

Safe and Strong Communities Select Committee

Tuesday, 1 September 2020 **10.00 am** http://moderngov.staffordshire.gov.uk/ieListMeetings.aspx?CommitteeId=6 Teams meeting

NB. Members are requested to ensure that their Laptops/Tablets are fully charged before the meeting

John Tradewell Director of Corporate Services 21 August 2020

AGENDA

- 1. Apologies
- 2. **Declarations of Interest**
- 3. Minutes of the Select Committee meeting held on 7 July 2020 (Pages 1 6)
- 4. Stoke-on-Trent and Staffordshire Safeguarding Children's Board (Pages 7 50) (SSSCB) Response to Covid-19

Report of the Cabinet Member for Children and Young People

5. Work Programme

(Pages 51 - 56)

6. Exclusion of the Public

The Chairman to move:-

"That the public be excluded from the meeting for the following items of business which involve the likely disclosure of exempt information as defined in the paragraphs of Schedule 12A (as amended) of the Local Government Act 1972 indicated below".

Part Two

(All reports in this section are exempt)

Committee Membership

Ann Beech Ron Clarke Ann Edgeller John Francis (Chairman) Trevor Johnson Bryan Jones Jason Jones Paul Snape Bob Spencer (Vice-Chairman) Mike Worthington

Note for Members of the Press and Public

Filming of Meetings

The Open (public) section of this meeting may be filmed for live or later broadcasting or other use, and, if you are at the meeting, you may be filmed, and are deemed to have agreed to being filmed and to the use of the recording for broadcast and/or other purposes.

Recording by Press and Public

Recording (including by the use of social media) by the Press and Public is permitted from the public seating area provided it does not, in the opinion of the chairman, disrupt the meeting.

Scrutiny and Support Manager: Mandy Pattinson Tel: (01785) 278502

Minutes of the Safe and Strong Communities Select Committee Meeting held on 7 July 2020

Present: John Francis (Chairman)

Attendance

Ann Beech Ron Clarke Ann Edgeller Jason Jones

Paul Snape Bob Spencer (Vice-Chairman) Victoria Wilson

Also in attendance: Mark Sutton

Apologies: Trevor Johnson and Mike Worthington

PART ONE

32. Declarations of Interest

There were none at this meeting.

33. Minutes of the Safe & Strong Communities Select Committee meeting held on 13 January 2020

RESOLVED – That the minutes of the Safe & Strong Communities Select Committee held on 13 January 2020 be confirmed and signed by the Chairman.

34. Response to COVID-19 for SCC Children and Families Services

The Cabinet Member for Children and Young People introduced his report outlining the Children and Families Services response to Covid-19. He thanked all staff for their adaptability and dedication in supporting the most vulnerable children and families during the pandemic, including staff within Children and Families Services, as well as those in education and childcare.

Throughout this period over 200 pieces of new, additional and amended guidance had been received from the Department of Education (DfE), Public Health England (PHE) and other regulatory and statutory bodies. This included core statutory legislative changes to the Children and Families Act and easements to the SEND Code of Practice. All these changes had been assimilated and locally interpreted before being communicated to staff, partners, education settings and commissioned providers.

Staff commitment and resilience throughout the period had been remarkable, with circa 86% staff availability to work being maintained. A small number of staff had been shielding or were required to self-isolate, whilst 60% of staff had been available to conduct home visits. Gratitude was also shared for the work of ICT colleagues who had ensured appropriate ICT equipment and support was available for staff throughout this

period which had enabled the service to continue its work. These changes gave access and agility, enabling a shift from face to face working with families to a comprehensive digital offer. Many young people had engaged better through the use of virtual meetings than previously, and whilst there remained a need for face to face contact in some instances, the new digital approach had seen benefits.

Thanks was also given to the work of the Council's health, safety and wellbeing team who had worked with the business support team in each district to ensure that there was sufficient and effective Personal Protective Equipment (PPE) distributed for front-line practitioners from the beginning of lockdown. Staffordshire County Council's (SCC) iCount volunteers had also provided support in a variety of ways, including the creation of PPE packs for a range of providers. Staff volunteers had also worked to ensure that the Domestic Abuse refuges across Staffordshire remained open and accessible.

Members received details of the operating model developed to address the new ways of working necessary during the pandemic lockdown.

Staffordshire schools had switched to providing remote learning for most children and young people but had remained open to support vulnerable children and the children of essential key workers. A process had been quickly established for identifying vulnerable children not in contact with their education settings, with contact made with those remaining at home to seek assurances that appropriate safeguarding and support remained in place. Data suggested that around 20% of children with a social worker attended school, with those remaining at home having been contacted regularly by their schools.

Members were pleased to note that more children were able to attend Staffordshire schools than many other authorities and that Staffordshire Schools were amongst the top performers nationally for this. Returns to the DfE indicating the number of vulnerable children and young people who had a current completed risk assessment had been 100% in Staffordshire, one of only a very few local authorities to have achieved this. The risk assessment enabled staff to predetermine the interaction necessary with each child.

Around 52% of all Early Year's settings had remained open to provide places for vulnerable children and children of critical workers. A project team had been developed to respond to the crisis and broker alternative placements for 132 critical worker families (175 children in total). The crisis had impacted on the sustainability of some Early Years settings and funding support had been necessary to ensure appropriate provision remained in the longer-term.

Children's Centres had been closed in line with Government guidance, except for emergency childcare which operated through some districts.

Residential, foster care and supported accommodation markets had been stable for the last two months, with a downturn in residential placements. Staffordshire was one of the few local authorities that hadn't seen prices for residential care increase. Foster carers had received a "lockdown allowance", equivalent to the summer holiday payment, to support the education of children at home as well as extra household expenses. The supported accommodation sector had continued to be managed and providers had

worked well to accommodate the current demand and were keeping children post18 until housing associations were back to their usual allocations.

Many care leavers and other vulnerable children and young people had engaged more freely with services via technology than they may previously have done. Future services will consider the learning from these changes to influence ways of working. Care leavers had been provided with extra data to enable them to access digital services, with the free wifi establishments (cafes etc) they may previously have been able to use being unavailable during lockdown.

To help prevent placement breakdown and promote stability a contract had been brokered with Entrust to utilise the Laches Wood outdoor education centre in South Staffordshire for short breaks. This provision had been accessed by over 20 children and young people, with none of these placements having broken down. Work with Early Years had also identified 12 childminding families who could provide additional care for children 0-18 years and offer overnight care for up to 28 days. This resource had supported placements made by the Emergency Duty Service and had provided short breaks for fostering families when necessary. This new resource also had the potential to expand further to provide overnight care for "children in need" under section 17 of the Children Act 1989.

A core set of data indicators had been established to evidence and monitor the impact of service changes. Recent findings from this data showed:

- the number of children being referred was returning and stabilising at pre lockdown levels;
- the number of children going missing was 25 (23 children) and seemed to have returned to pre-lockdown levels;
- the number of children allocated to a social worker had stabilised.

Members commended the work of Catch22, the commissioned service working with missing children, and asked that a letter of thanks be forwarded to them on behalf of the Select Committee for their continued professionalism and commitment throughout the crisis.

The proportion of children referred where domestic abuse (DA) was a factor was monitored each week. Overall, since the start of the Covid-19 restrictions, the proportion of children with DA identified as a referral factor had increased above the 12-month average. However, the proportions were affected by the reduction in the overall number of children being referred as the actual number of children remained unchanged until the start of May when restrictions were eased. A partnership group had been established at the beginning of Covid-19 to closely monitor DA and work together to mitigate the assessed risks. Members had some concerns that, whilst Staffordshire had not seen a significant rise in the levels of DA, a small group of children may be suffering from increased exposure. The concerted partnership working had enabled services to be focused on supporting children where there was a known risk around repeated domestic violence. This included visits by police colleagues where risks were identified, with appropriate responses triggered whenever there was an alerted risk.

The Government had so far assigned £3.2bn for local government in their response to Covid-19, of which SCC would receive c £38m. Of that allocation Children and Families

was currently expected to incur additional exceptional spend of circa £1.3m in response to the pandemic, although the estimated cost to the service was considerably higher at circa £6.6m due to the delayed delivery of planned savings of c £4.8m and lost income of c £0.5m.

As a result of other statutory bodies having to alter their operating model or close services a number of backlogs had been identified which would impact on the ability to complete or progress key outcomes for children and young people. This included 19 young people eligible for independent housing provision having to remain in supported accommodation funded by the local authority as housing providers had stopped all new allocations during lockdown. Between 30-50 children and young people who would have expected to have exited the care system through adoption orders, care orders discharges and special guardianship orders were now remaining as children in care due to the closure of courts for anything other than urgent safeguarding cases. It was anticipated that clearing the backlog of this enormous reduction in family court capacity would take between 9-12 months. Whilst Courts were now beginning to work face to face again SCC had been looking at ways to increase capacity and therefore reduce the backlog. Alternative venues were being suggested, such as County Buildings and Staffordshire County Showground, but this was dependent of the judiciary having staff numbers to accommodate the increased workload.

Members accepted that no one could have foreseen the current crisis and that the Service had responded brilliantly, however there were clearly budget implications and the anticipation that Medium Term Financial Strategy (MTFS) identified saving were unlikely to be met. The £8m service investment over four years had been based on the introduction of restorative practice. It had been a corporate decision to pause the major programmes over the last 3-4 months during the crisis. The 30-50 children remaining in the care system due to the crisis had an impact on costs. Additionally 10 asylum seeker children were now resident in Staffordshire following a request from Kent and Southampton council's for support to address capacity issues. Volunteering to take the extra children had been the right thing to do, although it incurred further costs to the Service. Whilst there would be some slippage as a result of the crisis, the Service was on course to resume project investment with the £8m to be spent as agreed. However, the savings identified in the MTFS were at risk, particularly in light of the 12 month court backlog. The £1.3m Government fund to support dealing with the crisis was helpful but didn't take account of the indirect costs incurred as a result of the crisis, eg the nondelivery of savings. Local Government were currently lobbying Central Government around recouping these savings. Further mitigating action was being explored, such as the suggested alternative venues for court hearings.

A supporting vulnerable families programme had been developed to enhance community response to those families most in need. Families had been identified using a range of data and information that indicated they were financially excluded and therefore at greater risk during Covid-19 restrictions. Survival packs were created and funded by the Community Foundation (£15,000), SCC Members (1803.00) with the remaining balance from SCC. A range of families had also sought community support, including Alice Charity cleaning packs, food parcels, laptops for children and accessing emotional wellbeing support for parents. Of the 3000 families contacted 511 had engaged with the newly established Facebook Family Hubs.

Members were pleased to note that communication with staff, partners and schools had been effective and well received, noting the range of methods used, including webinar videos, Facebook live chats and YouTube clips.

Interim Emergency Locality Teams (ELTs) had been developed in each district to support schools and families during the crisis. These teams ensured a consistent approach from early years through to post-16, including SEND provision. The ELTs also provided a mechanism for wider discussions around supporting vulnerable families during lockdown to ensure they received appropriate support.

Members received details of the SCC Covid-19 Planning and Recovery Group, with each directorate leading recovery for its own area whilst cross cutting themes were led through recovery groups linked to four principles: communities; digital; people; and, climate change. They also received details of the high level and immediate priorities for the Families and Communities Directorate, with these being monitored through a range of workstreams against a set of core indicators and deliverable.

Members were also pleased to note that, whilst the Government had introduced a number of flexibilities to legislation for children's services around timescales, these timescale flexibilities had not been used in Staffordshire. Services had not faltered, and all Staffordshire children and young people had been seen in line with statutory guidance and to the original pre-Covid timescales. Schools had been excellent, working flexibly throughout the crisis, incorporating new guidelines and facilitating as many children as possible to return to school as the restrictions began to lift.

The Select Committee congratulated the staff for their dedication and commitment. They felt it was clear that services had acted swiftly to address the issues faced by the crisis and to adapt to the new working arrangements. The wide range of initiatives to help support the most vulnerable children and families was impressive, as was the partnership working that had ensured the service success and safeguarding of the most vulnerable. Members noted that both the Cabinet Member for Children and Young People and the Deputy Chief Executive and Director of Families and Communities had expressed their pride in the Service, its staff and the way they had risen to the challenges of the current crisis. Members wished to add their gratitude to all the staff, both in SCC and schools and early years setting, for the remarkable way they have managed to adapt and address the issues they faced.

RESOLVED – That:

- a) the Children and Families Services approach and response to Covid-19 be noted and endorsed;
- b) the approach to understanding the impact and risks associated with the Covid-19 response be endorsed; and,
- c) a letter of thanks be sent to Catch22 for their continued professionalism and commitment throughout the crisis.

35. Mick Harrison

Members shared their memories of Mick Harrison, Assistant Director in the Families and Communities Directorate. Mick had been involved in the work of this Select Committee

and Members had appreciated his knowledge and expertise. Previously working within the Police Force Mick had given many years in public service. Sadly Mick died on 2 April. He will be very sadly missed and the Chairman asked that the Select Committees condolences be sent to his family.

36. Work Programme

Members considered their draft work programme 2020/21. As a result of the Covid-19 crisis two Select Committee meetings had been cancelled resulting in the following items being postponed:

- Update on the Children's Transformation Plan;
- Progress with the Children's Services Improvement Plan;
- Domestic Abuse; and,
- Catch 22 update.

To help prioritise work programme items a briefing paper will be requested on these items. Members also asked for details on the recent Police raids due to County lines to be included in the briefing.

The next meeting is scheduled for 1 September at which Members requested inclusion of the Stoke-on-Trent and Staffordshire Children's Safeguarding Board report, included as an appendix to the Covid-19 response report at this meeting.

Members noted that the SEND working group was due to meet on 27 July.

The Chairman also updated Members on the Children's Improvement Board. He suggested that an informal briefing session should be arranged for the Select Committee to help understand developments.

A further item was suggested around child illness and mental health concerns post lockdown to consider the impact on children, young people and their families of the current crisis.

RESOLVED – That amendments be made to the work programme as listed above.

Chairman

Local Members Interest N/A

Safe and Strong Select Committee - Tuesday 01 September 2020

Stoke on Trent and Staffordshire Safeguarding Children's Board (SSSCB) Response to Covid-19

Recommendations

It is recommended that the Select Committee:

- a. Notes and endorses the approach taken to response;
- b. Endorses the approach to understanding the impact and risks associated with the COVID-19 response and the role the SSSCB has in this by gaining assurance from the wider children's system.

Report of Cllr Mark Sutton, Cabinet Member for Children and Young People

Summary

- 1. This paper details the approach that the SSSCB has taken in response to the COVID-19 pandemic. It identifies the high-level impacts of COVID-19 on the wider children and family services, the commissioned providers and education settings during the period of 24 March 2020 to August 2020 including the easing of some restrictions.
- 2. It also describes the learning from the response phase, the high-level impacts, risks and progress whilst recognising the aspects required for a continuing recovery phase.

Report

Background

- 3. On Monday 23 March 2020, the Prime Minister Boris Johnson announced to the nation that the COVID-19 virus was expected to reach unprecedented levels and was at that of a pandemic. The government took the step of initiating a full lockdown of activities and social movement in order to attempt to contain and mitigate the predicted impact.
- 4. It is the biggest, longest, deepest peacetime emergency we have ever faced, and it is unlikely the world will ever be the same again it has changed in ways we could not have anticipated.
- 5. It is acknowledged that the public health measures that have been put in place to manage this (social distancing, infection prevention and control) will be with us for

some time and "going back to normal" is not an option in the short or medium term.

- 6. The impact and measures required to manage this in support of children and their families in Stoke on Trent and Staffordshire required a range of decisions and changes to the operating functions and activities delivered by all providers in order to maintain safe service delivery.
- 7. Throughout the period outlined it should be recognised that from the Department of Education, Public Health England and other regulatory and statutory bodies there were over 200 pieces of new, additional and amended pieces of guidance. Core statutory legislative changes were also made to the Children and Families Act and easements to the SEND Code of Practice. All required assimilation and local interpretation prior to being communicated to staff, partners, education settings and commissioned providers. List available at Appendix 1. The dissemination and distribution of these updates was achieved through regular liaison with partners and through the developed media channels of Twitter; Facebook; Website and a Covid newsletter.
- 8. Whilst the SSSCB recognise that this step was necessary, its effects disproportionately affect children as the sources of support that were previously available to most children and young people, including school and a network of friends and extended family members, have been removed. Additionally, there has been an increase in family stress for households facing additional financial and social pressures from COVID-19 (RCPCH, May 2020). Through a range of mechanisms such as questionnaires, surveys and audit activity SSSCB has gained assurance from all key partners that those children and families who have a cause for concern have remined a priority for all partners to continue engaging with.
- 9. As a result, the SSSCB have been monitoring and gaining assurance from the wider children's system to determine the approach moving forward with an aligned partnership risk assessment.

