

# Sefton Children and Young People Emotional Health and Wellbeing Strategy

## Show and Tell - October 2025

### Getting Help: Combined agency reports



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## 1. What is currently working well and why?

- **Active Sefton - 121 Programme:** Active Sefton ensures accessibility by offering programmes at varied times and venues. Bespoke services like 1-2-1 sessions and MOVE IT create a tailored, comfortable environment that makes participants feel valued and receptive to advice. The team's experience and education workshops, such as those in Active Schools and Be Active, further support the delivery of advice and peer learning. For getting help, flexibility is key. Programmes are trauma-informed, building trust and rapport early to set achievable goals. Staff adapt sessions, venues, and schedules to overcome barriers, maintain contact as needed, and foster independence, enabling participants to sustain progress post-programme. Familiarisation with leisure centres and a free 3-month gym pass encourage continued healthy behaviours, supported by periodic check-ins. Programme length varies (6–12 sessions) based on need, and staff collaborate to link individuals with additional services when required, including Rise Up, Smokefree Sefton, Sexual Health, CAMHS, Early Help, Aiming High, and community sports clubs.
- **Parenting 2000:** Agencies and services working in this space maintain strong connections and collaborate to ensure children and young people access the right support, for example, through Early Help MDTs. Multi-Disciplinary Team meetings, now accessible online, bring together all partners involved in children's mental health in Sefton, including the Clinical Lead for CAMHS. These meetings enable case discussions to identify timely and appropriate interventions, with a particular focus on children involved with Social Care/Early Help.  
The approach fosters better communication and understanding of agency roles. There is also a long-standing commitment to workforce development across the partnership (CYPIAPT), ensuring continuous skill development and best practice locally.
- **0-19 with Healthy Child Programme:** Our approach includes early identification and assessment to recognise when a child's emotional wellbeing or a parent's mental health requires more than general advice. We provide targeted, time-limited interventions for issues such as parent-infant attachment, sleep and feeding difficulties, and perinatal mental health. Direct work with families includes structured support through listening visits, parenting programmes, and infant behaviour strategies. We collaborate with GPs, midwives, CAMHS, and

social care to ensure access to evidence-based help, while monitoring progress and stepping up care when needed. Social prescribing connects families to non-clinical supports such as parenting classes and community activities.

For ages 5–19, we maintain strong links with Mental Health in Schools Teams through quarterly meetings and work closely with Kooth, school health services, and pastoral teams. Referral processes are transparent and supported by health forms and risk pathways, enabling timely identification and safety planning. We also provide access to counselling, CBT, and community services via voluntary organisations, and offer secondary school drop-in sessions for young people without appointments.

- **Southport Education Group:** Staff signpost learners to local mental health services and provide support themselves, following July 2025 training on Sefton's Thrive Model and promoting emotional wellbeing without pathologising normal feelings. A survey of 300 learners (April 2025) showed that the most valued support is access to caring, understanding staff. Learners can access counselling, CBT, weekly drop-ins, and NHS Mental Health Support Team therapies onsite. Staff use a trauma-informed approach and partner with agencies for workshops and guidance. The curriculum covers resilience, sleep hygiene, and exam stress, tailored to learner feedback, with additional online support via Kooth. Regular self-assessment drives improvement. Southport Education Group holds the Carnegie Centre of Excellence for Mental Health in Schools Award and was nationally commended by the Association of Colleges in 2024, reflecting its holistic, strategic approach to wellbeing.
- **Early Years:** The service funds the Attachment and Trauma Award for schools and settings, with specialist crisis support provided by Dr Jennifer Nock. Two EY Team members deliver the Emotional Health and Wellbeing Award, equipping staff to promote positive wellbeing and signpost for further help. The team promotes the Monkey Bob toolkit for open conversations about feelings, particularly for children affected by domestic abuse. Partnerships with Health, Early Help, and Social Care enable information sharing, PEP support, and early identification of special educational needs.

