rate in reception age children has increased and is now the highest in Essex.

This corresponds with the rates of physical activity in children/young adults which are increasing, however the rate has fallen in adults compared to 2021/22 figures.

The Council has worked with Active Essex to deliver the Local Delivery Pilot (LDP) Scheme which has, for example, included Essex Pedal Power in Jaywick and West Clacton and also Harwich to help improve physical activity. It also provides wider benefits around community connection, dealing with social isolation and loneliness, and accessing employment.

Other LDP schemes have included gamification via Beat the Street and Street Tag, which have been accessed by large numbers of people as a free, fun way to access their areas. The key role of our partners at Community Voluntary Service Tendring in delivering Beat the Street, has led to very high levels of participation

Focus on Success: Beat the Street

“The first time I walked, I did it for eight miles. When I am on my bike I usually do between 12 and 16 miles. It has been a good experience - it got me walking further and I managed to fix my bike which has been hanging around in my summer house. My legs are stronger, and I have been sleeping a bit better. I walk wherever I can, and I have been more inclined to jump on my bike”.

Healthy Places

Although there is some deterioration in patients being offered acceptable GP appointments and levels of personal crime, this domain has improvements across the board including internet access, low level crime, air pollution, overcrowding and job-related training.

The level of those economically active stands at just over 70%. Tendring has an unemployment rate of 4.7% (ONS April 2023- March 2024)

The Council works with the Alliance to help deliver a digital access support team to assist residents who are struggling to engage digitally. As part of this work, platforms have been sited across GP surgeries to allow access to wider services direct from the GPs.

The Council also merged its Community Safety Partnership and Health and Wellbeing Board, as there is a strong common theme across both areas and this will help shape and drive improved partnership working going forwards. The Community Safety Hub, based within the Council and working effectively with partners has helped to deliver reductions in crime and enhanced public engagement.

Work has also been undertaken, funded by the Health Alliance, where the Council and Essex Partnership University Trust (EPUT) work more closely together to support those residents that council staff are interacting with, who also have a mental health need. This helps to provide the right support at the right time and to maintain residents' tenancies.

IMAGE

5. Partnership Working

The Council clearly sets out in its Corporate Plan the importance of community leadership and has one of its key themes as working with partners to improve the quality of life. A partnership approach is therefore essential to help address some of the challenges the area faces.

Community Safety Partnership and Health and Wellbeing Board

The Council's Health and Wellbeing Board originally set up in 2013 and which brings partners together to focus on how to improve health and wellbeing has been joined with the Community Safety Partnership. This allows closer cooperation with our community safety partners to deliver on shared priorities for example around mental health, or addressing anti-social behaviour so people feel safe in our area.

Integrated Care Board (ICB)

The NHS Suffolk and North East Essex Integrated Care Board (ICB) plans and buys healthcare services for our population. This function is commonly referred to as 'commissioning'.

The ICB work closely with local government and the NHS providers in our area. To ensure that the needs of smaller, local areas are addressed, the ICB has delegated some authority to the North East Essex Health and Wellbeing Alliance.

The ICB remains accountable for all of its functions, including those it has delegated.

North East Essex Health & Wellbeing Alliance

The Alliance is made up of a range of partners, across North East Essex (Colchester and Tendring) including Tendring District Council. All of the member organisations have a strong background of working within their own fields to improve the health and wellbeing of our area.

By coming together collaboratively and taking a preventative rather than reactive approach, this will provide an opportunity to make long term improvements to our population's health.

Health inequalities are caused by a complex mix of environmental and social factors which play out in a local area, or place. This means that local areas have an important role to play in reducing health inequalities and addressing deprivation.

The Alliance is developing a Place Based Plan approach which recognises people access most of their health and care services in the place where they live, including the support to stay well.

The Plan focusses on how the community, statutory and voluntary sector can work together to understand the issues, interconnections and relationships, so as to coordinate action and investment to improve the quality of life for those communities.

The five priorities in the emerging plan are:

- Childhood Asthma
- COPD
- Hypertension
- Frailty
- Suicide

The drivers of these priorities are some of the wider determinants of health and so there is proposed to be a focus on

- Housing
- Physical activity
- Skills and Employment
- Social isolation and loneliness

The Council already works with Alliance partners to deliver the emerging place-based approach, and this will continue.

