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Community Leadership Overview and  
Scrutiny Committee

23 April 2024

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**MINUTES OF THE MEETING OF THE COMMUNITY LEADERSHIP OVERVIEW AND  
SCRUTINY COMMITTEE,  
HELD ON TUESDAY, 23RD APRIL, 2024 AT 7.30 PM  
IN THE ESSEX HALL - TOWN HALL, STATION ROAD, CLACTON-ON-SEA, CO15  
1SE**

<b>Present:</b>	Councillors Steady (Chairman), Barrett (Vice-Chairman), Alexander, Davidson, Doyle, Ferguson, McWilliams and Oxley
<b>In Attendance:</b>	Lee Heley (Corporate Director (Place & Economy)), Anastasia Simpson (Assistant Director (Partnerships)), Keith Simmons (Head of Democratic Services and Elections & Deputy Monitoring Officer), John Fox (Head of Health & Community), William Lodge (Communications Manager), Rebecca Morton (Executive Projects Manager), Keith Durran (Committee Services Officer), Bethany Jones (Committee Services Officer) and Chanelle Field (Communications Assistant)
<b>Also in Attendance:</b>	Greg Brown (Head of Dental Services, Suffolk and North East Essex Integrated Care Board) and Prof. Nick Barker (Deputy Chief Dental Officer- England)

**1. APOLOGIES FOR ABSENCE AND SUBSTITUTIONS**

An apology was received from Councillor Griffiths (with Councillor Alexander substituting).

**2. MINUTES OF THE LAST MEETING**

It was **RESOLVED** that the minutes from the meetings of the Committee held on Tuesday 14 November 2023 and on Thursday 11 January 2024 be approved as a correct record.

**3. DECLARATIONS OF INTEREST**

There were no declarations of interest by Councillors in relation to any item 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. REVIEW OF THE WORK PROGRAMME (INCLUDING MONITORING OF PREVIOUS RECOMMENDATIONS AND SCRUTINY OF FORTHCOMING DECISIONS)**

The Committee was provided with a report which provided an update on its approved Work Programme for 2023/24 (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 notice has been given since publication of the agenda for the Committee's last meeting.

Members heard that in respect of the collaborative working with The Cabinet as part of the governance arrangements at this Council a meeting was held with the Leader and Deputy leader and the Chairman of the Resources and Services Overview and Scrutiny Committee on 4 April 2024. A number of suggestions for enquires in 2024/25 were discussed.

Members also heard how the meeting considered the timing and arrangements for reviewing voluntary sector/community grant funding by the Council. The outcome of this meeting was a recommendation to discontinue the review commenced by this Committee as Cabinet itself was overseeing the same process directly over a shorter timeframe and, as such, this Committees review (through its Working Group) would involve duplication of Council resources. This matter was being considered by Cabinet on 19 April 2024.

The Committee was made aware, that at the time of the meeting, the Democratic Services Team have launched a public consultation with the aim to capture the residents' ideas as to what they think both Overview and Scrutiny Committees should be undertaking in its enquires for 2024/25. The Consultation was set to end on 10 May 2024 (Appendix D). Arrangements would be made for meetings to consider proposals from the public, Town and Parish Councils, other partner organisations and Councillors and staff for enquires to be undertaken in 2024/25 (ahead of the next formal meeting of the Committee).

The Democratic Services Team had also commenced discussions with both the Chairmen of the Overview and Scrutiny Committees into the Scrutiny Annual Report for the year 2023/24.

After a short discussion it was unanimously **RESOLVED** to remove Voluntary Sector/Community Grant Funding from its current work programme

**6. REPORT OF ASSISTANT DIRECTOR (PARTNERSHIPS) - A.2 - IMPROVING ACCESS TO NHS DENTISTRY FOR RESIDENTS IN TENDRING**

The Committee heard that on 1 April 2023, Suffolk and North East Essex Integrated Care Board (SNEE ICB) received delegated responsibility from NHS England (NHSE) to commission dental services.