- Inclusion and SEND:** The Graduated Approach Toolkit has been refreshed and launched with positive feedback from pilot schools. Every mainstream school now has an Inclusion Consultant and casework officer for strategic and individual support, particularly around SEMH and ASD. Key achievements include:

  - SEND & Inclusion Conference with 150 delegates (85% rated 'excellent')
  - Neurodiversity Provision Map co-produced with young people, rolling out in Sept 2025 with training
  - Trauma-informed training completed by 52% of schools, with more scheduled
  - Quality-assured Trauma-Informed Provision Map involving 32+ partners
  - Year 6–7 transition event with 91% school participation
  - Inclusion embedded in Team Around the School, offering parent coffee mornings and joint training
  - Workforce training package developed to ensure consistent messaging across services
- School Attendance Support Team (SAST):** Early intervention prevents entrenched non-attendance. A graduated response framework and attendance support plans are now in place, involving children and parents from the outset. Where barriers persist, cases progress to formal panels with multi-agency support. Additional measures include monitoring for children under statutory orders, first-day response visits for those with social workers, and complementary education for children unable to attend due to illness. All actions prioritise support first, with strong collaboration across schools and partners.
- Child and Adolescent Mental Health Services:** A variety of evidence-based interventions are available, including whole-school approaches, group sessions, one-to-one work with children and young people, parental support, staff training and workshops, transition support, summer schools, and access to specialist practitioners for consultation. The service also offers a stepped-up care model incorporating systemic work, CBT, NVR, art and creative therapies, and IPTa, supported by specialist practitioners within the SAP Team.

These interventions are effective due to short waiting times, regular staff supervision, and strong multidisciplinary collaboration. The service has a clear structure, prioritises communication with schools and families, and operates within the community to meet children and families locally.

Triage and skill-matching ensure clients are paired with the right staff, reducing delays. All staff are highly trained, and schools are kept informed of positive outcomes. The approach focuses on working collaboratively with children and families rather than imposing solutions.

- **Venus Charity – The Star Centre:**

- Offer of twice-weekly emotional wellbeing drop-in sessions. Allows people to access support as and when they need it, without waiting times.
- Renewed offer of an emotional wellbeing social group for teenage girls who may be at risk of social isolation. Allows young people to engage in a relaxed and inclusive environment without judgment or individual pressure. Activities are delivered flexibly and creatively, led by the young people who attend. Positive attendance and engagement so far.
- Low-intensity CBT interventions; delivered across two teams – successfully engage young people and their parent/carers in a short-term programme to support concerns around anxiety, low mood and behaviour. Sessions are easy to understand and aim to provide information and guidance in a concise and approachable way.
- Partnership working to deliver additional capacity of low-intensity interventions for the South Sefton area.
- Ability to escalate to higher-intensity intervention if needed, through robust pathways, partnerships and multi-disciplinary team meetings.
- Creative drop-in for neurodiverse young people currently on our waiting list.

- **Swan Woman Centre 13yrs +:** A trauma therapist has been employed to provide counselling for young people affected by trauma, enabling support for cases previously beyond service capacity.

The service is working towards becoming neurodivergent-aware, with awareness training rolled out to all staff, including receptionists, trustees, therapists, and employees. This ensures informed, appropriate support for young people who may struggle to access standard counselling.

These initiatives are effective due to investment in organisation-wide training and clinical supervision for all staff working directly with young people.

## 2. What Getting Advice improvements does your organisation want to make? What would help you do this?

- **Active Sefton - 121 Programme:** To prevent inappropriate referrals, it's essential that partner organisations and the public clearly understand the service offer. This can be strengthened through networking and engagement, such as presentations at team meetings, which have worked well in the past. While the team's knowledge of other advice services is a strength, staff turnover and organisational changes mean these needs require ongoing attention. Potential solutions include developing a training offer for new staff outlining Sefton's key services under the Thrive Model or creating a summary document that can be easily shared.
- **Parenting 2000:** Work continues to streamline processes so children and young people can access the right service quickly without being passed between providers. A pre-assessment process has been introduced to enable earlier triage, which may lead to prioritisation for therapy, escalation to a partner service, or provision of low-level interventions to support mental health and wellbeing.
- **0-19 with Healthy Child Programme:** Future developments include introducing a skill mix that incorporates mental health-trained nurse associates, based on evidence of impact in other areas. We plan to co-locate staff within Family Wellbeing Centres to provide a single point of access for families and work collaboratively across the system to strengthen the social prescribing offer.
- **Southport Education Group:** Learners are informed during induction about how to access help. Plans include expanding awareness through Thrive marketplace events and Spark Radio podcasts, broadcast in communal areas. Shorter waiting times and universal access to Thrive services are needed, supported by a teenage-friendly local guide and potentially a school nurse attached to the college. Discussions are ongoing about creating a team around the college. Results from the recent Happiness Survey show that regular attendance correlates with higher happiness. Consistent routines, connection, and belonging are central to the trauma-informed approach, creating safe, stable, and predictable environments where young people can thrive.