IMAGE

Focus on Success – Clacton Diagnostic Centre

The Clacton Diagnostic Centre seeks to provide high quality diagnostic services close to those who may otherwise struggle to access services which may have been too far or too expensive to access. The centre includes new CT, blood testing and cardio-respiratory suites, where patients can have lung function tests, echocardiograms and ECGs. It operates seven days a week, from 8am to 8pm, and provides appointments that are closer to home and more accessible and convenient to patients. In addition to benefitting from shorter waiting times, the centre has also provided employment opportunities for local people. The Council supported the initial bid for funding for the centre and will continue to work with partners to support this facility.

“After waiting for a while for an appointment at Colchester hospital, I was really lucky to be offered an appointment at Clacton, on a Sunday. The staff were really friendly, and it was easy to park”

Tendring Education Strategic Board

The Council hosts the Tendring Education Strategic Board with partners from Essex education, schools and wider providers, which supports improvements in education and has as a key priority working together to improve attainment and skills.

There are key working groups under the Board which focus on attendance and skills to give young people the best chance of accessing the opportunities that they aspire to. This is done by providing support around attainment and helping them to understand the career opportunities available and assisting them to take up those opportunities by working with schools, education providers and employers.

North East Essex Economic Board

A partnership of local authorities in the area working together as a catalyst to drive forward economic growth. Each has committed funding specifically to support local businesses with advice, guidance and training, as well as skills programmes to boost the life chances of local residents and help them into work.

The partnership also works to encourage businesses to engage with, and benefit from, the opportunities around Freeport East and its associated tax relief.

The Voluntary Sector

The voluntary sector are a critical partner both to the Council and the wider system by effectively supporting our community working closely with residents and helping facilitate opportunity for them.

CVS Tendring helps to lead and support voluntary action and empower local people by promoting and developing the community and voluntary sector. The wider voluntary and community sector is made up of a broad range of partners which work closely with the Council and this strategy seeks to strengthen that partnership for the benefit of our residents.

The voluntary sector were crucial in the success of the response through the pandemic and the Council worked with partners including the voluntary sector to support the most vulnerable who were effectively assisted with food parcels, access to medication and support to prevent isolation.

They are crucial in helping to address issues facing our communities and in particular those who are most deprived and provide an opportunity for the Council to support those most in need.

We will work with partners in the voluntary sector to support initiatives which align with our priorities.

Focus on Success- Sailship

Sailship is situated in Clacton, and is funded by the Health & Wellbeing Alliance.

Sailship receives referrals from Open Road to help adults to improve and support their mental health, self-esteem and help build confidence through a range of activities including gardening, yoga, walks and arts and crafts.

In addition to this, older people are supported to live safely and independently as they grow older. A range of activities are offered including sing a longs, therapeutic horticulture, and gentle structured exercise.

Free transport is provided via Tendring Community Transport for those who need it.

Transport is one of the key challenges facing our communities who are most in need and especially as most of the communities are located around the coastal fringe often with poor interconnection. Similarly, there is a large rural area which is not served by strong support or road and transport links.

This Strategy recognises the opportunity to work across our different partners within the community by using existing relationships to support Harwich Connexions and Tendring Community Transport to help address issues around transport, and more widely with the opportunity provided by active travel. This is in line with the Sport and Activity Strategy, to identify opportunities to provide services close to where our residents live.

The Essex Joint Health & Wellbeing Strategy 2022-2026

This Strategy aligns with the Essex Joint Health and Wellbeing Strategy (JHWS) which provides an opportunity for shared outcomes, and which has the following priorities:

- Improving mental health and wellbeing
- Physical activity and healthy weight
- Supporting long term independence
- Alcohol and substance misuse
- Health inequalities & the wider determinants of Health

Working with partners through local initiatives, the overall aim of the JHWS is to see an improvement in health and wellbeing outcomes for people of all ages, and a reduction in health inequalities, by having a focus on supporting poor health prevention and promoting health improvement.

Essex Wellbeing, Public Health & Communities Business Plan 2022-2025

In addition to a focus on Mental Health, the business plan focusses on reducing the prevalence of the following key public health issues:

- Smoking
- High Systolic Blood Pressure
- High Fasting Blood Glucose
- High Body Mass Index
- High LDL Cholesterol
- Alcohol Use

Reducing the prevalence of these in our population will reduce the likelihood of developing certain life limiting long term conditions such as Heart Disease, Diabetes and Respiratory Disease.