There were longstanding issues with NHS dental access including NHS routine dental care and urgent dental care. This problem had been amplified by the current COVID-19 pandemic. Treating oral diseases cost the NHS £3.4 billion per year.

The pain experienced with dental problems such as toothache or abscess could be considerable, intractable, and distressing, and might have led sufferers to extreme measures to address pain if urgent dental care was not available. Examples included DIY dentistry and overdoses of paracetamol, which in turn increased pressure on urgent and emergency care. There were also wider societal impacts and costs that arose when people could not access urgent care, such as increased demands and pressures placed on the wider health care system such as accident and emergency and primary care services, as well as costs to employers and reduced productivity due to time off work.

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### **Commissioning, Legislation, and Dental Fees**

The report outlined that Suffolk and North East Essex ICB directly commissioned all NHS dental services at primary, community, secondary, and tertiary settings depending on the care and treatment required.

Currently, almost all dentists in north-east Essex (and Suffolk), were paid by commissioners for the Courses of Treatment (CoT) they provided, each CoT was allocated a Unit of Dental Activity (UDA). A UDA was the technical term used in the NHS dental contract system regulations to describe weighted CoTs. The ICB piloted a primary care contract that did not use CoT or UDA but was based on the availability of appointments.

Members heard that UDAs were developed as part of the 2006 NHS dental contract. Under the old NHS contract, dentists were paid for every item of treatment they provided: examination, filling, crown, or denture. Under the 2006 system, they were paid per course of treatment, irrespective of how many items were provided within it. Thus, a course of treatment involving one filling (3 UDAs) attracted the same fee as one containing five fillings, a root treatment, and an extraction (also 3 UDAs). This factor was behind much of the resentment against this system.

Members also heard that in March 2021, NHS England was asked by the government to lead on the next stages of NHS dental system reform. At the outset, six aims were agreed upon when considering what a reformed dental system should bring. They were:

- Be designed with the support of the profession
- Improve oral health outcomes
- Increase incentives to undertake preventative dentistry, prioritize evidence-based care for patients with the most needs and reduce incentives to deliver care that is of low clinical value
- Improve patient access to NHS care, with a specific focus on addressing inequalities, particularly deprivation and ethnicity
- Demonstrate that patients are not having to pay privately for dental care that was previously commissioned NHS dental care
- Be affordable within NHS resources made available by the Government, including taking account of dental charge income.
- In July 2022, NHS England announced the first new reforms to the dental contract; these were the first in 16 years. The announcement included the following key points:
  - NHS dentists would be paid more for treating more complex cases, such as people who needed three fillings or more.
  - Dental therapists would also be able to accept patients for NHS treatments, providing fillings, sealants, preventative care for adults and children, which would free up dentists' time for urgent and complex cases.
  - To make services more accessible for people, dentists had to update the NHS website and directory of services so patients could easily find the availability of dentists in their local area.

- High-performing dental practices would have the opportunity to increase their activity by a further 10% and to see as many patients as possible.

The Committee heard that these reforms represented the first significant change to the contract since its introduction in 2006.

### **Dental Fees**

It was reported to the Committee that adult patients paid a subsidized fee for receiving care unless they were exempt. The NHS operated a three-band fixed charge primary care treatment package and payment from adult patients depended on the treatment received. The bandings were:

Emergency dental treatment – £26.80 This covered emergency care in a primary care NHS dental practice such as pain relief or a temporary filling.

- Band 1 course of treatment – £26.80 This covered an examination, diagnosis (including X-rays), advice on how to prevent future problems, a scale and polish if clinically needed, and preventative care such as the application of fluoride varnish or fissure sealant if appropriate.
- Band 2 course of treatment – 73.50 This covered everything listed in Band 1 above, plus any further treatment such as fillings, root canal work, or removal of teeth but not more complex items covered by Band 3.
- Band 3 course of treatment – £319.10 This covered everything listed in Bands 1 and 2 above, plus crowns, dentures, bridges, and other laboratory work.