Role of the Safeguarding Board

- In Working Together to Safeguard Children (2018) the role and statutory function of the Safeguarding Board stipulates that:
 'A safeguarding partner in relation to a local authority area in England is defined under the Children Act 2004 (as amended by the Children and Social Work Act, 2017) as: (a) the local authority (b) a clinical commissioning group for an area any part of which falls within the local authority area (c) the chief officer of police for an area any part of which falls within the local authority area'
- 11. In order to work together effectively, the statutory safeguarding partners with other local organisations and agencies should develop processes that:
 - a. facilitate and drive action beyond usual institutional and agency constraints and boundaries

- b. ensure the effective protection of children is founded on practitioners developing lasting and trusting relationships with children and their families
- 12. It should be recognised that each organisation will have their own recovery plans however it is the role of the SSSCB to support and enable local organisations and agencies to work together in a system where:
 - a. children are safeguarded, and their welfare promoted
 - b. partner organisations and agencies collaborate, share and co-own the vision for how to achieve improved outcomes for vulnerable children
 - c. organisations and agencies challenge appropriately and hold one another to account effectively
 - d. there is early identification and analysis of new safeguarding issues and emerging threats
 - e. learning is promoted and embedded in a way that local services for children and families can become more reflective and implement changes to practice
 - f. information is shared effectively to facilitate more accurate and timely decision making for children and families extract from Working Together 2018

Covid 19 oversight

- 13. As part of the role of the SSSCB there has been wide engagement with all safeguarding partners to ascertain the stages and the remit of their recovery plans. It should be recognised that no partner has withdrawn its services fully and the commitment of the wider children's workforce to maintain levels of service for vulnerable children and families has been outstanding.
- 14. Safeguarding workforce training during Covid 19: face to face training has been removed and online/webinars/podcasts etc. have been made available and developed e.g. level 1 E-learning and core level 1 slides have always been available; a blended learning package for level 2 is being developed and will be launched in September; levels 3 and 4 specialist training based around Board priorities are commissioned. Feedback from partners has been really positive with more demand than would be normally expected for these virtual training opportunities.
- 15. New Era (Domestic Abuse service) report a maintained service throughout the pandemic for both victims and perpetrators via remote working arrangements. Service users' risk have been assessed and contact with all service users has also been maintained.
- 16. The contextual safeguarding MACE panels, although paused for the first month (March 2020), resumed quickly and are running virtually and are positively well attended by partners seeking solutions and positive outcomes for vulnerable young people. There is an audit planned of the panels to assess the wider impacts and outcomes of Covid-19.
- 17. The level of assurance from the SSSCB has been maintained by increasing its frequency of meetings whilst continuing with its business as usual activities and

meetings. A specific partnership meeting has been in operation from April 2020 and meets fortnightly for all partners to share and discuss concerns and successes. This allows for a rapid response to any emerging concerns which can be escalated to the SSSCB who have also upped their meeting to monthly to ensure strategic oversight.

- 18. As a result of all these meetings and activity a risk assessment and recovery plan has been developed. The results of these questions and assessment can be found in a very detailed Appendix 2.
- 19. The key findings from this are;
 - a. All partners are into recovery planning.
 - b. There are backlogs which will impact on recovery, for example the recovery of the courts will significantly reduce capacity for some considerable time, this is a national issue and one that the judiciary are scoping a recovery plan to mitigate
 - c. All agencies foresee an increase in demand, but there is a lack of consistency about what we should be planning for. One organisation is planning for 3 scenarios (10%, 20% and 30% increases.) Given the level of uncertainty this seems a pragmatic approach and one the board has recognised and requested to be reflected as the risk assessment is refreshed
 - d. No partners have plans to stop and reduce services levels as we respond to a potential increase in demand or experience local lock downs.
 - e. Access to PPE is of concern to some partners
 - f. The implementation of track and trace is presenting an additional pressure for the partnership's recovery efforts and this is a particular pressure for some partners.
- 20. The risk and recovery plan will be reviewed monthly at the SSSCB in order to have assurance of safety of children across the wider children's system

List of Background Documents/Appendices:

Appendix 1 - COVID Guidance for Children's Services Departments 06/20 Appendix 2 - SSSCB Partnership Risk Assessment of COVID 07/08/20

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Type Of Date of Article Last Update		Link / Headline	Details	Update History	Publishing Department
Helpline	Current	DfE HELPLINE 08000 46 86 87	Hover	As Published	Department for Education
Video Bulletin	08/06/20	Video Bulletin 08/06/2020	Hover	As Published	West Midlands Children's Services
Guidance	07/06/20	Number of coronavirus (COVID-19) cases and risk in the UK	Hover	Hover	Department of Health and Social Care
Press Release	07/06/20	Extra mental health support for pupils and teachers	Hover		Department for Education
Guidance	06/06/20	Management of exposed staff & patients in health & social care settings	Hover	Hover	Public Health England
Guidance	05/06/20	PPE portal: how to order emergency personal protective equipment	Hover	As Published	Department of Health and Social Care
Press Release	05/06/20	£7 million for new coalition of vulnerable children's charities	Hover	As Published	Department for Education
Guidance	05/06/20	Coronavirus outbreak FAQs: what you can and can't do	Hover	Hover	Cabinet Office
Guidance	05/06/20	<u>Ofsted: coronavirus (COVID-19) rolling update</u>	Hover	Hover	OFSTED
Guidance	05/06/20	RENAMED: Testing For COVID-19	Hover	Hover	Department of Health and Social Care
Guidance	05/06/20	(RENAMED) Actions for Early Years and Childcare during COVID-19	Hover	Hover	Department for Education
Guidance	05/06/20	Shielding & protecting people defined on medical grounds as extremely vulnera	Hover	Hover	Public Health England
Guidance	05/06/20	Staying safe outside your home	Hover	Hover	Cabinet Office
Guidance	05/06/20	Domestic abuse safe accommodation: COVID-19 emergency support fund	Hover	Hover	Ministry of Housing Communities and Local Government
Guidance Collection	05/06/20	Advice for accommodation providers	Hover Hover	Hover Hover	Department for Digital, Culture, Media and Sport
Guidance	04/06/20	COLLECTION: Guidance for schools and other educational settings			Department for Education
	04/06/20	Secure video calls with prisoners £7 million for vulnerable pupils leaving Alternative Provision	Hover	Hover	Ministry of Justice
Press Release	04/06/20		Hover	As Published	Department for Education
Correspondence	04/06/20	School governance update	Hover	Hover	Department for Education
Guidance	04/06/20	Preparing for the wider opening of schools from 1 June	Hover	Hover	Department for Education
Guidance	04/06/20	Staying alert and safe (social distancing) Guidance for families & friends of those in prison in England & Wales	Hover	Hover	Cabinet Office
Guidance	04/06/20	Guidance for families & friends of those in prison in England & Wales	Hover	Hover	Ministry of Justice Cabinet Office
Guidance	03/06/20	Support for the bereaved	Hover	Hover	
Guidance	03/06/20	DCYP COVID-19	Hover	Hover	Ministry of Defence
Guidance	03/06/20	Coronavirus (COVID-19): travellers exempt from English border rules	Hover	Hover	Home Office
Guidance	03/06/20	Coronavirus (COVID-19) testing: privacy information	Hover	Hover	Department of Health and Social Care
Guidance	03/06/20	(RENAMED) Actions for Schools During COVID-19	Hover	Hover	Department for Education
Guidance	02/06/20	Home Office extraordinary funding for domestic abuse support services	Hover	Hover	Home Office
Collection	02/06/20	COLLECTION: Guidance for health professionals	Hover	Hover	Public Health England
Guidance	02/06/20	Closure of educational settings: information for parents & carers	Hover	Hover	Department for Education
ransparency Data	02/06/20	Attendance in education and early years settings	Hover	Hover	Department for Education
Guidance	01/06/20	Tax-Free Childcare and 30 hours free childcare during pandemic	Hover	Hover	HM Revenues & Customs
Guidance	01/06/20	Maintaining educational provision	Hover	Hover	Department for Education
Guidance	01/06/20	Implementing protective measures in education and childcare settings	Hover	Hover	Department for Education
Guidance	01/06/20	How to work safely in domiciliary care	Hover	Hover	Public Health England
Guidance	01/06/20	Guidance for contacts of people with COVID-19 who don't live with them	Hover	Hover	Public Health England
tautory Guidance	01/06/20	Early years foundation stage statutory framework (EYFS)	Hover	Hover	Department for Education
Collection	01/06/20	COLLECTION: Guidance for local government	Hover	Hover	Ministry of Housing Communities and Local Governmen
Collection	01/06/20	COLLECTION: Guidance for health professionals and other organisations	Hover	Hover	Public Health England
Guidance	01/06/20	Actions for educational & childcare settings to prepare for wider opening from	Hover	Hover	Department for Education
Guidance	29/05/20	School exclusion	Hover	Hover	Department for Education
Guidance	29/05/20	School behaviour and attendance: parental responsibility measures	Hover	Hover	Department for Education
Guidance	29/05/20	School attendance: guidance for schools	Hover	Hover	Department for Education
Guidance	29/05/20	Registering children's homes in an emergency as a direct result of COVID-19	Hover	Hover	OFSTED
Decision	29/05/20	Modification notice: school registration legislation changes	Hover	Hover	Department for Education
Guidance	29/05/20	Modification notice: education health and care plans legislation changes	Hover	Hover	Department for Education
Guidance	29/05/20	Looking after people who lack mental capacity	Hover	Hover	Department of Health and Social Care
Guidance	29/05/20	Law changes on education, health & care needs assessments & plans	Hover	Hover	Department for Education
Guidance	29/05/20	Funding for domestic abuse and sexual violence support services	Hover	Hover	Ministry of Justice
Guidance	29/05/20	For commissioners & providers of services for people who use drugs/ alcohol	Hover	Hover	Public Health England
Guidance	29/05/20	Driving Theory Tests	Hover	Hover	Driver and Vehicle Standards Agency
Decision	29/05/20	Disapplication notice: school inspections legislation changes	Hover	Hover	Department for Education
Decision	29/05/20	Disapplication notice: school attendance legislation changes	Hover	Hover	Department for Education
Guidance	29/05/20	Advice for UK visa applicants and temporary UK residents	Hover	Hover	Home Office
Guidance	29/05/20	(RENAMED) Actions for further education providers during COVID-19	Hover	Hover	Department for Education
Blog Post	28/05/20	Transport Guidance	Hover	Hover	West Midlands Children's Services
Regional Data	28/05/20	Regional COVID-19 Cases data breakdown	Hover	Hover	West Midlands Children's Services
Guidance	28/05/20	Recording attendance during the coronavirus (COVID-19) outbreak	Hover	Hover	Department for Education
Guidance	28/05/20	Heatwave Plan for England	Hover	Hover	Public Health England
Guidance	28/05/20	Guidance for households with possible coronavirus infection	Hover	Hover	Public Health England
Guidance	28/05/20	Free school meals guidance	Hover	Hover	Department for Education
Collection	28/05/20	COLLECTION: Guidance relating to remote delivery of education	Hover	Hover	West Midlands Children's Services
Collection	28/05/20	COLLECTION: Guidance for health professionals and other organsiations	Hover	Hover	Public Health England
Guidance	27/05/20	NHS test and trace: workplace guidance	Hover	As Published	Department of Health and Social Care
Guidance	27/05/20	NHS test and trace: how it works	Hover	As Published	Department of Health and Social Care
Guidance	27/05/20	MOTs due from 30 March 2020	Hover	Hover	Driver and Vehicle Standards Agency
Guidance	27/05/20	Guidance on isolation for residential educational settings	Hover	Hover	Department for Education
Guidance	27/05/20	Financial support for education, early years and children's social care	Hover	Hover	Department for Education
Guidance	26/05/20	The UK Government's COVID-19 recovery strategy	Hover	Hover	Cabinet Office
Guidance	26/05/20	Renamed: Supporting C&YP with SEND as schools & colleges prepare for wider	Hover	Hover	Department for Education
Guidance	26/05/20	Advice for UK visa applicants and temporary UK residents	Hover	Hover	Home Office
Guidance	25/05/20	Working safely during coronavirus (COVID-19)	Hover	Hover	Department of Business, Energy and Industrial Strategy
Guidance	24/05/20	Stay alert and safe: social distancing guidance for young people	Hover	Hover	Cabinet Office
Guidance	24/05/20	Preparing for the wider opening of early years and childcare settings from 1 Jun	Hover	As Published	Department for Education
Guidance	23/05/20	Department for Education explanatory note on SAGE modelling	Hover	As Published	Department for Education
Guidance	22/05/20	Support for care homes	Hover	Hover	Department of Health and Social Care
Guidance	22/05/20	Providing home care	Hover	As Published	Department of Health and Social Care
osed Consultation	22/05/20	Exceptional arrangements for exam grading and assessment in 2020	Hover	Hover	Ofqual
osed Consultation	22/05/20	Exceptional arrangements for assessment and grading in 2020	Hover	Hover	Ofqual
Guidance	22/05/20	Courts and tribunals planning and preparation	Hover	Hover	HM Courts and Tribunals Service
Guidance	22/05/20	Coronavirus (COVID-19): antibody tests	Hover	As Published	Department of Health and Social Care
Consultation	22/05/20	Consultation on an additional GCSE, AS and A level exam series in autumn 2020	Hover	As Published	Ofqual
Guidance	22/05/20	Cancellation of GCSEs, AS and A levels in 2020	Hover	Hover	Department for Education
Guidance	21/05/20	Supporting your children's education (for parents and carers)	Hover	Hover	Department for Education
Guidance	20/05/20	Safeguarding in schools, colleges and other providers	Hover	Hover	Department for Education
			-	Hover	Public Health England