- **Early Years:** Multiprofessional SEMH surgeries will launch in autumn 2025 to support primary pupils. The Graduated Approach toolkit will be expanded with case studies showcasing best practice. A Behaviour Framework is being developed to guide SEMH pathways for headteachers. Trauma-informed and neurodiversity mapping tools will be rolled out alongside a comprehensive training offer in collaboration with partners.

The team also attends Electively Home Education coffee sessions to provide advice and support for reintegration where needed. All partners keep school attendance at the forefront of planning, address educational neglect early, and work with Sefton Safeguarding Children's Partnership to ensure briefings remain current and practical.

- **Inclusion and SEND:** See above, Early Help.
- **School Attendance Support Team (SAST):** See above, Early Help.
- **Child and Adolescent Mental Health Services:** Current priorities include improving accessibility of interventions and expanding Mental Health Support Teams to all schools by 2030. Plans involve increasing whole-school initiatives such as drop-ins, coffee mornings, and teacher training, as well as collaborating with similar agencies to deliver joint group work. Efforts are underway to streamline Early Help referrals through closer coordination with partner agencies and to strengthen links with CAMHS, creating a more efficient referral process in and out of specialist services.
- **Venus Charity – The Star Centre:** Reducing waiting times for low-intensity interventions is essential to ensure that young people and their families can access support promptly when concerns first arise. Currently, there is a waiting list for initial assessment, followed by an additional delay before intervention, due to capacity constraints and exceptionally high demand for the service.  
Additional physical space is required to expand capacity and provide appropriate, private therapeutic environments.
- **Swan Woman Centre 13yrs +:** Plans include expanding counselling for young people in care beyond the current Hub in Waterloo, introducing an advocacy service for those in care or transitioning, and delivering counselling and wellbeing sessions within schools.

Support groups already offer relationship workshops, confidence building, and information requested by young people; these will be rolled out across schools and other youth settings.

A young person's shadow board is proposed to mirror the Trustee group, pending funding approval. Resourcing new services remains an ongoing challenge.

### 3. Blue Sky Thinking

- **Active Sefton - 121 Programme:** Given the popularity of 1-2-1 sessions, earlier interventions could help reduce demand. For example, offering mental health awareness training to staff across various settings would enable services to embed emotional health and wellbeing outcomes into existing programmes like MOVE IT, sports clubs, VCF sector activities, and HAF provision. This approach would build resilience in children and young people before more intensive support is needed.

Supporting young people can be emotionally challenging for staff. While regular supervision and occupational health support are available, there is scope to strengthen preventative measures. Improved supervision, such as regular emotional wellbeing support delivered collaboratively with partner organisations, could help staff maintain resilience.

- **Parenting 2000:** Plans include creating a single front door for all commissioned "getting help" services, with shared triage and seamless access to appropriate support. Wider promotion of evidence-based options, such as self-help, digital tools, and group-based work, is also a priority.

Funding is being sought to deliver parent-led behaviour therapy for parents and carers of children aged 5–11. This evidence-based approach (referencing Deb McNally's work) focuses on promoting behavioural change within the family, equipping parents to support siblings and achieve sustainable outcomes. It will also strengthen results for families receiving Early Help support.

- **0-19 with Healthy Child Programme:** If MHST delivered all "Managing Worries" sessions for primary schools, this would release capacity within School Health to focus on other public health initiatives that support emotional health and wellbeing.