Free NHS Dental Care was available to people in the following categories:

- Under 18, or under 19 and in full-time education
- Pregnant or had a baby in the last 12 months
- Being treated in an NHS Hospital and treatment was carried out by the hospital dentists (dentures or bridges need to be paid for)
- Receiving low-income benefits, or under 20 and a dependant of someone receiving low-income benefits.

Overall, the trend for NHS free dental care in Essex was going downwards when compared between 2017/18 to 2021/22.

### **Oral Health**

Members heard that the SNEE Joint Forward Plan (JFP) described the key oral health issues in SNEE. Poor oral health was challenging both in terms of symptoms but also had knock-on effects on a person's overall health and life quality and the overflow demand for wider health services (GP, 111, and A&E).

The Committee thanked the guests for attending the meeting and **RESOLVED** to note the contents of the report

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7. **FINAL REPORT OF MAINSTREAM AND COMMUNITY TRANSPORT PROVISION IN THE DISTRICT TASK AND FINISH WORKING GROUP**

The Committee was reminded that a decision was published on 14 August 2023 to agree that the Community Leadership Overview and Scrutiny Committee would set up a Task and Finish Group to enable enquiries into the range of elements concerning mainstream and community transport provision. This proposal had been approved by Full Council.

The Task and Finish Group wanted to look into:

- Details of mainstream public transport across the District including bus routes and frequency.
- Issues being experienced with mainstream public transport as outlined to Councillors.
- Details of Essex County Council's subsidised bus services in the District and the associated funding.
- Details of community transport provision across the District and the funding for them from Councils in Essex.
- Publicly available data on car ownership in the District and use of public transport.

Partner engagement included:

- Representatives of the local Bus Operators and of community transport providers.
- Representative from Essex County Council in relation to subsidised bus services where there are no commercial services.
- Representatives of transport users.
- Corporate Director of Place and Economy.

The inquiry started on the 5 September 2023 and ran to March 2024.

The Task and Finish Group agreed to focus on the provision, the extent to which it supported inter-modal exchanges, provided a meaningful alternative to private car usage for work, leisure and medical journeys.

The inquiry supported the then corporate plan themes of:

- A Growing and Inclusive Economy - Support existing businesses/More and better jobs;
- Building Sustainable Communities for the Future;
- Community Leadership Through Partnerships; and
- Joined up public services for the benefit of our residents and businesses.

**External Participants**

Wendy Jackson – Local Bus Network Community Engagement Lead (ECC),  
Pauline Mann – Tendring Community Transport  
Debbie Hill - Harwich Connexions Transport Cooperative Ltd  
Pam Playle - Walton Community Hospital Car Service  
Wendy Jackson, Senior Transport Liaison Officer, Essex County Council  
Angie Tillet, ESNEFT  
Pauline Mann – Tendring Community Transport,  
Debbie Hill - Harwich Connexions Transport Cooperative Ltd  
Pam Playle - Walton Community Hospital Car Service

**Internal Officers**

Keith Durran, Committee Services Manager , Tendring District Council  
Gary Guiver, Director of Planning, Tendring District Council  
Lee Heley, Corporate Director, Place and Economy

The Committee heard that the Leader of the Council, the Corporate Director (Place and Economy) and the Economic Service Manager met Hedingham buses in relation to levelling up in Clacton, rather than as a formal part of the scrutiny process; high level messages to Hedingham from that meeting were included in this report with the agreement of the company.

The report outlined that the purpose of the review was to consider the network of public transport provision (commercial and subsidised) and invite providers / commissioners to review those with the Council based on evidence identified. To look at community transport provision and where best practice could be shared to extend the network.