Essex Healthy Weight Strategy 2024-2034

The Strategy identifies how widespread and damaging excess weight is, that it can be preventable, and that it is not entirely a free choice for Essex residents to prevent and manage excess weight on their own.

The Strategy recognises that weight is objective, but a 'healthy' weight is more complex, so there is more to defining individual health than BMI alone.

Excess weight can be associated with many poor health outcomes including Heart Disease, Stroke, Type 2 Diabetes and Cancer. It is the greatest contributor to years of healthy life lost.

The reason why people become an unhealthy weight is complex, so mainly focussing on individual behaviour will not work. We need to also focus on the wider determinants, such as the local food and physical activity environment, which can hinder the ability for residents to be a healthy weight.

Conclusion

The shared priorities highlight that the challenges that are faced in Tendring are shared across Essex, although often they may be more exacerbated within Tendring. This provides an opportunity for a greater focus from partners within the Tendring area and the potential to access future funding opportunities.

This Strategy seeks to support the promotion of safer, healthier, well connected and inclusive communities. This can be achieved by working with partners across government, public, private and third sectors. Existing relationships are well developed, for example via the joint funding of posts such as the Public Health Improvement Coordinator and close partnership working within the Alliance.

This Strategy is set amongst one of the most challenging times for many in society. A place-based approach allows alignment of system partners to deliver a range of improvements and support which collectively, will help to address health inequality as already evidenced by the improving Health Index score. Improvements in the **healthy** life expectancy of our residents, will also be a focus and a marker of our success.

IMAGE

6. The Corporate Perspective

The Council plays a key role in addressing many of the wider socio-economic factors and health behaviours including physical activity, skills and employment and housing and these are all strongly reflected within the Council's Corporate Plan.

At the centre of the Plan is a theme of community leadership to help provide the opportunity to support communities where they are by working with them in an asset-based community development way and with a focus on a number of key areas.



More broadly there are a number of other Council strategies which are inextricably linked, and which specifically address the wider determinants of health and the wellbeing of residents



Housing

Housing is a key determinant of health, and everyone in Tendring should have access to a home that meets their housing needs and provides a safe and healthy environment in which they can live. Sadly, this is not the case for some.

By supporting affordable housing provision, addressing poor housing and supporting sustainable tenancies the Council can effectively address a key determinant of health and wellbeing.

As a landlord of over 3000 homes the Council has a clear role in providing good quality homes and aims to set the standard for how affordable rented housing should be managed.

Homelessness is a problem in the district as it is in most others. The Council's Housing Solutions services work to support those who find themselves homeless. This service includes the provision of temporary accommodation and support to provide a more permanent home.

The quality and condition of housing, especially rented housing, is something that has been in the spotlight for a few years. The Council has an active Environmental Health service that works to ensure the safety of privately rented housing. This involves liaising with landlords and taking enforcement action where it is necessary to bring about an improvement in conditions.

A key project for the Council is the Jaywick Sands Healthy Homes service. Focusing on poor quality privately rented housing in the Brookland and Grassland area of Jaywick, this Health Alliance funded project aims to bring about an improvement to some of the poorest quality housing in the district.

By addressing poor housing and supporting sustainable tenancies the Council can effectively address a key determinant of health and wellbeing.

The purpose of the Housing policy clearly identifies this and includes such areas as:

- Provision of dry, warm and healthy homes for tenants and leaseholders
- A zero-tolerance approach to damp and mould and effective investigation and remedial work to eradicate it
- Provision of appropriate advice and guidance to tenants

The Damp and Mould Policy specifically recognises both the mental and physical health effects of damp and mould and how its prevention supports the management of some respiratory conditions. This will include childhood asthma, a key focus area for Alliance partners.

Between April 2023 to April 2024, the Council allocated 149 properties from general stock and 36 for sheltered housing. Tenancy support and advice is also provided to support residents maintain their tenancies which would otherwise directly affect their health.