Type Of Article	Date of Last Update	Link / Headline	Details	Update History	Publishing Department
Guidance	20/05/20	Guidance for educational settings	Hover	Hover	Public Health England
Guidance	20/05/20	Discharging patients from hospital to home settings	Hover	Hover	Public Health England
Guidance	20/05/20	Changes to the Care Act 2014	Hover	Hover	Department of Health and Social Care
Guidance Guidance	20/05/20 19/05/20	Bereavement scheme for family members of health & social care workers Procurement Policy Note 02/20: Supplier relief	Hover	As Published Hover	Home Office Cabinet Office
Guidance	19/05/20	NI credits for adults who care for a child under 12: fact sheet	Hover Hover	Hover	Department for Work & Pensions
Guidance	19/05/20	Apprenticeship programme response	Hover	Hover	Department for Education
Guidance	19/05/20	Admission and care of people in care homes	Hover	Hover	Department of Health and Social Care
Press Release	19/05/20	£37 million to support children with complex needs	Hover	As Published	Department for Education
Guidance	18/05/20	Managing school premises during the coronavirus outbreak	Hover	Hover	Department for Education
Guidance	18/05/20	Guidance for employees, employers and businesses	Hover	Hover	Public Health England
Guidance	18/05/20	Advice: funding regulations for post-16 provision	Hover	Hover	Education and Skills Funding Agency
Guidance	15/05/20	Guidance on vulnerable children and young people	Hover	Hover	Department for Education
Guidance	15/05/20	Cleaning of non-healthcare settings	Hover	Hover	Public Health England
Guidance	15/05/20	Awarding qualifications in summer 2020	Hover	Hover	Ofqual
Guidance Correspondence	14/05/20 13/05/20	Safe working in education, childcare and children's social care ESFA Update: 13 May 2020	Hover Hover	As Published As Published	Department for Education Education and Skills Funding Agency
Guidance	12/05/20	Working with clients (Legal Aid)	Hover	Hover	Legal Aid Agency
Guidance	12/05/20	Initial planning framework for schools in England	Hover	As Published	Department for Education
Guidance	12/05/20	How to join telephone and video hearings during coronavirus (COVID-19)	Hover	Hover	HM Courts and Tribunals Service
Guidance	11/05/20	Health and wellbeing of the adult social care workforce	Hover	As Published	Department of Health and Social Care
Guidance	11/05/20	Guidance for parents and carers: Opening schools and educational settings to n	Hover	As Published	Department for Education
Guidance	11/05/20	ESFA funded 16 to 18 traineeships	Hover	Hover	Education and Skills Funding Agency
Guidance	09/05/20	Guidance for young people on staying at home and away from others	Hover	As Published	Public Health England
Correspondence	08/05/20	Countering online child sexual exploitation & buse during the pandemic	Hover	As Published	Home Office
Guidance	07/05/20	Single Data List	Hover	Hover	Ministry of Housing Communities and Local Government
Statistical Data Set	07/05/20	Number of outbreaks in care homes – management information	Hover	As Published	Public Health England
Guidance	07/05/20	NAAS sites	Hover	Hover	Department for Education
Guidance Guidance	07/05/20 07/05/20	Information on stopping drinking for people dependent on alcohol Coronavirus Act 2020: status	Hover Hover	As Published As Published	Public Health England
Guidance Guidance	07/05/20	Coronavirus Act 2020: status Guidance for children's social care services	Hover Hover	As Published Hover	Department of Health and Social Care Department for Education
Correspondence	06/05/20	ESFA Update: 6 May 2020	Hover	As Published	Education and Skills Funding Agency
Guidance	06/05/20	Adult education budget (AEB): funding rates and formula 2020 to 2021	Hover	As Published	Education and Skills Funding Agency
Guidance	06/05/20	Adult education budget (AEB) funding rules 2020 to 2021	Hover	As Published	Education and Skills Funding Agency
Press Release	05/05/20	Face masks and coverings to be worn by all NHS hospital staff and visitors	Hover	As Published	Department of Health and Social Care
Guidance	05/05/20	Travel advice for educational settings	Hover	Hover	Public Health England
Regional Data	05/05/20	Regional Loss of Life Data	Hover	Hover	West Midlands Children's Services
News Story	05/05/20	Ofqual publishes initial decisions on GCSE and A level grading proposals for	Hover	As Published	Ofqual
Press Release	05/05/20	Eligibility for government childcare offers protected	Hover	As Published	Department for Education
Guidance	04/05/20	Social distancing in the workplace: sector guidance	Hover	Hover	Department of Business, Energy and Industrial Strategy
Guidance	04/05/20	Get help with technology for remote education during coronavirus	Hover	Hover	Department for Education
Guidance	04/05/20	Courts and tribunals tracker list	Hover	Hover	HM Courts and Tribunals Service
Guidance Press Release	04/05/20 02/05/20	Actions for HE providers Emergency funding to support most vulnerable in society during pandemic	Hover Hover	As Published As Published	Department for Education Ministry of Housing Communities and Local Government
Press Release	02/05/20	Dame Louise Casey to spearhead government taskforce on rough sleeping	Hover	As Published	Ministry of Housing Communities and Local Government
Correspondence	01/05/20	Testing for council workers	Hover	As Published	Ministry of Housing Communities and Local Government
Guidance	01/05/20	Staying at home and away from others (social distancing)	Hover	Hover	Cabinet Office
Guidance	01/05/20	information for employees at work & on furlough	Hover	Hover	Ministry of Housing Communities and Local Government
Guidance	01/05/20	Induction for newly qualified teachers	Hover	Hover	Department for Education
Guidance	30/04/20	Ofsted: rolling update	Hover	Hover	OFSTED
Correspondence	30/04/20	Mitigating impacts on Gypsy and Traveller communities	Hover		Ministry of Housing Communities and Local Government
Guidance	29/04/20	Accessing food and essential supplies	Hover		Ministry of the Environment, Food & Rural Affairs
Guidance	28/04/20	Use of free early education entitlements funding during the outbreak	Hover		Department for Education
Guidance	28/04/20	(RENAMED) Actions for Schools During COVID-19	Hover	Hover	Department for Education
Guidance	27/04/20	How to work safely in care homes	Hover	As Published	Public Health England
Guidance Press Release	27/04/20 27/04/20	<u>Guidance for social landlords on essential moves</u> Guarantee on death in service benefits for frontline health & care staff during p	Hover Hover	As Published As Published	Ministry of Housing Communities and Local Government Department of Health and Social Care
Guidance	24/04/20	Using clusters and hubs to maintain educational provision	Hover	As Published	Department for Education
Correspondence	24/04/20	Ofqual's response about vocational, technical and general qualifications	Hover	As Published	Ofqual
Press Release	24/04/20	Multi-million support for vulnerable children during COVID-19	Hover	As Published	Department for Education
Guidance	24/04/20	Driving tests and theory tests	Hover	Hover	Driver and Vehicle Standards Agency
Press Release	24/04/20	Digital innovations tested to support vulnerable people during outbreak	Hover	As Published	Department of Health and Social Care
Guidance	23/04/20	Support for victims of sexual violence and abuse	Hover	As Published	Ministry of Justice
Guidance	23/04/20	How to help safely	Hover	Hover	Cabinet Office
Guidance	23/04/20	Get support if you're a migrant living in the UK	Hover	As Published	Home Office
Press Release	23/04/20	Councils given flexibility with free childcare funding	Hover	As Published	Department for Education
Blog Post	22/04/20	Supporting Early Years and Childcare Providers	Hover	As Published	West Midlands Children's Services
Guidance	21/04/20 20/04/20	Remote education during coronavirus (for teachers and Leaders) Reducing burdens on educational and care softings	Hover	Hover As Published	Department for Education
Guidance Correspondence	20/04/20 20/04/20	Reducing burdens on educational and care settings LG Minister's Letter to councils setting out details of additional funding	Hover Hover	As Published As Published	Department for Education Ministry of Housing Communities and Local Government
Blog Post	20/04/20	Changes to Data Collection Requirements from DfE	Hover	As Published	West Midlands Children's Services
News Story	19/04/20	New major package to support online learning	Hover	As Published	Department for Education
Guidance	19/04/20	Help children with SEND continue their education during coronavirus	Hover	As Published	Department for Education
Correspondence	18/04/20	Letter from the Secretary of State to the local government workforce	Hover		Ministry of Housing Communities and Local Government
Press Release	18/04/20	Government pledges extra £1.6 billion for councils	Hover	As Published	Ministry of Housing Communities and Local Government
	18/04/20	COLLECTION: Personal protective equipment (PPE) hub	Hover	Hover	Public Health England
Collection	17/04/20	COLLECTION: Social Care Guidance	Hover	Hover	Department of Health and Social Care
Collection Collection	16/04/20	Video Bulletin 16/04/2020	Hover	As Published	West Midlands Children's Services
			Hover	As Published	West Midlands Children's Services
Collection Video Bulletin Blog Post	16/04/20	Domestic Violence Support links for "Rural" West Midlands Authorities			
Collection Video Bulletin Blog Post Policy Paper	16/04/20 16/04/20	Adult social care action plan	Hover	Hover	Department of Health and Social Care
Collection Video Bulletin Blog Post Policy Paper Blog Post	16/04/20 16/04/20 16/04/20	Adult social care action plan #NoExcuseForAbuse DV campaign launched in metropolitan West Mids	Hover	As Published	West Midlands Children's Services
Collection Video Bulletin Blog Post Policy Paper Blog Post Video Bulletin	16/04/20 16/04/20 16/04/20 15/04/20	Adult social care action plan #NoExcuseForAbuse DV campaign launched in metropolitan West Mids Video Bulletin 15/04/2020	Hover Hover	As Published As Published	West Midlands Children's Services West Midlands Children's Services
Collection Video Bulletin Blog Post Policy Paper Blog Post Video Bulletin Correspondence	16/04/20 16/04/20 16/04/20 15/04/20 15/04/20	Adult social care action plan #NoExcuseForAbuse DV campaign launched in metropolitan West Mids Video Bulletin 15/04/2020 Response from Ofqual about awarding GCSEs, AS and A levels in 2020.	Hover Hover Hover	As Published As Published As Published	West Midlands Children's Services West Midlands Children's Services Ofqual
Collection Video Bulletin Blog Post Policy Paper Blog Post Video Bulletin Correspondence Policy Paper	16/04/20 16/04/20 15/04/20 15/04/20 15/04/20 15/04/20	Adult social care action plan #NoExcuseForAbuse DV campaign launched in metropolitan West Mids Video Bulletin 15/04/2020 Response from Ofqual about awarding GCSEs, AS and A levels in 2020. Personal protective equipment (PPE) plan	Hover Hover Hover Hover	As Published As Published As Published Hover	West Midlands Children's Services West Midlands Children's Services Ofqual Department of Health and Social Care
Collection Video Bulletin Blog Post Policy Paper Blog Post Video Bulletin Correspondence	16/04/20 16/04/20 16/04/20 15/04/20 15/04/20	Adult social care action plan #NoExcuseForAbuse DV campaign launched in metropolitan West Mids Video Bulletin 15/04/2020 Response from Ofqual about awarding GCSEs, AS and A levels in 2020.	Hover Hover Hover	As Published As Published As Published	West Midlands Children's Services West Midlands Children's Services Ofqual

Type Of	Date of	Link / Headline	Details	Update	Dublishing Dependencent
Article	Last Update	Link / Headline	Details	History	Publishing Department
Press Release	10/04/20	Adoption support fund to help vulnerable families	Hover	As Published	Department for Education
Correspondence	09/04/20	Direction issued to the Chief Regulator of Ofqual	Hover	Hover	Department for Education
Guidance	09/04/20	Check if a COVID-19 patient has an attorney or deputy	Hover	Hover	Office of the Public Guardian
News Story	09/04/20	Awarding vocational and technical qualifications this summer	Hover	As Published	Ofqual
Guidance	08/04/20	School and college performance measures	Hover	As Published	Department for Education
Guidance	08/04/20	Providing unpaid care	Hover	As Published	Department of Health and Social Care
News Story	07/04/20	Increase of Working Tax Credits, Child Benefit & other allowances	Hover	Hover	HM Revenues & Customs
Guidance	07/04/20	Financial support for schools	Hover		Department for Education
Correspondence	06/04/20	Local authority meetings and postponement of elections	Hover	As Published	Ministry of Housing Communities and Local Government
Guidance	06/04/20	Guidance for residential care, supported living and home care	Hover	Hover	Public Health England
Guidance	03/04/20	Information for employees at work & on furlough	Hover	As Published	Department of Business, Energy and Industrial Strategy
News Story	03/04/20	How GCSEs, AS & A levels will be awarded in summer 2020	Hover	Hover	Ofqual
Guidance	03/04/20	Health, care and volunteer workers parking pass and concessions	Hover	As Published	Ministry of Housing Communities and Local Government
Authored Article	03/04/20	Data sharing during this public health emergency	Hover	As Published	National Data Guardian
Press Release	03/04/20	Councils given powers to hold public meetings remotely	Hover	As Published	Ministry of Housing Communities and Local Government
Guidance	02/04/20	Business rates: nursery (childcare) discount 2020 to 2021: LA guidance	Hover	Hover	Ministry of Housing Communities and Local Government
Correspondence	31/03/20	Supporting disabled people through the coronavirus outbreak	Hover	As Published	Disability Unit
Guidance	31/03/20	Guidance for the public on mental health and wellbeing	Hover	Hover	Public Health England
Guidance	31/03/20	Guidance for care of the deceased	Hover	As Published	Public Health England
Guidance	30/03/20	Supporting children & young people's mental health and wellbeing	Hover	Hover	Public Health England
Guidance	30/03/20	Guidance on social distancing and for vulnerable people	Hover	Hover	Public Health England
Decision	30/03/20	Approval of home use for both stages of early medical abortion	Hover	As Published	Department of Health and Social Care
Correspondence	28/03/20	Letter from the Secretary of State to the social care workforce	Hover	As Published	Department of Health and Social Care
Press Release	27/03/20	Rules on carrying over annual leave to be relaxed	Hover	As Published	Department of Business, Energy and Industrial Strategy
Guidance	27/03/20	Initial teacher training (ITT): criteria and supporting advice	Hover	Hover	Department for Education
Guidance	26/03/20	UK transport and travel advice	Hover	As Published	Department of Transport
Guidance	26/03/20	Coronavirus Bill: what it will do	Hover	Hover	Department of Health and Social Care
Guidance	24/03/20	Hardship fund 2020 to 2021	Hover	As Published	Ministry of Housing Communities and Local Government
Impact Assessment	23/03/20	Impact assessment - Coronavirus Bill	Hover	Hover	Department of Health and Social Care
Guidance	23/03/20	Domestic abuse safe accommodation provision	Hover	As Published	Ministry of Housing Communities and Local Government
Press Release	20/03/20	Providing proof of coronavirus absence from work	Hover	As Published	Department of Health and Social Care
Guidance	19/03/20	Ethical framework for adult social care	Hover	As Published	Department of Health and Social Care
Guidance	18/03/20	Procurement Policy Note 01/20: Responding to COVID-19	Hover	As Published	Cabinet Office
News Story	17/03/20	Free childcare offers to continue during coronavirus closures	Hover	As Published	Department for Education

Department	Last known update	First Listed in update of (Date)	Link / Headline Hover over to read comment with further detail Shaded cells have more recent update	Any action
	07/04/20	(Date) 07/04/20	Procurement Policy Note 02/20: Supplier relief due to COVID-19	
	06/04/20	07/04/20	Procurement Policy Note 03/20: Use of procurement cards - COVID-19	
	29/03/20	30/03/20	Coronavirus outbreak FAQs: what you can and can't do	
Cabinet Office	26/03/20	26/03/20	Fraud control in emergency management: COVID-19 UK Government guide	
	26/03/20	26/03/20	Coronavirus: How to help safely	
	25/03/20	25/03/20	Government launches Coronavirus Information Service on WhatsApp	
	29/03/20	24/03/20	Full guidance on staying at home and away from others	
			DfE Coronavirus helpline: 08000 46 86 87	
	08/04/20	09/04/20	Coronavirus (COVID-19): school and college performance measures	
·	07/04/20	08/04/20	Coronavirus (COVID-19): initial teacher training (ITT)	
	07/04/20	08/04/20	Coronavirus (COVID 19): online education resources	
	07/04/20	08/04/20	Coronavirus (COVID-19): financial support for schools	
	07/04/20	08/04/20	Coronavirus (COVID-19): guidance for educational settings	
	03/04/20	04/04/20	Coronavirus (COVID-19): guidance for children's social care services	
	03/04/20 31/03/20	04/04/20 03/04/20	Coronavirus (COVID-19): attendance recording for educational settings Closure of educational settings: information for parents and carers	
	01/03/20	03/04/20	Crosure of educational settings: information for parents and carers	
	27/03/20	30/03/20	Coronavirus (COVID-19): niduction for newly qualified teachers Coronavirus (COVID-19): safeguarding in schools, colleges and other providers	
D	08/04/20	24/03/20	COLLECTION: Coronavirus (COVID-19): guidance for schools and other educational settings	
Department for	01/04/20	25/03/20	Coronavirus (COVID-19): guidance on vulnerable children and young people	
Education (DfE)	07/04/20	22/03/20	COVID-19: school closures	
	25/03/20	19/03/20	Coronavirus (COVID-19): travel advice for educational settings	
	24/03/20	24/03/20	Coronavirus (COVID-19): implementing social distancing in education and childcare settings	
	01/04/20	24/03/20	Coronavirus (COVID-19): early years and childcare closures	
	06/04/20	24/03/20	Coronavirus (COVID-19): apprenticeship programme response Coronavirus (COVID-19): maintaining further education provision	
	23/03/20 23/03/20	24/03/20 24/03/20	Universities told not to alter applicants' offers	
	07/04/20	22/03/20	Coronavirus (COVID-19): guidance for schools and other educational settings	
-	08/04/20	22/03/20	Coronavirus (COVID-19): guidance on isolation for residential educational settings	
	07/04/20	19/03/20	COVID-19: free school meals guidance for schools	
ľ	20/03/20	22/03/20	Coronavirus (COVID-19): cancellation of GCSEs, AS and A levels in 2020	
	07/04/20	20/03/20	Closure of educational settings: information for parents and carers	
	20/03/20	20/03/20	Guidance for schools, childcare providers, colleges and local authorities in England on maintaining educ	ational provision
	04/04/20	05/04/20	Collection: COVID-19: guidance for health professionals	
	02/04/20	03/04/20	Coronavirus (COVID-19): admission and care of people in care homes	
	01/04/20 01/04/20	02/04/20 01/04/20	Coronavirus (COVID-19): notification of data controllers to share information Coronavirus (COVID-19): changes to the Care Act 2014	
	19/03/20	01/04/20	COVID-19: ethical framework for adult social care	
	30/03/20	31/03/20	Temporary approval of home use for both stages of early medical abortion	
Department of	28/03/20	30/03/20	Coronavirus (COVID-19): letter from the Secretary of State to the social care workforce	
Health and Social Care	26/03/20	26/03/20	Coronavirus Bill: what it will do	
Care	25/03/20	25/03/20	Government to provide free car parking for NHS and social care staff	
	24/03/20	25/03/20	COVID-19 advice for accommodation providers	
	24/03/20 20/03/20	24/03/20 20/03/20	Coronavirus (COVID-19) guidance for employees, employers and businesses £2.9 billion funding to strengthen care for the vulnerable	
	19/03/20	19/03/20	Coronavirus (COVID-19): guidance for clinical and non clinical settings and health professionals.	
	Daily Updates	19/03/20	Number of coronavirus (COVID-19) cases and risk in the UK	
	06/04/20	07/04/20	COVID-19: guidance for residential care, supported living and home care	
	31/03/20	01/04/20	COVID-19: guidance for care of the deceased	
	29/03/20	30/03/20	COVID-19: guidance on supporting children and young people's mental health and wellbeing	
	29/03/20	30/03/20	COVID-19: guidance for the public on mental health and wellbeing	
	24/03/20	23/03/20	COVID-19: Multi-Lingual guidance for households with possible coronavirus infection	
Public Health	30/03/20 23/03/20	21/03/20 24/03/20	COVID-19: guidance on shielding and protecting people defined on medical grounds as extremely COVID-19: Multi-Lingual guidance on social distancing and for vulnerable people	<u> </u>
England	23/03/20	24/03/20	Coronavirus bill: summary of impacts	<u> </u>
	23/03/20	23/03/20	COVID-19 Easy read information	
	22/03/20	23/03/20	Guidance for business and other venues subject to further social distancing measures	
	21/03/20	19/03/20	COVID-19: guidance for employees, employers and businesses	
	20/03/20	20/03/20	COVID-19: cleaning in non-healthcare settings	
	07/04/20	20/03/20	COVID-19: guidance for employees, employers and businesses	
	06/04/20 19/03/20	19/03/20	*** WITHDRAWN *** COVID-19: guidance on residential care provision Coronavirus (COVID-19) action plan	
	19/03/20 08/04/20	19/03/20 09/04/20	Coronavirus (COVID-19) action plan Coronavirus (COVID-19): providing unpaid care	
	06/04/20	07/04/20	Coronavirus (COVID-19): providing unpaid care Coronavirus (COVID-19): letter to councils about local authority meetings and postponement of	
	30/03/20	31/03/20	COVID-19: emergency funding for local government	
	28/03/20	30/03/20	COVID-19 and renting: guidance for landlords, tenants and local authorities	
	26/03/20	26/03/20	Government advice on home moving during the coronavirus (COVID-19) outbreak	
Ministry of Housing,	26/03/20	26/03/20	Government support available for landlords and renters reflecting the current COVID-19 outbreak	
Communities and	26/03/20	25/03/20	Further businesses and premises to close COVID 10: hetel accommodation to support knyworkers and vulnerable people	<u> </u>
Local Government	25/03/20 08/04/20	25/03/20 25/03/20	COVID-19: hotel accommodation to support key workers and vulnerable people COLLECTION: Coronavirus (COVID-19): guidance for local government	<u> </u>
(MHCLG)	24/03/20	24/03/20	Government confirms £500 million hardship fund will provide council tax relief for vulnerable households	L
	22/03/20	23/03/20	Government sets out plans to enforce closure of businesses and other venues	
	22/03/20	22/03/20	Guidance on non-essential travel	
	21/03/20	21/03/20	Government announces further measures on social distancing	
	19/03/20	19/03/20	Taskforce to bolster local response to coronavirus	
	19/03/20	19/03/20	Business rates: expanded retail discount - guidance	