The inquiry found that there was a public transport system across the district that provided a wide range of services as an alternative to the car for the 20 percent of Tendring households without one, although it faced challenges of scale, frequency, and in some cases reliability. The system was mainly designed for travel to and from the coast to Colchester, rather than between towns in the district, with travel to and from Clacton to Harwich slow by public transport.

Transport providers and funders were seeking to offer the best services possible within the commercial and financial constraints they face. While the bus network in Tendring was shrinking and issues of frequency and reliability were raised, providers from Clacton were making efforts to improve the service and seek increased public investment.

The rail services provided a good service from Manningtree on the mainline, and from other stations there were branch line services. There was a new train fleet which had increased reliability to 94% across the network, and 96% on the Clacton line. The frequency of the off-peak services from Clacton to London was currently just hourly. Rail can be an expensive form of transport for some residents.

Community transport provided a responsive service to people in need from Harwich, Clacton and Walton. The service faced challenges of being oversubscribed, and relying on short term funding and volunteer effort.

The more public services that were based in coastal towns, the less residents have the need to travel for essential services to Colchester such as health and education. The lack of subsidy to post-16 transport puts a strain on budgets for young people looking to

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carry on in education at Colchester Institute based in the town. And the hospital in Colchester required residents to travel there. The Clacton diagnostic hub was an excellent example of bringing services to people in Clacton, reducing the need to travel.

After an in-depth debated it was moved by Councillor Steady, seconded by Councillor Doyle and agreed to **RECOMMEND** that Cabinet:-

- a) Hold a summit with local transport providers including Heddingham and Chambers and Greater Anglia, to seek to improve the frequency, reliability and quality of local public transport services;
- b) Support advocacy for an improved rail service from Clacton, moving to a half hourly service;
- c) Take advantage of levelling up funding where available to support improved public transport;
- d) Engage with ECC and providers on the potential for Demand Responsive Transport to supplement the current public transport offer;
- e) Advocate where possible for services to be brought to coastal areas so that there is less need to travel for education and health care;
- f) Ask Heddingham to review the provision of a bus stop to support the new Marks and Spencer's store at Brook Park West, the Crematorium and the potential for park and ride to Clacton at peak tourist season building on the experience of the Airshow;
- g) Prioritise gaining developer contributions for new bus routes in the delivery of the revised Local Plan; and that
- h) Councils should take these recommendations into account when developing the Tending Future Transport Strategy (ECC) and the Local Plan (TDC).

**8. FINAL REPORT OF THE SCHOOL AGE EDUCATION PROVISION (ABSENCES AND MENTAL HEALTH) TASK AND FINISH WORKING GROUP**

On 11 July 2023, Full Council agreed the Community Leadership Overview and Scrutiny Committees work programme for 2023/2024, which included a Task & Finish Groups to enable scrutiny of pupil attendance and mental health support in secondary school education.

**As agreed by the Task & Finish Group, the overall aims of the enquiry were:**

**With reference to secondary school age provision, to consider specifically.**

- **the rate of absenteeism in schools**  
consideration of the underlying reasoning for the rise in absence rates, and the good practise in place in schools currently to reverse this.
- **mental health support available in schools**

**Partnership engagement would include:**

- Representative/s from Essex County Council education directorate in relation to school attendance/statutory compliance
- Representatives of Tendring secondary schools
- Assistant Director, Partnerships

**The Task & Finish group met on the following dates:**

11 October 2023

11 December 2023

15 April 2024

School visits were arranged between January 2024 and the end March 2024.

It was important to highlight that the report was written on the basis that the Council had no statutory role for Education, and had been prepared on the basis of influencing and bringing partners together as the Council's role as a Community Leader.