- **Southport Education Group:** A recent survey on student motivation, happiness, and engagement revealed that learners who feel happier and more connected are more motivated, engaged, and optimistic about their future. In response, the college is launching *The Happiness Project*, a campus-wide initiative to promote wellbeing through creativity, connection, kindness, and community. This includes small acts of joy, larger events, and projects shaped by staff and learners. Learners identified a need for more green and quiet spaces, with a Peace Garden proposed and funded through the Happiness budget. On-site partnerships have proven effective; for example, SWACA's presence last year increased staff and learner self-referrals. Replicating this model with Thrive services would remove barriers to access, provide expert support, and offer free space for local providers.
- **Early Years:** Co-producing provision mapping with young people to incorporate school attendance support, capturing evidence for the Restorative Relational Practice model ahead of rollout to 18 schools, and using Whole School SEND data to refine training and identification processes, particularly for trauma-informed practice and SEMH training. Broader partner participation in Monitoring and Placement panels to address the needs of children too ill to attend school, ensuring greater scope and diversity of provision
- **Inclusion and SEND:** See above, Early Help.
- **School Attendance Support Team (SAST):** See above, Early Help.
- **Child and Adolescent Mental Health Services:**
  - Develop our offer to cover all schools by 2030. This is in line with the government Agenda for MHST
  - Engaging in Staff care and wellbeing activities.
- **Venus Charity – The Star Centre:** Early engagement with strength-based therapeutic approaches during the first 1,001 days of a child's life, from conception to just under two years of age, is critical. A service trialled this year, iVIG, focused on video-recorded interactions with children up to age two. However, uptake of the video element has been limited among parents in the area. The strengths-based component of this approach could be expanded through integration with perinatal and

postnatal services, supporting alignment with the 'Best Start in Life' framework.

- **Swan Woman Centre 13yrs +:** Plans include introducing late-night mental health drop-in facilities for young people, extending hours to Thursdays, Fridays, and weekends, and providing weekend mental health advice and support. Additional focus will be placed on tailored mental health support for young people who identify as neurodivergent.

#### 4. Where is the voice of the child in your service?

- **Active Sefton -121 Programme:** The service captures the voice of the child in several ways. On the 1-2-1 programme, mental wellbeing forms are completed at the start and end, and participants can provide feedback to inform improvements. Programmes are also tailored to individual needs and preferences, discussed directly with the child or young person during initial engagement.
- **Parenting 2000:** The therapy service uses creative methods, such as drawing, painting, origami, playdough, sand play, and storytelling, to capture the voice of the child in a way that builds trust and avoids influence. Therapists are trained to listen and encourage expression. For engagement outside the service, age-appropriate publicity is used: Instagram for adolescents, Facebook for parents, and outreach via youth workers in Southport. A dedicated Youth Voice lead gathers opinions through discussion, video, and drama to inform service improvement.
- **0-19 with Healthy Child Programme:** We capture the voice of children and young people through multiple methods, including feedback during Healthforms delivery, drop-in sessions, and health assessments. Engagement also occurs through events and their evaluations (e.g., Crucial Crew, Year 11 carousel, TAS, Local Offer Live), as well as through the Friends and Family Test.
- **Southport Education Group:** The college conducts regular surveys, including induction, end-of-year, mental health and wellbeing, and

happiness surveys, to gather student feedback and inform improvements. Each progress group has a student representative who collects peer feedback and shares it during meetings with college managers, ensuring student voices are heard. Themed focus groups explore topics such as enrichment, safeguarding, and mental health, providing valuable insights. The mental health and wellbeing policy was developed with input from student mental health ambassadors to ensure it is student friendly.

Staff have contributed to Sefton's Public Health Annual Report, *What Keeps You Well*. Two staff members, also young adults living in Sefton, were featured as case studies, sharing the supports that sustain their mental health through interviews and photography.