		First Listed in	Link / Headline				
Department	Last known update	update of (Date)	Hover over to read comment with further detail Shaded cells have more recent update	Any action			
	27/03/20	03/04/20	Letter to Secretary of State Matt Hancock from the LGA and ADASS				
	22/03/20	03/04/20	COVID-19 employment law FAQs				
	22/03/20	03/04/20	COVID-19: contact the LGA				
Local Government	23/03/20	23/03/20	COVID-19 outbreak - councillor guidance				
Association	20/03/20	20/03/20	Coronavirus: information for councils Useful information for councils on novel coronavirus COVID-19.				
	19/03/20	19/03/20	Social care provider resilience during COVID-19: guidance to commissioners Covid-19: useful information Key information for councils on issues related to coronavirus.				
	01/01/20	01/01/20	Link to WMCS News and Events Page				
	07/04/20	08/04/20	Release of online education resources as part of extra support package for schools and parents				
	07/04/20	08/04/20	Video Bulletin - 07/04/2020				
	06/04/20	07/04/20	Public Health England releases guidance on the use of facemasks.				
West Midlands	03/04/20	04/04/20	DfE publishes Guidance for Children's Social Care				
Childrens Services	02/04/20	03/04/20	Smiley Terminal now available online through Smiley Link				
(WMCS)	29/03/20	02/04/20	Coventry's Children's Services still protecting most vulnerable				
	28/03/20	02/04/20	Warwickshire County Council records reducing attendance at its Educational Settings				
	23/03/20	23/03/20	Social Work Employer Standards				
	20/03/20	23/03/20	WMCS Video Support: Contigent Labour				
	19/03/20	23/03/20	WMCS Support: Do's & Don'ts of Teleconferencing				
Childline	22/03/20	23/03/20	Message from Childline re change in counsellor access.				
Courts and Tribunals Judiciary	24/03/20	26/03/20	Guidance on Compliance with Family Court Child Arrangement Orders				
Department for Business, Energy & -	07/04/20	08/07/20	Social distancing in the workplace during coronavirus (COVID-19): sector guidance				
Industrial Strategy	27/03/20	30/03/20	Rules on carrying over annual leave to be relaxed to support key industries during COVID-19				
epartment of Transpo	26/03/20	26/03/20	Coronavirus (COVID-19): UK transport and travel advice				
Disability Unit	31/03/20	01/04/20	Supporting disabled people through the coronavirus outbreak				
DVSA	24/03/20	25/03/20	Coronavirus (COVID-19): driving tests and theory tests				
	27/03/20	31/03/20	Advice for parents and families with a child in the care system during the Coronavirus Crisis				
Family Rights Group	25/03/20	26/03/20	Advice and information for family and friends carers, also known as kinship carers				
Foreign & Commonwealth Office	30/03/20	31/03/20	https://www.gov.uk/guidance/travel-advice-novel-coronavirus				
HMRC	26/03/20	26/03/20	Check which expenses are taxable if your employee works from home due to coronavirus (COVID-19)				
Home Office	29/03/20	31/03/20	Coronavirus (COVID-19): support for victims of domestic abuse				
Home Office	06/04/20	25/03/20	Coronavirus (COVID-19): advice for UK visa applicants and temporary UK residents				
NASEN	22/03/20	23/03/20	Open Letter to Directors Of Children's Services from NASEN Chief Exec				
National Cyber Security Centre	17/03/20	04/04/20	NCSC issues guidance as home working increases in response to COVID-19				
NHS	25/03/20	25/03/20	COVID-19: Partnership working with the Independent Sector Providers and the Independent Healthcare Providers Network (IHPN): Letter from Neil Permain				
	22/03/20	01/04/20	GUIDANCE ON SUPPLY AND USE OF PPE				
	03/04/20	01/04/20	Information for schools, students & parents on how gualifications will be graded & awarded in summer 2	020			
Ofqual	03/04/20	04/04/20	How GCSEs, AS & A levels will be awarded in summer 2020	<u></u>			
Olquai	25/03/20	04/04/20	Statement on vocational and technical gualifications in 2020				
Refugee Council	30/03/20	31/03/20	Changes to Home Office Asylum & Resettlement policy and practice in response to Covid-19				
. torugoo oourion	02/04/20	03/04/20	Social Work Together				
Social Work England	03/03/20	03/04/20	Regulating in light of novel coronavirus				
	02/04/20	31/03/20	COVID 19 Information and advice				
West Midlands Combined Authority	02/04/20	03/04/20	Covid-19 Support				
West Midlands Strategic Migration Partnership	01/04/20	01/04/20	COVID-19 Resources and Guidance				
Women's Aid	24/03/20	01/04/20	COVID 19 News and information page				

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	Staffordshire County Families & Council Communities Early Help Service	Staffordshire County Council	New Early Help Referrals: Early Help Referrals will not be accepted for the foreseeable future. Referring agencies will be asked to re-reference restrictions are changed and guidance from Public Health England changes. Open Early Help Cases: No physical visite will be undertaken unless assessed, by the Early Help Team Coordinator, as essential. Recovery Plan	Risk factors could increase and therefore the needs of families escalate. These risks may be unknown due to limited contact and children may be at risk of harm. These risks may be reported, and this will increase the demand higher in the system. There is a risk that children's long-term outcomes will be affected meaning they have poorer outcomes. Recovery Plan	The decision to not accept Early Help Referrais for the foreseeable future will kept under review by the Children's Social Care Management Team of Statfordshire County Council. First Response will risk sasses every request to neare at Gos not meet the threshold for an urgent social work response. Any Early Help referrals that appear to meet a social work threshold will be sent to the Duty Specialist Safgauarding Unit Ho for screening. During weekly contact, Practitioners will speak to parents, carers and where possible and appropriate also to the divider. Practitioners will social micro notat with shoold where dividen are accessing their current care provision. Practitioners will assain and into notat with shoold where dividen are accessing their current care provision. Practitioners will assain and the Inter must be clear widence this required. Every effort will be made to engage families and Early Help Review Plan group members remotely. It may mean that the meeting will be split in begarese telephone conversions where one group 'chat' cannot be facilitated. Early Help Review Plan Meetings should not however be cancelled, and the nature of the meeting should be exorded on the usain form usaft or conther meeting. Weekly telephone or other remotely enabled contact will continue to be facilitated throughout the period. Recovery Plan			AMBER	GREEN		
² 47	Staffordshire County Families & Council Communities Specialist Safeguarding Service (MASH)	Staffordshire County Council	IMAPPA MAPPA is continuing with the inclusion of core reps within the MASH but all outside participants will be expected to dial in. MARAC The MARAC system is currently running on an email reporting system. They are reviewed centrally and minutes emailed out to relevant partners. From 14th April this will change to a conference call meeting, agencies are now aware. Recovery Plan	IMAPPA None identified as BAU. MARAC None identified as this is BAU, will be monitored and reviewed to consider the impact of changes. Recovery Plan	IMPPA The LADC arrangements continue to take place and referrals received are being acted on and responded to in line with local procedures. MARAC No significant change to the service and all referrals received are being responded to. MAPPA meetings continue to take place virtually and partners can contribute by dialling in to the meeting and sharing of key information is taking place. Meetings are taking place virtually and information is being shared and partners are contributing to the discussions and risk assessments formulated. Recovery Plan			RED	GREEN		
3 SSSCP	Statfordshire County Families & Council Communities Specialist Safeguarding Service (Children in Need)	Staffordshire County Council	New CIN Referrals: CN Referrals will be processed by First Response in the usual way. New CIN referrals will be screened and full agency checks made as far as that is possible considering partner agency availability. Recovery Plan	There is a risk that some families who do not want to be seen will use the current circumstances as a reason for non-engagement. Risk factors could increase and therefore the needs of families escalate. These risks may be unknown due to limited contact and children may be at risk of harm. There is a risk that children's long-term outcomes will be affected meaning they have poorer outcomes. There is a risk to the child's safety. Recovery Plan	Where CN are self-sicaling with their families and not attending the available school care, Practitioners will discuss with the SSU Team Manager whether this increases the families risk assessment and means a hone visit is inclated as an ecessary. Every effort should be made to engage families and CN group members remotely. It maybe Practitioners neet to split the CN group in Separate telephone conversations where one group 'chat' cannot be facilitated. CN Review Meetings should not however be cancelled. Weekly telephone or other emotely exable contract to be maintained weekly. Visits will continue where there is an assessed need. Referrais must be reviewed with the SSU Team Manager and consideration given as to whether an Initial Visit is required. Where it is desented safe to manage the new referral via remote means, this should be done rather than a face to face Initial Visit. Referring must be advised of the outcome of their referral. This must extand to further contact with agencies and parentisicares so that future actions can be planned for should current confinement measures be extended. Recovery Plan			RED	GREEN		

Ref: Sub Groups required by	Completed by	/ Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in deman? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Updated	Checked by SSSCP
4 SSSC4	Staffordshire Count Counci		Staffordshire County Council	Child Protection Referrals: These will be processed by Final Response in the usual way. Part 1 Strategy Discussions will be held in the MASH. Strategy discussion Part 2 should be undertaken within Specialist Sdeguarding Units in line with existing procedures. Open Child Protection Cases / children looked after at home under Placement with Parent Regulations: The County Council will retain visiting arrangements as per the Child Protection Plan. Management of Child Protection Conferences and Child Protection Review Conferences: Child Protection Conferences will now be facilitated digitally with options of how to join via phone, conference call or through an internet platform. Recovery Plan	Mostly BAU but for those who are not being visiting there is a risk. There is a risk that some families who do not want to be seen will use the current circumstances as a reason for non-engagement or that people with COVID-19 continue to cause harm to others in the family home. Risk factors could increase and therefore the needs of families escalate. These risks may be unknown due to limited contact and children may be at risk of harm. There is a risk that children's long-term outcomes will be affected meaning they have poorer outcomes. There is a risk to the child's safety. Recovery Plan	Any decision not to make a face to face home visit must be approved by the Head of Service and be on the advice of the members of the strategy discussion. Where a risk assessment indicates that contact can be safely maintained for the child virtually, this must be agreed with the Head of Service. Digital means will be utilised that maximise the ability to still see the family. Recovery Plan			RED	GREEN		
Page 18	Staffordshire Count Counci	Families & Communities Specialst Safeguarding Service (Looked After Children)	Staffordshire County Council	Isolating and indicate no visit will be accepted, digital contact will be conducted, and each case risk assessed by the Managements: Social work contacts will be remote via digital solutions, unless there is any risk of placement breakdown when appropriate support will be provided to prevent this. Care Leavers: Each PA hasis undertaking a Risk Assessment which includes a RAG rating for	Mostly BAU but some risks may escalate as outlined below: Looked After Children (particularly Care Leavers) undertaking adverse behaviours and putting thremelves X14Rsi are not identified. Looked After Children (and their placements) do not receive broader evidence-based services, provision or support (e.g. Enclonal Health & Welbeing Services) leading to potential escalation of need in the future with increased numbers of placement disruptions. Looked After Children Semotional health and welbeing deteriorating, leading to an escalation in need, leading to potential pressures upon the placement. In some cases, this may lead to placement breakdowns. Looked After Children do not achieve legal, physical and emotional permamency (including long term Foater Care. Special Guardinaship and Adoption) in the short time impacting upon a child sanse of security, continuity, commitment and identity. Looked After Children are not returned home (following rehabilitation activity) impacting upon the outcomes of children and families. Recovery Plan	Contact is being maintained with all children and young people and Care Leavers and there is Team Manager oversight on each child young person. Work is taking place with our Family Placements colleagues around placement stability and to reduce placement breakdowns. There are concerns that placements will become fragile or breakdown and we are working to prevent this We will continue to review our staffing capacity daily in line with our capacity to meet needs of Looked After young people and care leavers.			RED	GREEN		

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e sssor Page 19	Staffordshire Count	y Staffordshire Youth	Staffordshire Youth Offending Service	Prevention: The service continues to support all children receiving a prevention referral through virtual contact and doorstep contact three are safeguarding concerns. New referrals are still being accepted and these are triaged to assess the level of support required. Out of Court Disposals: All non-statutory outcomes are temporarily being delivered by the police. Children receiving statutory outcomes for out of court are receiving virtual assessments and virtual interventions. Appropriate Adult: The service continues to offer an Appropriate Adult service and is adhering to strict PPE guidelines as interviews in police custody do not support social distancing measures. Courts: National guidance is that all courts will move to being virtual and will be reserved for children commiting mere serious difference where a remand to custody is being considered. The YOG is working dosely with the courts to implement this process and to ensure that children are still supported before, during and after this process. Statutory interventions: All children controllers thread microarching and many and after this process and indiventions in line with their assessed risks. If there are concerns related, then dorstep contact is made. Children in custody: The government announcement that some prisoners could be released under Covid 19 estifications and this applies to children aitor. The criteria for early release are who meet this criterion, but this continues to be monitored. Recovery Plan yes in particular in relation to the court. Youth court is significantly reduced at this time, it is likely that we will see a significant increase one normal court strings resume. There is all as an expectation that the numbers of children entering the justice system for an out of court disposal will increase as lockdown retrificance continue to be relaxed.	Social distancing in custody interview rooms is impossible to adhere to. That children at risk of a memad are not supported by the Youth Offending Service and an assessment is not completed pre and post court. That children fail to abide by their current contact arrangements, thereby putting them in breach of their court order. An increase in children failing to abide by the government guidelines. Children would containly receive a thil health screen as gort of this service; however, the health staff provided by MPFTS have been pulled back to front line NHS roles. That children could be released early without the capacity to provide accommodation and support during licence. Receiver Plan within the recovery plan and response to Covid there has always been the consideration to pusate prevention referratios enable there resources to be decloyed to support court work as required. Potentially prevention referrals would be reduced or pasued for a short time	The operational lead for prevention is operating a triage process and making decisions on a case by case basis. Where there are imminent risks to crime being committed then the case will be opened, and a virtual service will be offered. Limited health advice is being provided by MPFTS over the telephone to support the officers delivering the intervention. Staffordshire Police providing PPE equipment and screening all visitors to the custody block. Family household members are actively being encouraged to act as an Appropriate Adult in the first instance. Staffordshire Police and courds have given assumes that children will be able to have contact virtually with a YOS Officer to ensure an assessment is undertaken pre and post court. All decisions on breach and failure to comply with an order made by the court will be eacilated to the YOS management team and a collective decision will be made about next sleps based on the risks posed to others. All children will receive a stely and wellbeing letter to outline in easy language the powers available under the government guidelines and there is a low risk of harm to others. All explice cases will be escalated to the YOS that where they are also risk of harm to others. All eligible cases will be escalated to the YOS management tead of service or a final decision in complustion or others. All children will receive a stely and wellbeing letter to outline in easy language the powers available under the government guidelines and there is a low risk of harm to others. All eligible cases will be escalated to the YOS management tead of service or a final decision in consultation with the relevant Governor. Recovery Plan since the lockdown the YOS have continued to provide prevention referais for those at risk of offending and have also introduced privates where there are consums that children are not adhering to lockdown requirements or there is evidence of ASB to reduce the risk of formal responses.			AMBER	GREEN	
7a SSSCP	Stoke City Counc	Children's Social Care		Account is including continue to be reacted. Changes are dependent on the risks identified and decisions taken to respond to these. Recovery Plan	Insufficient staff available to deliver statutory responsibilities to children in need, and interim care orders, subject to child protection plans and children in care. Recovery Plan	In respect of the Front Door a nota for contingency staff has been created, however this has not be necessary but remains available. The staff group remain working and social distancing measures has been put in place to comply with government guidance. In respect of EDT home working has been in place to assist social distancing measures and staffing resource mains adequate. In dispect of EDT home working has been in place to assist social distancing measures and staffing resource mains adequate. In dispect of EDT home working has been in place to assist social distancing measures and staffing resource heath conditions to available to work from home, sick themewises and unable to work, planed working from home, or in work and undertaking priority contacts with children and families). Guidance on visiting families has been issued to staff. We advice all workers to phone families prior to undertaking visits to ascertain whether the family is socially isocialing due to sickness in the household. We expect visits families has cocild visitancing to continue as planned. Unsits to families who are isobating due to sickness are being undertaken, if that is no the case holder the availability of staff across the service to undertak these contacts will be reviewed and arrangements made for teams to cover for each other as required. We have hand for other staff identified across cound who are available for redeployment with basic training in place, so that they can support the core team. We have heard for date laces with the RAG rating. We have heard for date laces set with the RAG rating. We have hand for date all assess with a RAG rating. We have heard for date laces set with the RAG rating. We have heard for date laces that have heas counce to lacitlate visual meetings and conference calling Oaily reports identify capacity across the service to support statutory visiting. A diction as technological solutions for staff.			RED	GREEN	