The inquiry supported the then Corporate plan themes of:

- Community Leadership Through Partnerships;
- Building sustainable communities for the Future and,
- Joined up public services for the benefit of our residents and businesses

The inquiry found that:-

- Schools were struggling to ensure that good attendance levels (95%) were being achieved by school cohorts. This challenge had increased considerably since the Covid pandemic.
- SEND and EHCP student attendance figures were weaker when compared to the general cohort.
- Schools were using a range of strategies to improve attendance figures. Most responses were in house and rely on school staff to ensure early intervention strategies were implemented.
- The main cause of absence other than physical illness was mental health.
- Fines were used for absence but mostly for holiday related absence.



- Main barriers when attempting to improve attendance were: a) extra cost for additional interventions b) resolving mental health issues c) external support was either too costly or not readily available.
- Mental health need in secondary schools across Tendring was very high.
- Mental Health demand had increased since COVID and showed no signs of abating.
- The mental health needs of young people had become more complex and this had led to teaching staff referring more concerns to higher level professionals/organisations.
- Main support strategies were (a) In school staff support, Head of Year etc (b) School employed Counsellors (c) External referral agencies e.g. CAMHS.
- In school Mental Health support was very costly and schools were absorbing these costs while trying to balance ever tighter budgets.
- External waiting lists for Mental Health support were very long. CAMHS referrals currently stand at 9 months. A child's need was often immediate, but the professional support that was needed takes months to be delivered.
- The school GCSE curriculum was a contributing factor to some negative mental health issues. Pressure to achieve certain levels/grades and the absence of an alternative curriculum lead to mental health difficulties for some KS4 students.
- Schools report that GP referrals were slow and parental support was variable.
- No school appears to have data that tracks the number of parents that de-roll their children due to Mental Health issues.
- Our results suggest that the two issues investigated by the T&F Education group were linked. A significant contributing factor to increased absenteeism are the mental health issues faced by young people.
- Schools appear reluctant to share percentage data with the T&F group

The enquiry invited consulted with Essex County Council and various schools in the District.

**External**

Anita Patel Lingam, Statutory Education Compliance Manager, Specialist Education Services, Essex County Council

**Participating Tendring Secondary Schools:**

Harwich & Dovercourt High School  
Clacton County High School  
Tendring Technology College  
Manningtree High School

**Internal**

Anastasia Simpson, Assistant Director, Partnerships  
Rebecca Morton, Executive Projects Manager, Partnerships  
Bethany Jones, Committee Services Officer, Democratic Services

After a short discussion it was moved by Councillor Barrett, seconded by Doyle and agreed to **RECOMMEND** that Cabinet:-

1. Advocate and champion where possible local mental health support for young people.
2. Seek funding opportunities, wherever possible, to provide mental health support for young people.
3. Promote the suicide prevention training (free online learning package) to schools across Tendring.
4. Support and have Officer attendance at the Tendring Education Strategic Board, Attendance sub-group.
5. Champion and continue to work closely with Family Solutions.
6. To continue to support the Primary Wellbeing hubs and cascade the evaluation from the University of Essex through the Essex Health and Wellbeing Board, Tendring Community Safety Partnership/Health and Wellbeing Board.
7. To request an update from ECC Education colleagues regarding school attendance data:-

The following requests to be submitted to ECC post January 2025 - (this will be the earliest opportunity for school data to be available under new reporting arrangements for schools. (Ref: Department for Education Guidance, "Working Together to Improve School Attendance," (update February 2024)):

- Request attendance data relating to the autumn term of 2024/25 to show levels of persistent and severe absence within the district (for the Tendring area and broken down by school).
- Number of alternative commissioning arrangements which have been commissioned by the LA (Education Access Team/SEND Team) for the Tendring district, including the reasons why such provision has been deemed necessary. This request should cover the autumn term 2024/25.
- Number of SEND children (SEN Support or EHCP) who have been removed from a Tendring school roll in favour of elective home education, during the autumn term (Tendring district data for the autumn term 2024/25, broken down by primary and secondary phases), where the reason provided suggests needs have not been met by the school.

The meeting was declared closed at 9.21 pm

**Chairman**