- **Early Years:** The EY SEND Team observes children with SEND at home and in educational settings, capturing the child's voice through observation and conversations with families and professionals. This helps identify what works well and informs strategies and interventions to narrow gaps and provide timely support.
- **Inclusion and SEND:** Young people are involved in quality assurance of the neurodiversity provision map, and feedback from the SEND Conference and transition events informs future planning. Parent engagement is supported through coffee mornings, joint sessions with health, and participation in Local Offer Live alongside parents and carers. The voice of the child is captured at every annual review and during initial EHCP needs assessments.
- **School Attendance Support Team (SAST):** Children are actively involved in improving their school attendance through participation in School Attendance Support Plan meetings and are listened to throughout the process. Where early help plans are initiated, the child's voice is included at every stage—from assessment to closure. In schools with student councils, attendance culture is regularly discussed to promote engagement.
- **Child and Adolescent Mental Health Services:** As an opt-in service, children and families can choose whether to engage with interventions. We maintain dedicated participation groups for parents and for children and young people, which help review service materials to ensure they are accessible and appropriate. Young people are actively involved in shaping group content, tailoring it to their needs, and are invited to join

interview panels for new staff. Sessions use routine outcome measures, collaborative agendas, and goal setting. Whole-school approaches introduce staff and intervention types to large numbers of pupils, while individual sessions are guided by what children and young people want. Risk-sharing is always discussed with them to agree on how information is shared. We also participate in external events and remain flexible to meet the evolving needs of children and young people.

- **Venus Charity: The Star Centre:** Further development in this area is planned through increased engagement of young people as part of a participation group. In individual sessions, the child's voice guides the intervention, with a focus on obtaining consent and understanding their goals and expectations. Interventions are designed collaboratively to ensure they are appropriate and tailored to personal needs. For example, young people work with practitioners to set the agenda for each session. In the systemic family offer, while all participants are considered clients, the young person's voice remains prioritised, and they choose who is involved.
- **Swan Woman Centre 13yrs +:** YMM support group attendees act as a consultation group, providing input on service delivery and development through focus groups, surveys, and creative methods such as arts and journaling. Their feedback is shared at team meetings and strategy days, and a representative usually attends the AGM. If funding is secured, a more formal co-production approach will be introduced.

## 5. Does your service have policies and processes for gathering feedback from young service users?

- **Active Sefton -121 Programme:**
  - Mental well-being form starts and finishes
  - Feedback form
  - Progress tracker
  - Feedback/progress update letter to referral agent
  - Case study

- **Parenting 2000:** Online survey tools are used for feedback from young service users, while very young children use facial expressions to indicate responses.

All children have an age-appropriate contract with their therapist that outlines boundaries, including confidentiality and safeguarding exceptions. Consent is sought before sharing information with parents or professionals, except where safeguarding requires disclosure.

Any changes to policy or process are discussed with the child to ensure understanding and allow their input, keeping their voice integral to decision-making.
- **0-19 with Healthy Child Programme:** Feedback and engagement are captured through the Friends and Family Test, individual feedback during Healthforms delivery, and evaluations of key events such as Crucial Crew, Year 11 carousel, TAS, and Local Offer Live. We also work with Young Advisors via Sefton CVS and consult School Councils when developing service changes, such as updates to Healthforms.
- **Southport Education Group:** The college has a Mental Health and Wellbeing Policy outlining processes for gathering learner voice. These include regular student surveys with varied focuses, themed focus groups, and a student council to ensure feedback informs improvements.
- **Early Years:** As part of the Early Years Service, Portage Advisors provide families with a six-week support package. Upon completion, families are asked to evaluate their impact, and an assessment tool is used to measure the child's development. This process captures feedback and informs next steps for the child's progress
- **Inclusion and SEND:** The service places the child or young person at the centre of the EHC assessment and planning process, capturing their views, wishes, and aspirations alongside those of their family to shape meaningful outcomes, in line with the SEND Code of Practice (2015).
- **School Attendance Support Team (SAST):** As part of quality assurance, feedback is gathered from children and family members on their experience of early help plans. This also occurs during case audits to ensure continuous improvement.