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7ь	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these.	Risk of Infection to Staff	A set of 'triage' questions have been agreed and will be asked in advance of any planned visit to a family or caree home. These include whether anyone in the family has symptoms or are self-solating. If so, other methods of contact with the family will be agreed, unless there is an identified inst nequing the child to be seen. 4PEC (Personal Protection Equipment) has been sourced and will continue to be sourced for use only in those studions where it is essential for a child to be seen in a plote where there is known to be intection. Guidance on these circumstances is being issued by our Director of Public Health and remains under review. We are looking to increase our PPE in Line with our Recovery Plan as well as the opening buildings. All workers are asked to wash hands negularly and use hand sanitiser when out on visits. Supplies of sanitiser are available for workers. Social distancing is being observed wherever possible and marking being out in place in offices to support staff. Cay Director has regular meetings with trade unions where any concerns can be reised. "The cleaning schedule has been increased with greater focus on contact surfaces. Recovery Plan			AMBER	GREEN		
7c	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these.	Mental Wellbeing of Staff Recovery Plan	Managers are making daily contact with workers who are self-isolating to check on their wellbeing. -Tele-Mrt service (Dove) has been expanded in terms of capacity and is regularly promoted to staff. Recovery Plan			AMBER	GREEN		
7d	Page 20	Stoke City Council	Children's Social Care			Vulnerable children are not taking up the opportunity of attending school Recovery Plan	We have a system for daily reporting of take up of school attendance for our vulnerable children. «Where attendance is part of their plan and the children are not attending, the social worker is contacting families to ascertain the reasons. If the family are not ill or self-isolating, the parents/carrers are encouraged to send the staff, based on legal advice, about appropriate escalations for non-strendance. We are also providing guidance for staff, based on legal advice, about appropriate escalations for non-strendance. A call-centre has been set up which is staffed by social care and advactation colleagues to support schools in managing the attendance and support of our vulnerable children. We have nasked the prolife of the prevance of domestic vulnerable during this lock-down period and supporting staff in their assessment of associated risk. We are seeking to support accommodation solutions for vidrem shart need to more out quicky. We are challenging schools that have decided to dose, preventing our vulnerable children from attending. Where closure is ongoing, we have identified alternative exclusion settings for our hidren to tatend. Coing floward, we are extending our school hours, so the more vulnerable children returning to school. Recovery Plan			AMBER	RED		
7e	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these.	Capacity of legal team and the court is not sufficient to ensure necessary legal action is being taken	Legal services have been in regular contact with the courts regarding measures to maintain the service currently. The majority of court hearings have now been converted to telephone/virtual hearings. Final hearings have been adjourned until at least August.			AMBER	AMBER		
7f	SSSCP	Stoke City Council	Children's Social Care		Jaccoway Man Recovery Plan	Jaconano, Bina Curit rodered contact between children and families will not be maintained Recovery Plan	Juti, and an access in CT. O Supervised control will be only undertaken where it is deemed necessary. The judiciary understand this approach. Contact is being encouraged by telephone and virtual methods. As part of our Recovery Plan we will review all contact and are exploring the use of Children's Centres being used for parential contact. With bables. - Contact is being been been being used for parential contact. Recovery Plan			RED	AMBER		
7g	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these.	Difficulty in convening child protection conferences or reviews for looked after children, due to staff shortage or challenge of social distancing arrangements Recovery Plan	AIL CP conferences and LAC reviews will be held as virtual meetings. Children and parents will still be contacted prior to meeting to ensure their views are represented and are being encouraged to attend virtually if possible CP conferences will confinue to make decisions even if meetings are not quorate. Minute takers are maintaining attendence through use of technology at all conferences so decisions will be recorded by chair. Recovery Plan			AMBER	GREEN		
7h	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these. Recovery Plan	Children placed in distant placements may no be seen in line with statutory requirements.	Regular telephone contact will be maintained with the care provider. Children will be seen via video link and encouraged to use social media for staying in touch with their worker. "We are maximising the use of the Mind of My Own app; this is a tool to facilitate contact with all children. Recovery Plan			RED	GREEN		

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71	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these. Recovery Plan	Foster Carers no longer able to perform their role due to illness or other family pressures.	Regular communication by video and voice calls with Foster Carers to ascertain support needs. We have reviewed whether foster carers could temporarily take additional children and have that bank. "We have developed option to create po-up small group homes, including one for disabled children, if they need to move out of home (e.g. foster parent hospitalised.) Recovery Plan			RED	GREEN	
7j	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these.	Shortage of available placements. Recovery Plan	Carers who can take additional children have been identified and a process agreed for exemptions to approval status. We are maximising the potential placement capacity of our children's homes where children can be cared for in an emergency. We are making links with the childminding lead to ascertain availability of childminders to act as emergency carers. Stotaring panel arrangement in place. "-Cormissioning averies is maintaining regular contact with providers to ensure they have contingency and business continuity plans in place, and residential providers have social distancing arrangements in place. "We are utilising Covid Legislation to approve foster carers. Recovery Plan			RED	RED	
	SSSCP D D D D D D D D D D D D D D D D D D D	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these. Recovery Plan	Care Leavers and vulnerable families are not able to access food or medicines due to social leadation. Recovery Plan	Leaving Care services are already linked into council arrangements for provision of food parcels as required. Children's social work service to identify any families who are social isolating and are vulnerable to ensure they can access appropriate emergency support. We have ordered Lapbos and Dongles to enable care leavers to keep in touch and access education. Care leavers can also use #StokeonTrentTogether 0800 Helpline established for the crisis. Recovery Plan			AMBER	GREEN	
71	→ SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these.	Unexpected requests for financial support for adoption and SGO placements where carers are self-employed and income has ceased.	Responding to requests on a case by case basis and ensuring all other support is in place e.g. regular contact, access to education. Hardship funding is in place and requests will be considered swiftly on case-by-case basis. Continue to make decisions in light of any additional government guidance re self-employed. Additional financial support has already been agreed for one adoptive placement where adopters have lost income. Impact on placements to be kept under review. Recovery Plan			AMBER	GREEN	
7m	SSSCP	Stoke City Council	Children's Social Care		Changes are dependent on the risks identified and decisions taken to respond to these.	Risk of Children's Social Care improvements slowing and actions in plan slipping.	Board to meet in March and oversee plans for service continuation and any sippage on Improvement plan. Focus on progress on four key priority areas. Work on each is continuing despite crisis. Board to be asked to note and agree steps for prioritisation of actions. Continue to focus on recruitment and retention of staff, particularly any opportunities to convert agency to permanent. The priority is to maintain quality of assessments, and visits to the most vulnerable children to ensure they are safe. It is important to recognise that there will be drift in cases in PLO and proceedings, and that the quality of social work interventions to effect positive change will be adversely affected by the change in working practices. Recovery Plan			RED	AMBER	
8a	SSSCP	Staffordshire County Council	Families Health and Weltbeing Service (Health Visiting and School Nursing	Midlands Partnership NHS Foundation Trust	NOLM This has cassed in line with National Guidance. Schools are currently closed except or vulnerable and chidrin of keyworkers. All measurements that have been undertaken since September 2019 have been recorded on the microwich all chidra EPR and the state has been collated and and recorded on the national tool for NCMP. This ensures that data is as obtait and up to date as possible. As of 17/4/20 67.2% of reception childran and 68% of year 6 children have alleady been screened. Recovery Plan Planning is undeway regarding a surge in safeguarding activity and the allocation of resource to any increase in demand as a result of a safeguarding surge.	There is nick that there will be insufficient tims to measure and capture the weight of children within this year. This means that it is highly kiely that children who are underweight, coverneight or way overweight will not be identified. This means that there will be an incomplete picture captured in respect of children in Satindrashie for heading and weight 2019 2020. The risk is that children who are requiring specific interventions will not be known. Also that public headit campaigns required to meet the needs of children and families will not be planned. This has be potential to increase the head his risk in the future and the cost for the NHS and local authorities. It is highly likely that children who have not been measured will not be measured going forward.	Hub remains in place for parents to contact FHWS with any concerns. Charlevalth remains in place for both parents any young people. Schools remaining open during pandemic will be contacted to remind them of both Hub and Challealth details and referral form. Into the future the possibility of an awareness campaign should be considered by the LA. Recovery Plan			AMBER	GREEN	

	ub Groups equired by	Completed b	y Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or meet additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Updated	Checked by SSSCP
86	SSCP	Statfordshire Count	ty Fernites Health and Wellbeing Service (Health Visiting and School Nursing	Mdlands Patheship NHS Foundation Trust	6-5 Years The commissioned enrices have changed in line with national directives except: Saleguarding work (MASY is statutory child protection meetings and home visits) Saleguarding work (MASY is statutory child protection meetings and home visits) All new Bith visits (The provision has changed to reduce face to be conference a cline stelling with one parent) Follow up of high risk mothers, babies and families Antenatal visits Phone and text advice - digital signposting Biold spot screening Recovery Plan	Children god 0.5 years will not be routinely seen during the period other than part of the continuing commissioned service, safeguarding need, compelling reason or safeguarding reason. There is the potential that children with developmental delay, attachment issues, fallering growth, juunicae, emotional health, behavioural issues will not be identified, as some of the scheduled contacts of the HCP have cessed. Perinatal mental health may not be identified. Risk stratification of all contacts including targeted reviews. Parents refuse to attend clinic appointment for review due to COVID concerns/anxiety. Parents may not have transport into clinic. Recovery Plan	In the remains in place for parents to conduct FHMS with any concerns. Access to Health Visitor, School Nurse and Nursery Nurse available Monday to Friday Sam-Spm. Charteaith internation in place for othor parents and yoong people through hub. Condicat undertaken virtually over the telephone, through One Carsulation (Virtual), face to face clinic or home visit where needed or concern. Utilising antional documents from HV and PHE and use of local flowcharts to support staff. QIA undertaken to understand the risks or APHS, Acute services and midwifery services regarding service offer and referral processiontal service. Support will continue to be updertaken with families and provided according to the level of need (using non-face to face methods where possible). Targeted reviews will continue to be undertaken where needed. One Consultation officia are being set up for mothers struggling with breast feeding or perinatal mental health where the issues are more complex. HV's are currently will be screated and a physicial assessment following the Health Visitor, SDP (guantice, skin condition, untilicia set being set and physicial assessment following the Health Visitor, SDP (guantice, skin condition, untilicia set b.). MPT volumeter transport has been explored and available where needed to bring parent/child into clinic. Safeguarding is prioritied. Targeted face to face contacts will be offered a bint 15 minule NBV (linice august nondifion, untilicia set.). MPT volumeter will be screened and a physicial assessment following the Health Visition SDP (guantice, skin condifion, untilicia set.). Midwifery services are able to identify and communicated in respect of any concerns for families and request supporting its prioritied. Targeted face to face to face contacts will be offered ather via home visits or clinic. Safeguarding is prioritied. Targeted face to face hanges. Midwifery services are able to identify and communicated in respect of any concerns for families and request support from the se			AMBER	GREEN		
	ຶ່	Statfordshire Count	ty Families Health cil and Wellbeing Service (Health Service) (Health Visiting and School Nursing	Midlands Partnership NHS Foundation Trust		Many schools open for reduced numbers of children and so scheduled drop in sessions casad be ensure government guidance in relation to limiting contacts followed. Potential increase in concerns around emotional health and wellbeing, sexual health, relationship, safeguarding issues. Children/young people less likely to cal hub for support. Raferrals into FHWS will reduce from schools Racovery Plan	Hub remains in place for parents to contact FHWS with any concerns. Access to Health Visitor, School Nurse and Nursery Nurse available Monday to Friday Sam-Spm. Charteath remains in place for cohnerns and young people through hub. Contacts undertaken virtually over the telephone, through One Consultation (Virtual), face to face clinic or home visit where needed or concern. Safeguarding is prioritised. Targeted face to face contacts will be offered either via home visits or clinic appointments this will be via risk statification and needs ted. – monitoring of vulnerable families who decline visits. Process in place that will be followed to include partner services where there are concerns . Recovery Plan			AMBER	GREEN		
9	SSSCP	Staffordshire Count		Family Action	The County has taken the decision to close Children's Centre with the following exceptions: Staffordshire Moorlands Children's Centre is open for collection of Personal Protective Equipment (PPE) and Childcare. East Staffordshire Children's Centres are open for collection of Personal Protective Equipment (PPE). Family Action are continuing to support with emergency childcare and education where possible. Family Action are continuing to deliver a Virtual Offer which is being delivered via Facebook. Recovery Plan	leading to potential developmental delay relating to health, education, emotional and behaviou	Family Action are continuing to develop and facilitate a virtual offer for families. This offer continues to be focused on ensuing families can access information, advice and guidance and virtual services to enable and support child development, parenting capacity and raimly and environmental factors. Through the virtual offer, the provider is promoting sources of virtual and direct support, information, advice and guidance. This activity is seeking to encourage families to continue to seek help if they require it. Activities could be delayed, and activities can tolerate disruption. Recovery Plan			GREEN	GREEN		