Image - housing

Planning

The Council has a Local Plan, which in an overarching way, can support the provision of appropriate housing, employment land and green space which is critical as the district's population expands. There are strategic objectives for Education and Healthcare which include:

- Working with Public Health to promote and encourage healthy lifestyles through developments and planning to ensure that the people of Tendring have opportunities to be as healthy as possible.
- Working with partners including Public Health, to avoid a concentration of fast-food takeaways, where the number of outlets would be likely to harm public health objectives, particularly in deprived communities, local areas of poor health and near schools.
- Require the provision of a Health Impact Assessment (HIA) on developments of 50 or more dwellings, residential institutions and non-residential developments with 1,000 square metres or more gross internal floor space.
- HIA's are to be carried out following advice and best practice from UK Health Security Agency and the Essex Planning Officers Association.

The Council is working with partners in Public Health to ensure that appropriate responses are made to HIA's to ensure they support residents' health and wellbeing.

The Local Plan is in the process of being reviewed and, amongst other things, it must be updated to reflect changes in Government policy and the introduction of mandatory housebuilding targets.

The updated Local Plan will need to identify locations to deliver an average 1,034 homes a year. This will require close working with partners to ensure longer-term strategies for the provision of medical and healthcare services are aligned. This will help to ensure that the likely patterns of future growth are planned for, and delivered in a way that is efficient, and supports the wider objectives of the Health and Wellbeing Alliance.

Employment

The Council's Economic Strategy identifies the challenges the area faces, noting a decline in performance in Clacton and Jaywick and the importance of participation of communities and the need for long-term prosperity. Also identified is the importance of the port and visitor economy to Harwich and the opportunities within the care and green energy sector.

The objectives of the Strategy include targeting growth locations and sectors, supporting the skills agenda for residents, supporting innovation, and the importance of housing in driving the economy for a strong labour market and increased spending.

To help address some of these issues the Council has supported the regeneration of the beaches at Clacton, the Sunspot market site at Jaywick, the development of the diagnostic hub at Clacton Hospital, and leading the delivery of the £60 million Levelling Up Funding, which will see significant investment and opportunity in Clacton and Harwich and Dovercourt

The Council works alongside other local authorities and businesses in partnership to identify barriers to local economic growth and to stimulate a prosperous economic future for our District. The Economic Growth Team works to bring employment opportunities into the district.

Providing employment opportunities will directly impact the wider determinants of health as residents access employment and have greater income which leads to improved health outcomes.

Physical Activity

The Council's Sport and Activity Strategy acknowledges the role that increased physical activity can have in improving general health and wellbeing and how it assists in combatting many serious conditions such as heart disease, strokes, diabetes and obesity.

The Council runs leisure facilities in Clacton, Dovercourt and Walton which have over 600,000 visits per year and includes staff who specifically work with those living with diseases such as respiratory conditions, diabetes and cancer. The Strategy has a broader approach and also focusses on how to support our communities becoming more active where they are.

The Strategy seeks to provide a framework for access to facilities and opportunities for activity across all age groups, and in particular recognises the need for a partnership approach which works closely with health partners.

The Sport and Activity Strategy is a key contributor in terms of how the Council will address some of the wider challenges facing the health of our population.

Wider Council Provision

A number of services provided by the Council directly impact on the health and wellbeing of residents. These include the benefits team which helps support those on low income by, for example allocating £11,847,267.66 in 2023/24 to residents on low incomes.

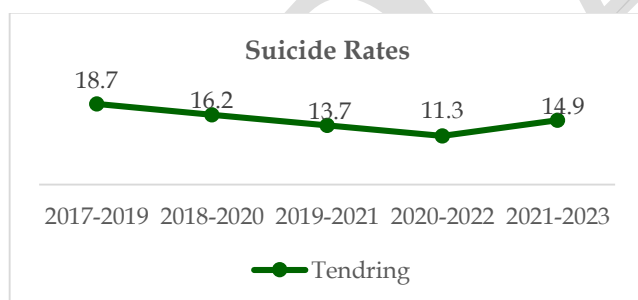
The environmental health team ensures the provision of safe food, air, water and environmental quality. Wider services also deal with complaints from residents which can severely impact their mental health for example around noise nuisance.

The Council has the potential to work with significant funding from government in terms of Levelling Up funding.

A number of projects have been developed which will have a huge potential impact on residents' health and wellbeing such as the potential for an inclusive cycling track, redevelopment in the civic quarter of Clacton based around the library and opportunities at the Leisure Centre.

Across the Council there is also the potential to help address some of the overarching issues for example around mental health and specifically suicide.

There is a high incidence of suicide within Tendring and this has historically been the case:



HM Coroner is the only person that can make a determination of suicide. Coroners verdicts often come sometime after the death, in some cases this can be a year or more later.