- **Child and Adolescent Mental Health Services:** We gather feedback and ensure participation through multiple channels, including Experience of Service questionnaires, session-by-session rating scales, and dedicated participation groups for parents and young people. Additional engagement includes CAMHelions and representation on the Alder Hey Patient Experience Oversight Committee, which reports directly to the Trust Board.
- **Venus Charity:** Capturing outcomes and feedback is a priority. Paired questionnaires are used to track progress on issues such as anxiety and low mood, supporting practitioner work and conversation. In 2024–25, 51% of eligible referrals had paired outcome measures recorded (up 7% from 2023–24), with 55% showing improvement.  
At discharge, the Experience of Service Questionnaire (ESQ) gathers feedback from young people and families. Since April 2024, 95% would recommend the service and rated it as good. Written feedback highlights feelings of safety, support, and confidence in the future. Young people contribute to recruitment panels and planning processes. Feedback is also sought from wellbeing groups, including consultation on online developments.
- **Swan Woman Centre 13yrs +:** A formal Consultation Policy is in place, and staff receive training on engaging young people effectively. The service works exclusively with those aged 13 and above, allowing a focused approach to delivering high-quality support.

For further information on each service, please see Appendix 1 below.

## Appendix 1

- **Active Sefton -121 Programme:** The 121 service is a physical activity programme designed to improve the health and wellbeing of Sefton's young people (aged 11-19) who may need support. The project is

designed to use weekly physical activity or sport sessions to have a positive impact on the young person's health and wellbeing, using Development Officers as mentors. The programme aims to increase self-esteem and the health and wellbeing of Sefton's young people in need of support, as well as helping them feel able to engage in dialogue about issues that may be affecting them. It is designed to be bespoke to the individual's needs. It will utilise a variety of activities and techniques to motivate the young person and break down barriers, helping them feel supported during the transition to independent participation in activities. It is delivered in Active Sefton leisure centres or secondary schools.

- **Parenting 2000:** Provides early intervention and preventive emotional and practical support, alongside information and guidance for children, young people, and families. Services include therapeutic counselling, talking therapies, creative therapies, group psychoeducational workshops, and parenting programmes.

The partnership has a long-standing commitment to workforce development, including initiatives such as CYPIAPT, which promote continuous skill enhancement and the application of best practices locally. This ongoing development ensures services remain relevant and responsive to emerging local needs.

The breadth of specialist knowledge and expertise within the partnership enables CYP to access the most appropriate treatment from the proper professional and service. We provide direct support within the "Getting Help" space and signpost individuals who require a different level of intervention or a specialist modality. Conversely, we also receive referrals from partner organisations when our service is best suited to meet the individual's needs.

- **0-19 with Healthy Child Programme:** The 0–19 Healthy Child Programme (HCP), delivered by Mersey Care, is a universal and targeted public health nursing and early help offer for children, young people and families from birth to 19 years old (25 years old with SEND). The service includes Health Visiting (0–5), School Nursing (5–19), infant feeding support, and targeted early help interventions delivered through Family Hubs and community settings. The core aim of the 0–19 HCP is to improve health and wellbeing outcomes, reduce health inequalities, and support children to achieve their potential. The service is delivered through a combination of developmental reviews, emotional and mental wellbeing support, 17 safeguarding work, parenting advice, health

promotion, and close partnership work with education, health, social care, and voluntary sector services. Key functions include:

- Universal health and development reviews at key points of the HCP in Health Visiting and School Health
- Emotional health & wellbeing support/advice for children, young people and families
- School-based support including drop-ins, health assessments, child/parental self-referral and signposting
- Parenting support and 1:1 advice
- Support for vulnerable children, including those with SEND, safeguarding concerns, or living in challenging circumstances
- Health promotion and advice across a range of areas, dependent upon need
- Signposting families into specialist support where necessary. The service is embedded within a whole-family approach, working collaboratively with Family Hubs, schools, CAMHS, youth services and other local providers to ensure children and families get the right help, at the right time, in the right way

- **Southport Education Group:** is a medium-sized Further Education college operating across two sites in Southport. Southport College serves a diverse cohort of 16–18-year-old learners, apprentices, and adults, while KGV Sixth Form College primarily supports 16–18-year-olds on study programmes. The Group has approximately 1,700 full-time learners and a total of around 3,000 learners.

We provide a comprehensive mental health and wellbeing support service, recognising that anyone can experience challenges at any time. Dedicated on-campus teams offer advice, guidance, and referrals to specialist services, as appropriate, ensuring learners have access to timely, practical support.