Ref: Sub req	uired by	Completed by		Provider: Varies	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10% Group activities have been ceased for the foreseeable future in line with the	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you miligate these risks or meet additional demand? If Yes what will stop or reduce? Families don't get access to achivites and services which support wider outcomes, including	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help Providers are continuing to develop and facilitate a virtual offer for families.	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (i.e. is the service currently effectively mitigating the risk?) GREEN	late Chee SSS	cked by CP
		Council		Valios	Giormation, advice and guidance of the Government, Public Health England and NHS England in respect of social distancing.	Temporal and solid development, child development, paneling capacity and damay and environmental factors. This may lead, in some cases, to an escalation of need in the future. Families will not have access to a wider network of support, leading to escalation of need. Recovery Plan	I romental contracting to denote on intendine to the original contract of animes. Through the virtual offer, the providers are continuing to promote sources of virtual and direct support, information advice and guidance. This activity is seeking to encourage families to continue to seek help if they require it. Guides for parents have been developed to support families to undertake activities at home with their children (where possible) to avoid escalation of need. Activities could be delayed, and activities can tolerate disruption. Recovery Plan			Panolik	UNEL	TOPOLE 0	
			Community Based Support	Varies	measures are in place to ensure the safety and continuity of those services in line with the agreed Business Contingency Plans (BCP). Recovery Plan	Families do not receive the support they need to contribute to the care of a child's physical and emotional health and welthering. Limiting this support may lead to families experiencing an escalation of need, leading some families to reach crisis point. The physical care of a child may be at risk because of the limited community-based support. Families don't get access to services which support wider outcomes, including personal and cocial development, child development, parenting capacity and family and environmental factors. This may lead is some cases to an escalation of need in the future. Families will not have access to a wider network of support, leading to escalation of need. Recovery Plan	Commissioners are identifying volumiters, through the Staffordshire County Counci iCount Carpaign, who are willing to undrates personal care duties. However, there are only a limide number of people willing to do this, but providers are not currently reporting any staffing difficulties or shortages to fulfil care packages. The Children with Disabilities Service has reviewed and identified staff who could be redirected from their day job's to provide additional resource for children's support and personal care to further colster the above. Commissioners are working together with providers to offer volunteers both internally and externally a pseudo- induction programment fast a point where they are needed. Providers undertaking safe and well and exercise visits (with one exception which is being addressed) and experience over the last two weeks is that families are staffing to allow providers back in to their homes to support them (in approx 60% of cases). Will need to monitor this as and when schools reopen Recovery Plan			RED	AMBER	18/05/20	
12	SSSCP	Cound		Action for Children	Services are continuing for children with the most complex needs and appropriate measures are in place to ensure the setty and continuity of those services in line with the agreed Business Contingency Plans (BCP). Recovery Plan	An increase in the number of children from this cohort entering the Looked After Children's System. An increase in the number of children from this cohort entering the Looked After Children's System. Familise do not receive the support they need to contribute to the care of a child's physical and escalation of need, leading some families to reach crisis point. Families do not receive the respile required leading to escalation of need, leading some families to not receive the respile required leading to escalation of need, leading some families to not receive the respile required leading to escalation of need, leading some families to not receive the respile required leading to escalation of need, leading some families to not receive the respile required leading to escalation of need, leading personal and social development, child development, parenting capacity and family and environmental factors. This may lead is some cases to an escalation of need in the future. Families will not have access to a wider network of support, leading to escalation of need. Recovery Plan	Providers have developed, in consultation with Commissioners, responsive Business Contingency Plans (BCP) to ensure no acticution (Overain)(15 Not Planska. 24 Ahour individual short breaks (Enther Han veekend Breaks in small cohorts) being offered to ensure families continue to receive abreak from caring whish maintaining social distancing guidance. Issue emerging in that legislation requires and up to date HCP for ACI to support (not just an up to date social work assessment & care plan) whith is proving a blockage for some families who would (and should) ptherwise benefit from this service Recovery Plan			RD	AMBER	18/05/20	
13	SSSCP S	Staffordshire County Council	Advocacy	Change, Grow, Learn	Change, Grow, Learn are continuing to assess each individual open case and assess the urgency of each issue. Where it is appropriate to continue with service delivery, this is protited. The service will also cease open meetings at care placements, replacing them with	Children and families may feel like they have no way of advocating their wishes, feelings, views, opinions and experiences. This may also lead to families feeling their rights are not	The provider is continuing to accept new referrals and they will continue to be triaged as normal. Any 'urgent' referrals will be prioritized. Usually these are referrals where a placement move is imminent or there is a ChId Protection meeting within a week of the referral being made and the set of the set of the set of the provider is seeking to continue to deliver services by exploring the availability of technology-based solutions			AMBER	GREEN	18/05/20	
14	SSSCP	Staffordshire County Council	Looked After Children's Independent Visiting Service	Change, Grow, Learn	Alternative analysis of the Children's Independent Visiting Service is not making new matches whilst social distancing rules apply. Independent Visitors are not continuing to meet up with Looked After Children whilst social distancing nules apply. Recovery Plan	There is some risk of social isolation depending on the living arrangements of the young person. Recovery Plan	utilina longati, in gashi ongo foron foron foron foron foron and the state of the s			GREEN	GREEN	18/05/20	

Ref: Sub (requ	Groups Jired by	Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspacts of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Updated	Checked by SSSCP
15 5	SSSCP	Staffordshire County Council	Child Weight Management	Time 4 Sport	On Tuesday 24th March 2020, they stopped non-essential work (induding home visits and measurements at schools). The provider is still operating, providing services remotely. Services are being delivered through online 1.2:1 Sessions and Group Health and Wellbeing Workshops. These are to be delivered through Zoom. Skype and Facebook. Staff are home based and are participating in a rota to support a small number of schools in Newcastle Under Lyme to deliver a minimum offer for keyworker children. Recovery Plan	The physical and emotional health and welbeing of children may deteriorate because of the impact of diet, leading to a deterioration in physical activity and wider outcomes. Recovery Plan	As of the 1st April 2020, the service will be delivered through a Digital Weight Management Service. The Weight Management Service is working with Staffordshire University on the development of a Family Weight Management Application with a gamification tool. The provider is supporting a number of Staffordshire's Schools with their emergency Childcare Services. The provider is providing all Staffordshire's Parents/Schools the chance to sign up to Weekly Home Activity Packs These packs provide information, advice and guidance on how to stay fit and healthy at home. The provider is providing a daily Time 4 Sport challenge via Social Media Networks. Recovery Plan			GREEN	GREEN		
¹⁶ Page 24	J	Staffordshire County Council	Smoking in Pregnancy	Everyone Health	The service is continuing to be delivered virtually. CO2 monitoring has ceased however and will not begin until services are able to be face to face. They are also offering all SSIP clients the opportunity to join local virtual support groups and advertising on Facebook to help promote this information. Recovery Plan	Increased risk of complications in pregnancy, during birth and following birth. Increased number of parents who have an unhealthy pregnancy, leading to an increase in unhealthy babies. Increase in the risk of stillbirth. Babies are more likely to be born too early and face the breathing, feeding and health problems that often go with being premature. Babies are more likely to be born with a low birth weight. SP is the more likely to be born with a low birth weight. SP is the most common factor in child deaths as a result there is a risk of increased child deaths. Recovery Plan	Services are continuing to be delivered virtually. Hospitals are continuing to promote the virtual service and encouraging involvement of families. The service is offering all SSIP clients the opportunity to join local virtual support groups and advertising on Facebook to help promote information, advice and guidance. Recovery Plan			GREEN	GREEN		
17 5	SSSCP	Staffordshire County	Improving the Emotional Health and Wellbeing of Children and Young People in Staffordshire	Action for Children	EHWB service will go live on 1st April 2020 as planned, but will operate according to the interim offer. Action for Children have written to families informing them of the change in provider/service. Families have been formed that they will receive a call to enable them to update the provider with regards to their current situation. The provider is in the process of giving families information, advice and guidance about quality assured apps, websites or books that can support them in the inform assessment (those flagped as high risk prioritised first). If further services are required, the provider is prioritising these based on level of risk. Interventions being provided in the interim are: Solidion flocused 4-week telephone/video intervention with young person or parent (Dne to ne tailored intervention with syschologist for high need young people 2 session Bouse Bick group intervention allevered virtually aged 12-18 is session Bouse Brogramme group - programme delivered virtually aged 12-18 Recovery Plan	Direct, face-to-face interventions will not take place for the foreseeable future but clinical oversight and intervention where an initial assessment identifies risk will be addressed via the psychologist. Not all digital technology solutions will be available from contract commencement – 1st April. Service website and information will be available in basic form initially due to resource/staffing pressures within the AIC comms/web design team.	Where possible skype is being utilised to conduct staff interviews. Clinical oversight from the subcontractor-Black County Partnership Trust nov to be temporarily delivered via a Clinical Psychologist from Changing Minds'. Staff resilience across other AIC contracts is also being used to ensure there are staff in place to mobilise the interm offer. AIC have toget do work in an agile way with ICT and phone technology. AIC have toget dearly Inits with CAMHS services in North and South Staffs to ensure step up/down processes can be assured where required. An interim reporting temptate has been developed to assure service delivery and enable contract management/commissioner oversight of delivery during service model disruptions. AIC autocordors ShverCloud are still being mobilised. Risk assessment and therapy programmes are being aligned to AIC's wider processes for the contract to ensure consistency, it is also being linked directly to the PCMIS case recording system so the two work simultaneously. AIC are going to purchase BFI Labs digital intervention as an additional digital offer temporarily – altready used deswrikers in England by AIC so can be readly available. Assurance has been given that the website will include basic service information (contracts/processes/the interim direriferent information/hously attached and local resource signoposing). Developments will continue beyond the ta'd April and will iteratively reflect any changes to the service. Recovery Plan			AMBER	GREEN		

	Sub Groups required by	Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mittigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service I Status (I.e. is the service currently effectively mitigating the risk?)	Date Jpdated	Checked by SSSCP
18			Child Sexual Exploitation and Missing Children and Young People	Catch 22	Catch-22 is continuing to assess all one-to-one support and make decisions on an individual basis, depending on the level of risk, the child's needs and on how best they can met those needs. C22 continue to undertake return home interviews. Contact is being conducted by telephone or other virtual means. However, in exceptional circumstances, when an urgent need arises or a specific request is made by the YP, face-to-face meetings take place in line with social distancing protocols. An information sheet has been produced for care home providers and schools that outlines how digiter source with be used to support RH. C25 bespoke recourse packs have been developed to provide information, advice, guidance and worksheets for children/young people currently receiving support. All staff are risk assessed regarding their sef-isolation and if they reside with any person identified as vulnerable, they are working from home. Recovery Plan	Children who are experiencing / at risk of Child Sexual Exploitation are not provided with appropriate support, which may lead to risks escalating requiring them to access higher level intervention. Children and professionals aren't supported to access universal and targeted local and communy services and information, advice and guidance, leading to potential escalation of need. Return Home Interviews do not take place as C22 unable to contact children/young people to carry these out, resulting in risks not being identified and mitigations implemented. Schools and residential sattings do not support / facilitate C22 to communicate with children and carry out Return Home Interviews Recovery Plan	C22 are continuing to assess all one-to-one support, make decisions based on risk and need and determine best way to meet need and mitigate risk. CSE bespoke resource packs have been developed to provide information, advice, guidance and worksheets for children/young people currently receiving support. Phone contact remains in place. C22 have produced a range of resources that they shared with schools prior to closure, as well as care homes they regularly work with. C22 continue to undertake return home interviews, using virtual methods where accessible and appropriate. C22 have produced an information sheet for care home providers and schools that outlines how digital resource will be used to support RH. Communication has been sent out to residential settings via SCC to support effective communication between residential settings and C22 and ensure that Return Home Interviews are completed. Recovery Plan			AMBER	GREEN		
	25	Staffordshire County Council		Refugee Action	Refuge action are under a framework agreement but are not currently actively delivering services on behalf of SCC (as they only work with families who are in year 1 of the VPRS – all of families are in year 2 or beyond) Recovery Plan	NA (Service not currently live in Staffordshire) Racovery Plan	NIA (Service not currently live in Statfordshire) Recovery Plan			GREEN	GREEN		
20			Integration & Independence	Spring Housing	The provider has slopped non-essential home visits but continue to contact families by telephone.	Reduction in provision of face-to-face support, may result in an escalation of the needs of the family, which would lead to some families reaching crisis point / requiring more specialist intervention.	Commissioned service provide continues to make regular contact with families by telephone and offer information, support, advice and guidance. Provider continues to assess risks and needs of families and will respond with home visit, if safe and appropriate to do so. Commissioners are maintaining contact with groups in VCSE sector who offer informal support to refugee families, to ensure that they are kept updated with current situation and are signposted to useful Home Office resources which they can use to support families. Recovery Plan			GREEN	GREEN		
21	SSSCP			Above and Beyond (18/03/20)	Amity Hub has now closed. Above and Beyond is continuing to offer outreach and support to the young people they work with. All Amity Hub Staff are contactable by phone, email, social media and Skype. Recovery Plan	Young people are unable to access the Hub and therefore may be experiencing isolation, needs may not be identified, and risks increased.	Each UASC has a named SCC key worker who will be continuing to maintain contact. Amity Hub staff are continuing to maintain contact with young people and offering outreach and support via virtual methods. Recovery Plan			GREEN	GREEN		

Ref	Sub Groups required by	s Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mittigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service D Status (i.e. is the U service currently effectively mitigating the risk?)	Checked by SSSCP
22	SSSCF	Staffordshire Count Council	γ Family Support I Services	Various	Face-to-face Bookstart provision has ceased, virtual delivery continues although engagement low. Proactive Home Visits - Live Birth Data shared and contact is being made with families. Non-essential home visits have been ceased. Contact maintained with families through virtual methods e.g. Facetime, Skype etc. Recovery Plan	Reduction in provision of face-to-face whole-family support may result in an escalation of the meets of the family, which would lead to some families reaching crisis point / requiring more specialst intervention. XR Risk' children, who need to be referred to higher levels of intervention, are not identified because of the reduction in face-to-face whole family support. Families aren't supported to access universal and targeted local and community services and information, advice and guidance, leading to potential escalation of need. The workforce is stretched and reduced, limiting involvement with the family, reducing meaningful engagement and practical support, leading to potential escalation of need in the future. Families who wish to disengage with service, may seek to use Covid-19 as a method of discouraging contact / communication with service. Recovery Plan	Family needs, risks and vulnerabilities are continuing to be assessed and monitored to identify where home wisks are necessary and to ensure any escalation of risk / need is addressed. Staff are asked to follow PHE advice re PPE and staff safety. Alternative methods of communication are being utilised where face-to-face contact is not possible, to ensure that contact with families is maintained. None engagement will be escalated to Safeguarding if contact cannot be made. Providers are continuing to share resources, information, advice and guidance with families virtually. Commissioners have issued clear guidance to providers outlining expectations that ongoing contact with families will continue, risk assessments will be utilised to identify, manage and mitigate risk and that records are maintained of alchity. Recovery Plan			AMBER	GREEN	
23	SSSCF	Staffordshire County Counci	y Residential il Provision in Special Schools	Loxley Hall Special School Cicely Haughton Special School Walton Hall Academy Saxon Hill Academy Horton Lodge Special School	The residential provision has closed – due to staffing numbers, concerns regarding social distancing and numbers of children attending due to social isolation. Recovery Plan	Although an education resource this does meet the needs of children with a range of SEND and social care needs. There could be an escalation of needs/need for family support to prevent breakdown, with the risk of families needing respite/more specialist interventions. Recovery Plan	Residential staff completing safe and well checks and supporting children who are attending in the school day. Contact being maintained with children. Education provided via online/home learning resources. This closure will be kept under regular review. Recovery Plan			AMBER	GREEN	
24	^{sso} Page 26		V Education Speech il and Language Service	MPFT	Children and young people who have speech and language needs identified in Section F of their EHCP, all have up to date targets and plans and will receive telephone contact support from therapists, at the frequency outlined in the EHCP, to the school – if the child is in school or the home. MPFT are inputting into Tribunal and Mediation and EY Funding Meetings vis skype Recovery Plan	If the NHS staff are redirected to work in other areas of the NHS.	All children have an up to date plan and targets to work on. If children are attending school the school will be aware of the targets. Parents are aware of the child's targets and plan. Continued support is being provided to the school/parent over the telephone. Online interaction is being explored by MPFT. Recovery Plan			AMBER	GREEN	
25	SSSCF	Staffordshire Count Counci	V Education Other	Various	Commissioned service to provide alternative education provision to support pupils out of school due to medical reasons or who do not have a registered school base. We conflue to have a close overwiew of the 95 pupils accessing commissioned AP from the LA. We are working closely with our providers who have conflued to provide alternative education to our unknetike pupils they accelere and education packs etc. in agreement with parent/carers and keyworkers. Recovery Plan	The provider unable to deliver the education provision as per the specification.	A Business Continuity Plan is in place for Children and Young People in receipt of local authority commissioned alternative education provision. The provides contained the pupil and their family. Where concerns have been naised the SEND Commissioning Team will contact referrers and if there is a linked social worker as a priority. Our Attemative Provision Panel continues to meet vitually on a weekly basis and new referrats can be made to this panel as approval to interclavent provides has based obtained mover. APP agreement must be made prior to any referrer contacting a provider direct to award, vary or extend a contract. Recovery Plan			GREEN	GREEN	

Ref: Sub Groups required by	Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Dat Status (i.e. is the service currently effectively mitigating the risk?)	e Checke lated SSSCP
26 SSSCP		Mediation and Disagreement Resolution	Global Mediation	The Provider has moved to virtual or telephone meetings in all cases.	The provider is unable to facilitate meetings which is in accordance with the SEND Code of Practice. The Council's ICT does not support the use of Zoom at this time. Mediation is not undertaken and result in an increase in SEND Tribunals. Recovery Plan	Global Mediation have been asked to contact all Locality Managers and parent/carers to ensure alternative ways of conducting virtual meetings can be established. This has been raised with SCC ICT. Recovery Plan			AMBER	GREEN	
		Independent School Placements (Day and Residential)	Various	We have contacted all independent school providers for our pupils with EHCPs and have a good overview of the education offer to Stafforshine pupils. Any concerns where schools have dosed has been shared with the relevant SEND Locality Manager, Head of Service and named Social Workers. Recovery Plan	Schools go into liquidation Schools close and do not continue to offer contact and education package to pupils on their roll.	For new placements, we ask that SEND, whilst they may agree the new school to be named in the EHCP do not agree admission dates or enter into new contractual arrangements. Ensured continuation of termly fees in advance for our providers. Legal letter of expectations to be sent to the independent sector linked to our contractual arrangements. Working with Social Care colleagues where requests for increased residential provision are made by providers. Recovery Plan			AMBER	GREEN	
21 9 27		Mutilation Service	Barnardo's	Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. Front door continues to be operational. Face to face 121 support in the main has cassed, being replaced with telephone support. Case consultations in operation. Community events have been cancelled and where possible community work will continue via video link. Recovery Plan	result in an increase of the needs of the child/ren, which could lead to an escalation of the case. No orgoing / work in the community over a long period of time could lead to a fall in impetus by local communities and Champions/Advocates. There is one community workar and one project worker covering both Stoke-on-Trent and Staffordshine - potential sickness would result in limited support for families and professionals as well as for community dynampions. Limited engagement, hands on practical support as well as observing the family in their own home could lead to an escalation of issues and the support required. Service users will not have access to a wider network of support because of the changes to diher provider's service provision. The physical and emotional health and wellbeing of service users could decline because of the change to service provision. Recovery Plan	Family's needs, risks and vulnerabilities will continue to be assessed, responded to and monitored jointly with the social worker or another identified professional. The service provider will continue to make regular contact with families by telephone and offer information, support, advice and guidance.			AMBER	GREEN	
29 SSSCP	Staffordshire Commissioner Police, Fire and Rescue, Crime		SARAC/Savana	Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. Face to face 121 support has ceased, being replaced with telephone and email support. Staff working from home taking telephone referrals and liaising with other professionals. Front door continues to be operational. Recovery Plan	A reduction in the delivery of face to face and group work with service users, hands on practical support as well as observing the victim in their cwn home could result in an increase in the support needs of the service user, threavy requiring more interve intervention at a late date. The staffing model is small covering both Stoke-on-Trent and Staffordshire – therefore potential sickness would result in limited support for families. Limited volunteering service due to the age of some volunteers (70+). Service users will not have access to a wider network of support because of the changes to other provider's service provision. The physical and emotional health and wellbeing of service users could decline because of the change to service provision. Recovery Plan	The front door and support service are being provided by staff working from home. Work systems are being accessed from home. Telephone and email support continue to be offered to suit victim needs. Family's needs, risks and vulnerabilities continue to be assessed, responded to and monitored. Recovery Plan			AMBER	GREEN	