The latest figures show an increased level, highlighting that there is much work to be done, the figure is lower than the level seen in 2017-2019.

Besides a wider system approach working with partners to try to understand the actions that can be taken to address this, the Council has an opportunity to support and educate staff on how to recognise if someone has suicidal feelings and help to support them to receive help.

Previously Councillors have undertaken suicide awareness training and the Council also delivers mental health first aid training across services to help provide support to those in need.

A wider approach on addressing suicide has also been undertaken in line with partners with Essex County Council leading a group specifically focused on how partners can collaborate in North East Essex to help address the high incidence in the area which has led to this being a priority.

The Alliance has recently launched the Frontline Referral App, which health professionals can access and make referrals for support at a local level. Access to local support is important for those experiencing poor mental health. Residents can also access this, and in some cases self refer.

The SOS bus has been utilised by partners and located in Clacton and Jaywick. Key support partners were available to offer a range of advice and signposting for local residents.

The Council will continue to work with partners and facilitate initiatives that help to reduce the rates of suicide.

7. Strategic Objectives

The key strategic objectives are as follows:

- Address the wider determinants of health including housing, physical activity, skills and employment and social isolation via a partnership place-based approach.
- To improve health and wellbeing and build resilience by working with partners to deliver support at a local place-based level.
- To work to provide opportunities for a healthier lifestyle for example around physical activity.
- Provide support and information for people to manage long term conditions.
- Work with partners to seek to deliver improvements in mental health, in particular for suicide reduction.
- Increase the healthy life expectancy of residents and continue to see improving Health Index Scores

Scope

- To implement the Strategy there will be a focus on data available in order to understand the health and wellbeing of Tendring residents, the challenges faced and potential opportunities.
- A key factor of this Strategy is to further develop partnerships, particularly through the Health Alliance, to identify shared objectives and to work in a collaborative way to address these.
- There will be a focus on how we can influence the wider determinants of health to support residents to adopt healthier behaviours, leading to improved health outcomes.

8. Strategic Priorities and Delivery Plan

Based on the information gathered from data, insight gained through our partnership working, and in order to achieve our vision, our strategic priorities are set out below. Data is correct at time of publication.

1. Wider Determinants of Health

Focus on Tendring

- 28% of our neighbourhoods (Lower Super Output Areas) are within the 20% most deprived nationally
- Tendring has the highest level of economic inactivity in Essex and the lowest levels of gross income
- Educational Attainment levels are improving, but still the worst in Essex

What we will do

- Work with Partners to address the ongoing impacts of the increased cost of living to reduce the stress for those in fuel and food poverty.
- Work with colleagues and partners to look at employment to increase the opportunity for employment and educational attainment
- Work with partners to reduce barriers to healthcare

Delivery:

In order to improve socio-economic factors that impact on the health of Tendring residents we will:

Project	Details	Delivery/ Budget	Timescale
Employ a Fuel Poverty Officer until May 2025 (further funding currently being aligned)	To support families most in need to reduce fuel poverty, change to improved tariffs for better heating options, support insulation provision and increase benefits uptake	TDC Health Inequalities Fund	Short term
Provide a Family Solutions offer in Clacton and extend the provision using partnership funding to cover Harwich and work across the district	To support those children and families most in need and in particular those not accessing services, so they receive appropriate support and to develop a community forum to help bring support together within the community to provide ongoing support	TDC Health Inequalities Fund & TDC	Short term
Deliver a Housing Benefits and Early Intervention Officer post within the Children's social care team.	This post will provide bespoke housing and benefits advice and support to families who do not engage, as part of a wider multi-disciplinary team who can deal holistically with family's challenges.	TDC Health Inequalities Fund	Short - Medium term
Support the Tendring Education Strategic Board to deliver improvements in terms of skills and attendance to ensure young people obtain skills which can be matched to employment opportunities when they leave school	Work in conjunction with the Economic Growth Team to hold employer engagement events and reverse jobs fairs and science, technology, English, arts and maths (STEAM) events to inspire young people around career opportunities. To understand the potential future employment opportunities and link these to the skills agenda.	Officer time	Short - Long term
Access partnership funding to support the employment of two Community Support Employments Officers to work with the Job Centre	To provide holistic support to those furthest from the jobs market.	Department of Work and Pensions funding	Short - Long term