- **Early Years:** The Early Years Service currently provides universal and targeted support to Early Years Providers across Sefton. Providers include Schools, Maintained Nursery Schools, Private, Independent and Voluntary Nurseries, Childminders, and Wrap-around providers. Our focus is to ensure that providers offer the highest-quality care and education and effectively support children with SEND. Key priority groups are also supported to ensure they can make progress and thrive, for example, children from disadvantaged backgrounds. We have an Early Years Quality team and an Early Years SEND team who work collaboratively to raise outcomes for young children.

- Inclusion and SEND:** The SEND and Inclusion Team in Sefton provides strategic leadership and operational support across early years, school-age and post-16 settings. The team includes SEND Officers, Inclusion Consultants, Inclusion Officers, Educational Psychologists, and outreach specialists. It supports the Graduated Approach, EHCP processes, and inclusive practice across mainstream and specialist settings for all areas of SEND need.
- School Attendance Support Team (SAST):** supports and challenges children and parents where school attendance is a concern. Statutory duties require formal processes that may lead to legal intervention, but this only occurs after all supportive measures from schools, early help, social care, health, and third-sector partners have been exhausted. This approach follows the Department for Education's statutory guidance, *Working Together to Improve School Attendance* (introduced August 2024), which sets out clear steps for addressing attendance issues. The DfE's IDAMS system provides daily updated attendance data, which informs termly targeted support meetings led by a Single Point of Contact (SPOC) from the Sefton Attendance Support Team (SAST). These meetings review persistent absence (10% attendance) and severe absence (50% attendance) cases, ensuring appropriate support and challenge are in place. The SPOC acts as a key link between schools and early help services, coordinating interventions and monitoring progress. The overarching aim is to ensure children attend school regularly, where they can be safe, happy, and achieve.
- Child and Adolescent Mental Health Services:** provides evidence-based mental health support across Sefton through four locality teams and a specialist Alternative Provision Team for children with SEN and additional needs. The service focuses on early intervention, equipping children, young people, and families with skills to manage difficult emotions effectively. Most interventions take place in schools, supported by strong partnerships with staff through consultation, training, and whole-school approaches. These include assemblies, classroom sessions, targeted groups, and peer mentoring programmes. MHST also offers evidence-based group work for parents and young people, as well as one-to-one interventions.

Routine Outcome Measures are used to monitor progress, with data submitted to the national dataset for assurance and continuous improvement.

- **Venus Charity - The Star Centre:** The Star Centre is a trauma-informed therapeutic wellbeing service delivered by the Venus Charity for children, young people, and families residing in Sefton. The service is dedicated to promoting positive mental health. It offers a comprehensive range of interventions to address wellbeing challenges, including anxiety, low mood, self-esteem issues, relationship difficulties, and behavioural concerns.

Therapeutic approaches available at the Star Centre include person-centred counselling, cognitive behavioural therapy (CBT)-informed practice, and systemic family interventions. In addition, tailored parenting support is provided to help manage anxiety, behavioural challenges, and diagnosed neurodevelopmental conditions.

To ensure accessibility, the Star Centre offers weekly drop-in sessions that do not require an appointment or referral, as well as social wellbeing groups designed to foster connection and resilience.

- **Swan Woman Centre 13yrs +:** A dedicated charity supporting women and girls through gender-specific, trauma-informed, and neurodivergent-aware mental health services. Based in the former Litherland Library, SWAN has been delivering mental health support to the local community for over 30 years.

The Centre provides a safe and welcoming environment for women and girls to access tailored mental health services. Opening hours are Monday and Wednesday from 9:00 am to 8:00 pm, Tuesday until 7:00 pm, and standard office hours on Thursday and Friday. Our team comprises 11 staff members and 84 volunteers, including 35 volunteer counsellors.

Services for young women aged 13–25 include:

- Professional Counselling Service: 8–12 one-to-one sessions (current waiting time: 10–12 weeks).
- Advocacy Service: Support to ensure voices are heard (waiting time: approximately 4 weeks).
- Mental Health Support Service – *Your Mind Matters Project*: 12 sessions with mental health practitioners, followed by six months of check-in calls (waiting time: approximately 4 weeks).
- Young Women’s Mental Health Support Groups: Two professionally-led groups for ages 16–25.