Ref: Sub Groups required by	Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Checked by SSSCP
30 SSSCP	Staffordshire Commissione: Police, Fire and Rescue, Crime	Hate Crime Service	Challenge North Staffs (CAB)	Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. Staff working from home taking telephone referrals and liaising with other professionals. Front door continues to be operational. Recovery Plan	A reduction in the delivery of face to face work with service users, hands on practical support as well as observing the victim in their own home could result in an increase in the support meets of the service user, threely requiring more intensive support at a later date. There is only one case worker covering Stoke-on-Trent-potential sickness would result in a very restricted level of support for victims of hate cime. The encloral health and wellbeing of service users could decline because of the change to service provision. Service users will not have access to a wider network of support because of the changes to other provider's service provision. Recovery Plan	Staffing levels and referrals are being regularly monitored. The front door and support services are being provided by staff working from home with the necessary I.T Both telephone and email support are being offered to suit victim's needs. Victim and family support needs continue to be assessed, responded to and monitored. Recovery Plan			AMBER	GREEN	
³¹ SSCP Page 28	Staffordshire Commissioner Police, Fire and Rescue, Crime	Young People Sexual Abuse	NSPCC	Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. Front door and support service continue to be operational. Recovery Plan yes, we expect a 10-20% increase, this is linked to an expansion of a service offer and the post covid recovery process, careful consideration needs to be given regarding scheduling of work and impact of demand upon partners e.g. LA, and the subsequent Knock on impact 10-20% increase linked to post covid recovery and expansion of offer area. We are also completing weekly safe and well checks in regard of chidren who wish to reinstate their contact with specific workers who are currently on fullough. This will impact upon capacity to allocate new referrals for a period of time	Recovery Plan	Children and Young People's support continue to be assessed, responded to and monitored. All support is now being delivered via the phone or video conferencing. The child / family is offered a choice. Platforms are being used to ensure contact is safe. Recovery Plan community engagement processes associated with the together for childhood approach in 3 wards of North Stoke with a plan to share learning to be shared across the City. Community engagement processes include food additubution with private sector partner; newsletter for parents/children and Profesionals; remaining tocused upon relationships with achoids through this disrupted period; on line resources regarding on line safety etc. On going regargement with volutary sector partners embedd within the community to learthy shared resources and			AMBER	GREEN	
32 SSSCP	Police, Fire and	Service for Victim's	Women's Aid	Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. Front door continues to be operational. Recovery Plan	A reduction in the delivery of face to face work with service users, hands on practical support as well as observing the family in their own home could result in an increase in the support needs of the service user, thereby requiring more infansive intervention at a later date. There are only two workers covering both Stoke-on-Trent and Staffordshire – potential sickness would result in limited support for families and significant others. Service users will not have access to a wider network of support because of the changes to other provider's exvice provision. The physical and emotional health and wellbeing of service users could decline because of the change to service provision. Recovery Plan	Staff from all teams will share responsibility for service user support; the safety of victims is prioritised. Regular updates provided to relevant agencies – police, social care. Advice from Public Health sought and followed. Communication strategy in place.			AMBER	GREEN	

Ref:	Sub Groups required by	Completed by Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Checked by Jpdated SSSCP
33	SSSCP	Staffordshine Business Commissioner, Advisory S Police, Fire and Rescue, Crime		Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. The Business Crime Advisor is continuing to provide support via the telephone and email. Recovery Plan Access to the Police STORM system continues.	There is no business crime advisor covering both Stoke-on-Trent and Staffordshire - potential sickness would result in limited support for victims of business crime. Victims of business crime will not have access to a wider network of support because of the dhanges to others revice's e.g. tocksmiths, security services. This could impact business continuity and operation leading to family hardship. The endivaln-busineth and wellbeing of victims could decline because of the change to service provision (Gateway). There would be no support for new victims of business crime should access to the Police STORM system be no longer available. A significant increase in business crimes could impact the ability of one person being able to cope with demaid. Recovery Plan	Staffing levels, levels of business crime and referrals are being regularly monitored. Operating base changed to Stafford Police station with access to Police STORM system continuing. Telephone and email support are continuing to be offered to suit business needs. Business continuity needs continue to be assessed, responded to and monitored. Other staff within the Chamber of Commerce are trained and vetted and will support the project should the Advisor be of sick, on leave etc. Recovery Plan			AMBER	GREEN	
	Page 29	Staffordshire Staffordshi Commissioner: Victims Ga Police, Fire and (SVG) Rescue, Crime	re Citizen's Advice Bur	Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. Staff working from home with remote access to SVG systems. 75% of Triage staff are working from the office. Ongoing support is being provided by telephone or email. Front door services maintained; however no longer operational on Sundays. Triage maintained. Police Automated Data Transfer continues to be supported. Enhanced victims (Victims Code) continue to be supported Non enhanced victims continue to be supported (Victims Code) contacted by mail o telephone. Recovery Plan	A reduction in the delivery of face to face work with service users, hands on practical support as well as observing the vicini in their own home could result in an increase in the support needs of the service user, thereby requiring more intensive support at a later date. Limited volunteering service due to the age of some volunteers (70 + and students). Potential sickness within the workfoor could result in a reduced service for both the triage element and face to face support for victims of critine. Victims will not have access to a wider network of support because of the changes to other provider's service provision. The physical and emotional health and wellbeing of victims could decline because of the change to service provision. Disruptions to service delivery will occur if provider systems 'crash' and internet connections fai whilst workers are working from home. A significant increase in crime could impact the ability of the team being able to cope with demand. Recovery Plan	The support service continues to be provided by staff, working from home. Additional laptops have been purchased to facilitate this, with IT systems being accessed in this manner. Almost all of the triage staff are working from the office and this service remains deliverable. Victim's support needs, risks and vulnerabilities continue to be regularly assessed, responded to and monitored. Telephone and email support continue to be offered to suit victim needs. The Police data transfer continues and is supported by regular dialogue between the services. Recovery Plan			AMDER	GREEN	
35	SSSCP	Staffordshire Staffordshi Commissioner: Restorativ Police, Fire address Rescue, Crime Stafford Service		au Business Continuity Plan in place and implemented. Funding commitment by the Commissioner provided. All staff working from home with remote access to the IT system. Ongoing support by telephone or email. Front door services maintained; however no longer operational on Sundays. Recovery Plan	Potential sickness within the workforce could result in a significantly reduced service given; the team is small. Limited volunteering service due to the age of some volunteers (70 + and students). The emotional health and wellbeing of service users could decline because of the change to service provision. It is inden seen as a cathartic experience providing some type of closure and retribution. Disruptions to service delivery will occur if provider systems 'crash' and internet connections fai whilt workers are working from home. The absence of RJ options could result in other alternatives being followed for perpetrators / offenders. Recovery Plan	The front door and RJ service is being provided by staff who are working from home. Additional laptops have been purchased to facilitate this, with IT systems being accessed in this manner. Telephone and email support continue to be offered to suit victim needs. Recovery Plan			AMBER	GREEN	

Ref:	Sub Groups required by	Completed by		Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in deman? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service D Status (I.e. is the service currently effectively mitigating the risk?)	hecked by SSCP
36	SSSCP	Staffordshire Commissioner:	Modern Slavery Support Service	Voice of Hope	Funding commitment by the Commissioner provided.	Potential sickness within the workforce could result in a significantly reduced service given the team is very small.				AMBER	GREEN	
		Police, Fire and Rescue, Crime			Front door continues to be operational.	Limited volunteering service due to the age of some volunteers	The front door and support service continue to be provided by staff who are working from home.					
					Recovery Plan	The physical and emotional health and wellbeing of victims could decline because of the	There are currently no victims of modern slavery to support.					
						change to service provision.	Recovery Plan					
						Service users will not have access to a wider network of support because of the changes to other provider's service provision.						
						Recovery Plan						
37	Domestic Abuse	Staffordshire Commissioner	New Era Domestic Abuse Victim	Victim Support	Business Continuity Plan in place.	Potential sickness of New Era Victim service team.	DA Task Group meeting weekly, reporting to SCG Subgroup.			AMBER	GREEN	
		Police, Fire and Rescue, Crime	Support		Funding commitment by Commissioner provided.	Inability to maintain support for existing caseload.	DA Task Group Risk Register monitored					
		Neacue, chine			Front door service maintained using 24 hour telephone helpline, Webchat facilities and email.	Inability to meet anticipated increased demand.	Monitoring of police DA recorded incidents / and all DA provider referrals.					
						Agency staff unavailable.	Force producing DA Dashboard and demand forecasting being considered					
					All staff now working from home using remote cloud-based technology and laptops / mobile phones.	Refuge provision / move on safe accommodation unavailable.	Staffordshire Commissioner provision of additional funding to secure 2 x CYP & 1 x IDVA as additional staff for					
					Group work and face to face 121 has ceased.	Inability of LA to source/identify suitable safe accommodation.	contingency growth in demand. Sourcing suitably qualified temporary IDVA/DAP and CYP staff from recruitment agencies underway					
					Adults	Inability of police to appropriately respond to increased numbers of DA perpetrators.	Use of volunteers, subject to DBS and appropriate vetting.					
					Telephone based support sessions being offered to all adult service users as appropriate, and safety plans reviewed.	Inability of Police to fast track vetting of potential Agency staff.	Current caseloads being reviewed to ensure maximum capacity available following lockdown.					
					сүр	Increased tension within households, leading to increased levels of related harm to victims and	Weekly monitoring of pan Staffs refuges and ability to accommodate referrals.					
					CYP Team contacting all service user families to discuss current service offer, and providing support to reduce risk.		Utilising the learning from overseas to plan alternative access to services					
	_				Telephone or video conferencing support being offered where appropriate. Where	Potential reduction in the levels of reports of domestic violence to the police	Regular communication about the availability of support services					
	ק				not appropriate, service aims to work with safe parent/guardian to provide tools to stay safe.	Recovery Plan	Funding application to MOJ to secure additional monies to support increased resilience post lockdown					
	3 I				stay sale. The victim service has offered a case by case basis to support parents in their		Punding application to the or secure additional memory to support increased resilence post locadown On a weekly and forthightly basis case reviews are being held to review every case, discuss current concerns,					
	age 3				In evident service has othered a case by case basis to support parents in their school applications to ensure children within the service can remain in school as a safe space. CYP Team have expressed increased concern for a number of children who are not taking up the vulnerable child place within their school settings as families feel attenting school is ar isk.		Un a weeky and chinging basis case reviews are being net to review very case, discuss current concerns, how support is progressing and the needs and risks for the young people. The dam continue to mean in regular contact with statutory agencies, either allocated social workers or First Responsel safeguarding teams, sharing concerns for the vulnerable young people they are supporting.					
	0				Maintaining daily contact through Integrated Support Service (ISS) with Perpetrator		Recovery Plan					
					service.							
					Virtual MARAC attendance by IDVA's.							
					Commissioners ongoing monitoring of waiting lists and of referrals.							
					Service supporting pan Staffordshire ongoing monitoring of commissioned and non-							
38	SSSCP		Personal Safety	TecSOS/	commissioned DA provider referrals and Police DA incidents. Business Continuity Plan in place.	Lack of additional handsets available.	Further handsets requested to be available as soon as possible.			AMBER	AMBER	
		Commissioner: Police, Fire and	Devices	Vodaphone	Funding commitment by Commissioner provided.	Reduced ability for victims to contact for help / assistance.	Recovery Plan					
		Rescue, Crime			System operating as normal, no issues identified.	Increase in vulnerability / severity of issues.						
					Weekly update to SCO by Provider.	Recovery Plan						
					Police reviewing allocation of available handsets.	-						
					SCO secured commitment of additional available Personal Safety Devices (PSD)							
					SCO secured commitment of additional available Personal Safety Devices (PSD) from provider.							
					Recovery Plan							
39	SSSCP		Adults & CYP		BCP in place.	The impact of interruptions in service - in particular access to prescribing - can have serious	Discussions are currently ongoing between commissioners and providers to resolve this issue with daily reporting			RED	RED	
		Police, Fire and	Substance Misuse - Staffordshire	- STARS - currently		consequences for the health and well-being of service users, their partners, children and families and increase the risk of exposure to criminal behaviour and contact with the cjs and	on progress, with a view to re-commencing new / re-scripting appointments asap.					
		Rescue, Crime	To be included in	mobilising)	for those under Probation Orders, DRR's and ATRs to secure scripts. Prescribing arrangements continue.		Recovery Plan					
			city and county boxes		Recovery Plan	Recovery Plan						

Ref: Sub Group required b		y Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Checked by SSSCP
40 SSSC	Commission Police, Fire ar Rescue, Crim		Accord	Business Continuity Plan in place and implemented. Funding commitment by Commissioner provided 1:1 contact / activities have ceased for the foreseeable future in line with the information, advice and guidance of the Government, Public Health England and NHS England in respect of social distancing. Majority of staff working from home. Telephone contact being maintained with priority given to high-risk (eg MAPPA and IOM) cases. Recovery Plan	There is some risk of social isolation depending on the living arrangements of service users Recovery Plan	Ongoing floating support offered via the telephone by accommodation staff Criminal Justice agencies continue to manage offending behaviour Recovery Plan			AMBER	GREEN	
	e Commissione Police, Fire ar	e New Era Domestic r: Abuse Perpetrator di Support (Voluntary le programme)	Reducing Reoffending	Funding commitment by Commissioner provided. Front door service remains open through telephone/email only. All 121 and group work cessed. Maintaining daily contact with DA Integrated Support Service (ISS).	Staff sickness within small team. Escalation of perpetrator offending behaviour and increase of associated risk Increased in volume of perpetrators wanting to change offending behaviour following lifting of lockdown. Inability to meet demands of 121 working of Spectrum programme. Inability to meet demands of 121 working of Out of Court Disposal programme due to recommence Potential reduction in the levels of reports of domestic violence to the police. Increased wait times for CYP referrals Recovery Plan	Dawing staffing resilence through qualified Probation staff (within RRP). Support DA sanctions through delivery of telephone Out of Court Disposal programme Using police analytical support, aim to forecast future demand levels for service. Regular communication about the availability of support services. Current caseloads being reviewed to ensure maximum capacity available following lockdown. DA Task Group meeting weekly, reporting to SCG Sub Group DA Task Group Risk Register to highlight risks in service provision Recovery Plan			AMBER	GREEN	