Apprenticeships	To continue to deliver apprenticeships and consider working with other providers and employers such as Colchester Institute, East Suffolk and North Essex Foundation Trust and Career Track to deliver further apprenticeships	TDC Essex County Council- Public Health	Short - Long Term
Use partnership funding to help deliver housing and environmental improvements in Jaywick	To improve residents' accommodation addressing hazard such as excess cold and damp which could for example lead to childhood asthma and to help build community pride and resilience	TDC and Health inequalities funding	Short - Long Term
Work with partners including our Health Alliance to deliver a place-based approach	Focus on key issues affecting our neighbourhoods particularly around the wider determinants of health and using a joint approach to improve resident's lives and reduce barriers to healthcare	TDC/Health Alliance Officer time Budget to be determined	Short - Long Term
Planning	Work with colleagues in planning in relation to the Health Impact Assessments to create healthy places and seek to improve the obesogenic environment by reducing the number of fast food outlets	Officer Time	Short - long term

2. Improving Wellbeing & Resilience

Focus on Tendring

- The estimated prevalence for mental disorders in Tendring is 17.1 compared to the regional figure of 14.9.
- In those aged 65+ the estimated prevalence for mental disorders in Tendring is 11.5 compared to a regional figure of 9.5.

What we will do

- Work with partners across the system to encourage improved mental health to build resilience and help residents to live a more fulfilled life.
- Seek to influence partners to bring in investment into the area to support improved mental health
- Continue to support Wellbeing Hubs in Schools

IMAGE



Delivery:

In order to improve wellbeing and build resilience we will:

Project	Details	Delivery/ Budget	Timescale
Wellbeing Hubs in Schools	Continue to support 33 Wellbeing Hubs in primary schools across North Essex to help children and families build emotional resilience and wellbeing and to develop materials to help share the learning and support future hubs.	TDC/Partners. Budget to be determined	Short - Long Term
Integrate Physical Activity into Wellbeing Hubs in schools	Invest in a training programme to upskill the leads at the wellbeing hubs and provide resources to deliver physical activity integrated sessions. To enhance health and wellbeing outcomes further.	TDC/Active Essex Budget to be determined	Short- Long Term
Mental Health Hub	To support delivery of a mental health recovery programme as a single point of access to provide holistic assessment and intervention for vulnerable residents who have ill mental health	TDC/Partners Budget to be determined	Short - Long Term
Dig For Jaywick and other gardening initiatives	Deliver the Dig 4 Jaywick project within Jaywick to provide therapeutic activities for those with learning difficulties or ill mental health, raising self-esteem, addressing social isolation and providing an opportunity to volunteer. In addition to seek to support wider gardening initiatives in the community.	TDC Public Health funding & external funding to be determined	Short - Long Term
Information and Advice provision	To allocate funding via a procurement approach to help residents access services	TDC Officer Time	Short – Medium Term

3. Encouraging a Healthier Lifestyle

Focus on Tendring

Physical Activity levels in adults has fallen to 61.3% compared to the Essex average of 67.9%

- 26.1% of reception children are overweight including obesity which is the highest in Essex and in year 6 it is 36.1% which is the third highest in Essex
- However, 62.2% of adults are overweight including obesity compared to a regional average of 68%

What we will do

- Work with colleagues to Improve physical activity across all ages and encourage a healthy diet, which will help residents to avoid developing certain preventable illness
- Work with the community to enable residents to try new activities and meet new people.
- Encourage those with long term conditions to stay well and live independent lives

IMAGE

Delivery:

In order to support residents to adopt a healthier and more active lifestyle we will:

Project	Details	Delivery/ Budget	Timescale
Active Outdoor Gym	Designed to prevent falls and rehabilitation to those in need. Situated at York Road Holland on Sea.	£65,000 – Sport England funded	Short - Long Term
Park Play	Continued support of Park Play located across the District	Officer time	Short - Long Term
Essex Pedal Power	Continue to provide support for Essex Pedal Power to provide a free quality bike to support residents to become more active, access work and cheaper food.	Officer Time	Short – Long term
Place based work in line with deepening funding from Sport England	Build on the legacy of the Local Delivery Pilot and developing place-based working to continue to deliver work to increase activity levels in our deprived communities for example, by building capacity within the Council but also within our community partners	TDC/Active Essex Budget to be determined	Short – Long Term
Essex Healthy Weight Strategy	Work with Public Health partners to support delivery of the strategy across Tendring, including the Bite Back scheme being undertaken at Tendring Technology College	Public Health Essex	Short – Long Term
Active Wellbeing across Tendring	To expand the Active for Life programme to other communities in Walton and Dovercourt. To facilitate connection with health care and support services at the proposed Active Wellbeing Hub at Clacton. For example, offering the chance for flu vaccinations/ health checks etc to be held on days when activities are taking place. Expansion of the Reconnect Programme currently operating from Clacton Leisure Centre, to other areas of the District. Activating the wider Active Wellbeing Hub including the creation of a new £1.4 million inclusive cycling facility, mainly funded through the Government Levelling Up programme.	TDC/Active Essex Budget to be determined	Medium – Long Term

4. Improve Long Term Condition Prevention and Management

Focus on Tendring:

- COPD in Tendring is 3.0% compared to the regional figure of 1.8
- Childhood asthma prevalence in Tendring is 4.5% compared to the regional figure of 3.0%
- The Prevalence of Hypertension in Tendring is 20.5 compared to the regional figure of 15.5
- The % of people over 17years with Type 2 Diabetes is 9.8% compared to the regional figure of 7.4%

What we will do:

- Work with health partners to help those with existing long-term conditions maintain an independent and fulfilling life.
- Work with partners to create initiatives to help prevent certain long-term conditions

IMAGE

Delivery:

In order to ensure that residents living with long term conditions are able to live independent and fulfilling lives we will:

Project	Details	Budget	Timescale
Sing for Lung Health	Work with local community choirs to support those living with certain respiratory conditions to lead fulfilled and independent lives	TDC Public Health Grant Costs to be determined	Short - Medium term
Know Your Numbers	Deliver initiatives to encourage residents to have regular blood pressure checks to detect Hypertension	TDC Public Health Grant – Cost to be determined	Short – Long Term
Childhood Asthma	Work with partners to deliver health messaging and utilise housing interventions to determine risks around excess cold and dampness and provide an appropriate response	Health Alliance/TDC Public Health Grant – Cost to be determined	Short – Long Term
Falls Prevention	Seek to improve strength and balance for those at risk of falls through provision of suitable activities and connection to partners for support. The Active Aging Gym will also support those to help prevent falls. Housing inspections to identify slip and trip hazards and take remedial actions	Health Alliance/TDC Public Health Grant – Cost to be determined	Short – Long Term
Type 2 Diabetes	Work with partners to deliver health messaging	Officer Time	Short – Long Term
Long Term Condition management and prevention	Use data and insight to influence partners as to the best use of financial and wider resources in the District	Officer Time	Short – Long Term
Community & Voluntary Sector Partnership	Support the community and voluntary sector to help those with long term conditions	Officer Time	Short – Long Term

Jaywick and wider housing interventions	To have a focus on addressing damp and mould in Council and leasehold properties to seek to reduce respiratory conditions	Officer Time	Short – Long Term
Activating a Health Creation System through Place Partnerships	Support the North East Essex Health & Wellbeing Alliance to implement and embed bold and ambitious place-based systemic action, Including: Preventative Health creation in neighbourhoods - Developing hyper local integrated place partnerships models alongside communities.	TDC/Active Essex Budget to be determined	Medium-Long term

IMAGE

5. Suicide Prevention

Focus on Tendring

- Tendring has the highest rate in Essex for suicide at 14.9 compared to the regional figure of 8.8.
- Tendring has the highest rate of emergency admission due to intentional self-harm at 134.7 compared to the regional figure of 98.

What we will do:

- Work with partners to understand the issues around suicide locally.
- Work with partners to determine proactive actions that can be taken to help deliver effective interventions in relation to suicide

IMAGE

Delivery – in order to help build wellbeing, support and resilience

Project	Details	Budget	Timescale
Funding Allocation	Consider allocating some of the public health grant for open call for community projects to apply for funding. Projects will be required to meet set criteria and must have a focus on suicide prevention work	ECC public health grant	Short- Long Term
Dual Diagnosis	To engage with the dual diagnosis team that provide support to those with a dual diagnosis of dependencies and poor mental health	TDC/Health Alliance Budget to be determined	Short - Long Term
Essex County Council Strategies	Working with partners including Health and Essex County Council to determine strategies that support the reduction of suicides.	TDC -Officer Time	Short – Long Term
Community Support	Connect with groups who seek to improve wellbeing with a focus on suicide prevention in all age groups and feed this back to the Community Safety Partnership and Health & Wellbeing Board.	Officer Time	Short – Long Term
Training and Development	Work with partners to understand how suicide prevention work can be effective. Including training and development. Offer Mental Health First Aid training to staff which includes suicide training	TDC Partners	Short-Long Term
Partnership Working	Support the delivery of the North East Essex Suicide Prevention Operations Action Plan. Southend Essex and Thurrock (SET) Suicide Prevention Partnership aim to reduce the rate of suicide across greater Essex. Also providing support for those left behind. We will work to support this.	Partners Officer Time	Short-Long Term
The Sanctuary- MIND Mid and North East Essex	Support the delivery of the Sanctuary in Tendring, who work to support those experiencing a mental health crisis or need support to stay well. Seek to increase opportunities for more activities and events in Tendring.	Partners Officer Time	Short – Long Term

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Appendix 1- Strategy Alignment & Partnerships

Essex Joint Health & Wellbeing Strategy 2022-2026

[Essex Joint Health and Wellbeing strategy | Essex County Council](#)

Essex Healthy Weight Strategy

[Essex Healthy weight strategy 2024 to 2034 | Essex County Council](#)

Wellbeing, Public Health & Communities Business Plan 2022-2025

[Wellbeing, public health & communities business plan 2022 - 2025 \(essex.gov.uk\)](#)

Can Do Health and Care- Suffolk and North East Essex Integrated Care Strategy 2022

['Can Do' Health and Care - Suffolk & North East Essex Integrated Care System \(sneeics.org.uk\)](#)

Suffolk & North East Essex Integrated Care Board- Joint Forward Plan 2024-2029

[Joint Forward Plan 2024 - 2029](#)

Tendring Economic Strategy

[Regeneris Report \(tendringdc.gov.uk\)](#)

Tendring Creative & Cultural Strategy

[Tendring Creative and Cultural Strategy 2019 - 2024 \(tendringdc.gov.uk\)](#)

Tendring Local Plan

[LOCAL PLAN SECTION 2](#)

Tendring Sport and Activity Strategy (link to be inserted)

North East Essex Place Based Plan (emerging)

Partnerships

North East Essex Health Alliance

Essex County Council

Tendring Education Strategic Board

Tendring Future Skills Board

Community Voluntary Service Tendring and the community sector

Integrated Care Board

Active Essex

Appendix 2 – Data

Disease 2022/2023

Stroke – **2.7%** (Essex - 1.9)

The percentage of patients with stroke or Transient Ischemic Attack as recorded on practice disease registers (proportion of total list size) **up 0.1** 2021/22

Diabetes - **9.8%** (Essex - 7.4%)

The percentage of patients aged 17 years and over with Diabetes Mellitus as recorded on practice disease registers. **Up 0.3** 2021/22

Coronary Heart Disease – **4.5%** (Essex 3.%)

The percentage of patients with Coronary Heart Disease as recorded on practice disease registers. **Stable** 2021/22

Chronic Obstructive Pulmonary Disease (COPD) - **3%** (Essex - 1.86%)

The percentage of patients with COPD as recorded on practice disease registers. **Stable** 2021/22

Chronic Kidney Disease – **7%** (Essex - 4.6%)

The percentage of patients aged over 18 yrs with CKD stages G3a to G5 as recorded on practice disease registers. **Up 1.3%** 2021/22

Hypertension – **20.5%** (Essex- 15.5%)

The percentage of patients with established hypertension as recorded on practice disease registers (proportion of total list size) **Up 0.5%**

Cancer – 5.1% (Essex 3.6)

The percentage of patients with cancer as recorded on practice disease registers. **Up 0.8%**

Dementia – **1.27** (Essex 0.84)

The number of people on GP practice registers as a proportion of the people registered at each practice. **Stable** 2021/22

Osteoporosis - **0.46%** (Essex 0.49)

The percentage of patients aged over 50 as recorded on practice disease registers. Up
0.1% 2021/22

Type 2 Diabetes **9.8** (Essex 7.4) The percentage of patients aged 17 yrs and over as
recorded on practice disease registers up 0.3

Source: [JSNA Health Outcomes - Length and Quality of life dashboard | Essex Open Data](#)

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