Ref: Sub Groi required		Completed by	Service: F	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service [Status (i.e. is the service currently effectively mitigating the risk?)	Date Jpdated	Checked by SSSCP
42 \$\$\$	ISCP CC	96	Safeguarding C Strategic Planning & Leadership	CCGs	service remotely, no exceptions. Designated Doctors for Safeguarding Children and LAC are partially redeployed to provide clinical support to frontline. Named GPs are providing full service remotely to the team and continuing clinical frontline work remotely and face to face.		Designated Nurses are now providing 7-day cover on call for antiguanding enquiries, escalations, required support and guidance. Contact list available to all GPs and Providers. Daily dial in opportunities to the Designated Professionals Network providing opportunities to escalate concerns about capacity should this arise. Regular dial in opportunities with Regional Safeguarding Lead NHSE for support and avenue for escalation. Regular safeguarding communications updates continue to be sent to the CCG Comms team for distribution to partners. Staff and available to the public. All GPs have access to online training packages in the interim should they require training / updates. Primary Care Newsidetins will continue to be sent to the Practices. Recovery Plan			AMBER	GREEN		
⁴³ Page 32	SCP CC	XGs	LAC (CCGs / MPFT / UHNM	Non-essential health appointments should not be conducted face-to-face (this includes LAC assessments and adult health assessments). The 70-day timescale for the IrA4 should not be viewed as critical in the current statutor. Regulatory timescales for the RHA should not be viewed as critical in the current statutor. LAC services: Stop advites except: Segmentation to prioritise needs (e.g., increased risk of harm from social isolation) Safeguarding work – case review, not routine checks "Telephone advice – could be undertaken regionally initial assessments Recovery Plan	Physical health examination of vulnerable children entering care will not take place Emotional and mental health assessments limited due to no direct contact Increasing numbers of children entering care and OA placements therefore increasing wulnerability of LAC	All assessments will be completed by telephone if not face to face. Urgent cases will be seen face to face with the appropriate PPE in situ. Designated Nurse for LAC maintaining oversight of all cases in and out of area and remotely accessing the Resource Panel and Corporate Paneling meetings. All safeguarding incidents will be escalated to the Designated Nurses for Safeguarding Children. Recovery Plan			AMBER	GREEN		
44 SSS	ISCP CC	96s	Primary Care / GPs o	CCGs	Patients will be mostly assessed by telephone triage. Urgent cases will be seen faco to face with PPE in situ. Services resuming face to face appointments gradually on a need basis. PPE continues to be used for each patient direct contact in Primary Care. Some GP Practices are completing wellbeing telephone calls to all children they have known to be on a child protection plan. Safeguarding training at level 3 face to face will be on hold until after the COVID 19 outbreak. Safeguarding training at level 3 face to face will be on hold until after the COVID 19 outbreak. Safeguarding meetings will take place remotely based on need. Ad hoc supervision and telephone advice available to all GP Practices. Assurance required regarding safeguarding communications between GPs and PAC (OWS – Them who been multiple communications between GPs and PAC than one accession and the CCC GVID Comms to primary care has had a variety of and manging asteguarding context by parents for children tay are unwall (signosting to comms have been multiples) for high a pathway guidance document, promoting context by parents for children thay are unwall (signosting to RCGP Guidance on prioritisation of routine work during COVID-19 doc.) Recovery Plan	All safeguarding learning packages are accessible online at levels 1-3. Nil effect. Designated Nurses accessible currently. Lack of information sharing leading to vulnerable women and babies being overlooked and potential safeguarding issues not being addressed in order to prevent harm. Lack of complence with the RCCP guidance may lead to babies not receiving immunisations / health & development assessment leading to delay in identification of liness. Recovery Plan	Keep communication channels open with other key health/social care professionals who are involved in the care of vulneable children and adults. Continue to share information as you would normaly for the purposes of safeguarding, including for strategy meetings, child protection and adult safeguarding including for strategy meetings, child protection and adult safeguarding including for strategy meetings, child protection and adult safeguarding including for strategy meetings. The roles of practice staff may be different at this time due to redeployment, selfhousehold isolation, or staff needing to work from home: it may there to be possible for staff other than GPs to support safeguarding work within the practice during this difficult time. Safeguarding training is not a priority at this time, safeguarding patients will remain an important and essential role for primary care. Seek advice from your coleagues or your local safeguarding professionals if you are not sure what to do. Designated nucleuses to seek assurance from GPs that notifications are being shared as per safeguarding practice protocol and compliance with the RCGP guidance. Any incidence to be reported via datix in order to monitor prevalence. Assurance provided by the Named GP for Safeguarding Children and updated. Recovery Plan			AMDER	GREEN		

Ref:	Sub Group required b	s Completed by y	/ Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service D Status (I.e. is the U service currently effectively mitigating the risk?)	Checked by SSSCP
45	SSSC	P CCGs	Community Paediatric Service	MPFT	Stop service except for: - Services/inversions deemed clinical priority (this will be completed virtually unless need for urgent clinical examination) - Child protection medicals - Talephone advice to families - Risk stratify Initial Health Assessments (urgent referrals need to continue however some routine referrals may be delayed with appropriate support e.g. initial basic advice to parents/carers). Face to face appointments resuming with PPE in place gradually on a need basis. Recovery Plan	Recovery Plan	Recovery Plan			GREEN	GREEN	
	Page 33	P CCGs	Children's Mental Health / CAMHS / T2 / LD	CCCs	T2 CYP: Changes Consortium Service is operational, working to their usual operating times. They are receiving and triaging referrals and offering remote services and interventions via a range of technologies including peer support. They have an operational website. Action for Children - Service is operational, working to their usual operating times. They are receiving and triaging referrals and offering remote services and interventions via a range of technologies including peer support. They have an operational website. Service is operational website. Service biologies including peer support. They have an operational website. Service Mobilising - Contract Commenced 01/04/2020 Service Mobilising - Contract Commenced 01/04/2020 Service Mobilising - Contract Commenced 01/04/2020 Service is operating refuenced access times: Mon – Fri 11/03am - 30gm, whilst recursing and relegioying existing staff. They are receiving and triaging referrals and offering remote services and interventions. For service that require a member of staffs input this is via remote service only. Telephone access for CVP and their family is M-F, 11am-3pm. Access to Silver cloud therapeutic services is available 247. Their website is fully operational. Recovery Plan	Face-to-face sessions have been ceased and premises is closed to the public to prevent transmission of Covid-19. Staff are working from home. Remote access to children with adults in a non-supervised context can pose a potential risk. Face-to-face session have been ceased and premises is closed to the public to prevent transmission of Covid-19. Staff are working from home. Remote access to children with adults in a non-supervised context can pose a potential safeguarding risk. Recovery Plan	Telephone and technology for remote access is offered. The service is delivering: a range of emotional health and wellbeing services to support CTP. All staff have had Safeguarding training. Telephone and technology for remote access is being used to deliver services. The service is delivering: a range of emotional health and wellbeing services to support CYP and their families. The service carries out Enhanced DBS on all its staff. All staff have had Safeguarding training All staff have had safeguarding training. The service carries out Enhanced DBS on all its staff. All staff have had Safeguarding training All staff have had safeguarding training. The sits are fully miligated in their revised service: A wide range of services are available via remote access. There is always going to be this element of potential risk associated to remote/unsupervised access. Recovery Plan			AMBER	GREEN	
47	SSSC	P CCGs	Core CAMHS, EMHPs, ASD, Children's LD	NSCHT	CAMHS All C and YP have been individually RAG rated and those who require face to face care will receive this, others will be assessed and reated using remote technology. Team presence reduced and bases closed, teams amaigamated into the Darwin School to reduce the spread of COVID 19. EMHP's Joint working with head teachers and identified vulnerable children are being assessed and treated through digital platforms where appropriate. Team presence reduced and bases closed, teams amaigamated into the Darwin School to reduce the spread of COVID 19. ASD Assessments now ceased due to an inability to undertake remotely Children's LD All C and YP have been individually RAG rated and those who require face to face care will receive this, others will be assessed and treated using remote technology. Team presence reduced and bases closed, teams amaigamated into the Darwin School to reduce the spread of COVID 19. Recovery Plan	CAMHS Increase in MH need due to the reduction in F2F consultations. Increase in MH need due to the school's closure ASD Increase in complaints Children's LD Increase in MH need due to the reduction in F2F consultations. Increase in MH need due to the reduction in F2F consultations. Increase in new referrals due to COVID 19. Recovery Plan	CAMHS Staff twho are remotely working can be drafted in should the need for F2F appointments increase. Chiss Care Centre 100% operational Redeployment of EMMP's into core CAMHS if required Developing digital self-help packages EMMP's Staff who are remotely working can be drafted in should the need for assessments increase Developing digital self-help packages ASD Reporting and monitoring of this. Children's LD Staff who are remotely working can be drafted in should the need for F2F appointments increase. Crisis Care Centre 100% operational. Redeployment of EMMP's into core CAMHS if required. Developing digital self-help package. Recovery Plan			AMBER	GREEN	

Ref: Sub Group required b		Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mittigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Updated	Checked by SSSCP
48 SSSC	CCGs	T3 CAMHS	MPFT	Service is operational, working to our usual opening times. We are continuing to receive and triage referrals and offering remote services and interventions via a range of technologies including Microsoft teams, one consultation. We have a working website with all up-to-date information on this From 3rd April will have the 24/7 access line in place as per NHSE directive. On the west we are now operating from one base The Bridge in Stafford On the East we are continuing to run from three bases Recovery Plan	Face-to-face sessions have been ceased and premises are closed to the public to prevent transmission of Covid-19. Remote access is being offered to all CYP and their families Where there is an acute clinical need/risk face to face is being offered with appropriate PPE protection We have a mixture of Staff working from home and from base. Recovery Plan	Telephone and technology for remote access is offered. The service is delivering: a range of emotional health and wellbeing services to support CYP All staff have had appropriate training in one consultation and Microsoft teams We are offsring choice assessments, intervention sessions, review appointments via virtual platforms and in addition telephone support to families. Waiting lists are being reviewed and managed. We are virtually altending child protection conferences We are compiling and sharing resources for CYP and families via website Recovery Plan			AMBER	GREEN		
Page 3		ASC	MPFT	Service is operational, working to our usual opening times. We are continuing to receive and triage referrals and offering remote services and interventions via a range of technologies including Microsoft teams, one consultation. We have a working website with all up-to-date information on this And from 3rd April will have the 24/7 access line in place as per NHSE directive. Recovery Plan	Face-to-face sessions have been ceased and premises is closed to the public to prevent transmission of Covid-19. Remote access to children with adults in a non-supervised context can pose a potential risk. Where there is an acute clinical needrick face to face is being offered with appropriate PPE protection. We have a mixture of Staff working from home and from base. Recovery Plan	Telephone and technology for remote access is offered. The service is delivering: A range of emotional health and weltbeing services to support CVP. All staff have had appropriate training in one consultation and Microsoft teams We are compiling and sharing resources for CVP and families via website Recovery Plan			AMBER	GREEN		
50		13 Children & T2 Traiblazer, T3 Children EDS	MPFT	13 Childrens & 12 Trailblazer Service is operational, working to our usual opening times. We are continuing to receive and triage referrats and offering remote services and interventions via a range of technologies including Microsoft teams, one consultation. We have a working website with all up-to-date information on this And from 3rd April will have the 24/7 access line in place as per NHSE directive. T3 Childrens EDS Service is operational, working to our usual opening times. We are continuing to receive and triage referrats and offering remote services and interventions via a range of technologies including Microsoft teams, one consultation. We have a working website with all up-to-date information on this And from 3rd April will have the 24/7 access line in place as per NHSE directive. Recovery Plan	13 Ohlidense & T2 Tailibater Face-to-face sessions have been ceased and premises is closed to the public to prevent transmission of CoVid-19. Staff are working from home Remote access to children with adults in a non-supervised context can pose a potential risk. Where there is an acute clinical need/risk face to face is being offered with appropriate PPE protection T3 Ohlidrens EDS Face-to-face sessions have been ceased and premises is closed to the public to prevent transmission of CoVid-19. Staff are working from home and from base Where there is an acute clinical need/risk face to face is being offered with appropriate PPE protection Remote set an acute clinical need/risk face to face is being offered with appropriate PPE protection	13 Onlineme & T2 Trailbater Telephone and technology for remote access is offered. The service is delivering: A range of emotional health and wellbeing services to support CTP. All staff have had appropriate training in one consultation and Microsoft teams We are compiling and sharing resources for CYP and families via website 13 Childrens EDS Telephone and technology for remote access is offered. The service is delivering: A range of emotional health and wellbeing services to support CTP. All staff have had appropriate training in one consultation and Microsoft teams We are compiling and sharing resources for CYP and families via website T3 Childrens EDS A range of emotional health and wellbeing services to support CTP. All staff have had appropriate training in one consultation and Microsoft teams We are compiling and sharing resources for CYP and families via website Recovery Plan			AMBER	GREEN		

Ref: Sul rec	b Groups quired by	Completed by	Service: F		Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Updated	Checked by SSSCP
51		CGs .	Provider L			guidelines. Changes to the low risk small for gestation age pathway are scans at 32 wks and 37 wks only unless othe concerns for the pregnancy. Service changes may be patchy and some women may not receive updated comms. Recovery Plan Capacity will be our main issue as we will continue to meet deadlines for new LAC patients as well as seeing these patients, with no increase in staffing. Ensuring quality and timeliness of tuture IHAs will be chalenging.* Increase in the incidence of NAI - NAI is the leading cause of major trauma in young bables. Abusive head trauma is part of this, and the peak age at which it happens is around six to eight weeks old, which corresponds to the age at which children cry most persistently.	NHSE plan to implement the core of the ICON programme urgently, targeting new parents at the time of the birth,			AMEER	AMBER		
cc alle	ა л					Lack of information sharing leading to vulnerable women and babies being overlooked and potential safeguarding issues not being addressed in order to prevent harm.	Advice for HV and CP support will be encouraged. This is still possible by telephone and if urgent need, face to face with PPE support. Designated nurses to seek assurance from providers that notifications are being shared as per safeguarding practice protocol. Any incidence to be reported via datix in order to monitor prevalence. Assurance citivade VH /VI MS environs and updated.						
52		Staffordshire Police			MASH is currently functioning for the front door. This means we are at real time for assessment and referral. Recovery Plan	10%-reduction of planned resources would impact on service level agreement and mean time parameters may not be achieved for all service level agreements. Impact—Time level parameters would be likely affected to a minimum with this level of abstraction for Researche and Tame. Lader Staff. Priority would have to be given to High and Medium work on Back and Front Door. This could result in a backlog of Slandard Front Door work which would go urprocessed until other work completed. The impact would be increased backlog with referens on machaer Staff. Priority would have to be given to High and Advection in Staff. As previously detailed above but such abstraction would impact more significantly on our service level agreement obligations. Time level parameters would be likely affected to a much higher degree with this level of abstraction for Researcher and Tame Leader Staff. Priority would have to be given to High and then Medium work on Back and Front Doors. The impact would and have to be given to High and then Medium work would not reveive the tegret review in MASH and there would be an increased delay in these matters being referred. There would be that all Standard work and some Medium work would not reveive the tegret review in AMSH and there would be an increased delay in these matters being referred. There would be a directed to a subclog with referration. It is likely that only high-risk work could be dealt with in MASH on the Back Door for Sec 47 Strategy Discussions and Sec 42 Planning Discussions. There would be no capacity to action Staff.can Staffard and Medium Risk referratis would be affected in these circumstances the Front and Back Door are unlikely to be processed.	10% - No intervention required 20% - Medium to HighProfity would have to be given to High and then Medium work on Back and Front Doors It is likely that only High-risk work could be dealt with in MASH on the Back Door for Sec 47 Shategy Discussions and Sec 42 Planning Discussions. There would be no capacity to action Sec 17 or Welfare queries for partner agencies unless highlighted as significant risk. 30% - Af this point more serious consideration is a focus on HIGH risk only. Lateral checks would be reduced in respect of the provide this would be extremely limited. - Tage could not be actioned. - Cal Taking province housed be extremely limited. - 40 Taking province would be needbaced. Hours of work may need review and only urgent referral via email could be initially actioned. Referrale may have to be made without Lateria Research. These could be reviewed through a quick review of historic records on the ISL. Standard and Medium Risk incidents would be affected in these circumstances on biff Front and Back Door and are unlikely to be processed. Standard Medium & High would be likely affected for Sec 17 and Welfare Social Care requests which may not be able to be processed. Recovery Plan			NA	GREEN		
53	SSSCP	Staffordshire Police	WARAC F	olice	Currently operating virtually through telephone conferencing and email action allocation.	Impact would-be high-fisk victims would be without a central coordination point for support and intervention. Recovery Plan	Mitigation if the staffing levels reduce the service will be maintained by email notification, action allocation and updates to coordinate the service for all partners and support the victims and their families. Recovery Plan			RED	GREEN		

Ref: Sub Group required t		Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in deman? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Checked by SSSCP
54 SSSC	CP Staffo	ordshire Police	OVDS	Police	Currently operating normally. Recovery Plan	operating the service.	Redeployment of resource. The triage process could cease if necessary and consideration for officers and social care to utilise their common law disclosure powers to provide immediate disclosure to victims.			RED	GREEN	
	20 04-#	ordshire Police		Police	Currently operating normally with consideration for deployment in line with Covid 19	Recovery Plan	Recovery Plan 10/20/30% reduction - Senior management to consider displacement of Investigative requirements to force			N/A	GREEN	 <u> </u>
					Cultering operand in the war consideration of deputyment in the war cond is guidance.	To a record on - Set warp pin it was to visual to ware an exceed Deadlines to CPS, files would take longer as the live investigations take priority. Prioritise work, therefore historical allegations or allegations of abuse where the safeguarding is inplace would have to wait while live investigations are prioritised. 20% & 30% Reduction in staff We would only be responding to two jobs to ensure safeguarding is in place. Investigation will suffer, or may not be completed Investigations in the abuse of children, the priority with such low staffing levels will prioritise safeguarding only. Recovery Plan	departments to meet the demand of dealing with live incidents.					
56 SSSC	CP Staffo	ordshire Police	CPC	Police	This learn is currently functioning normally, but they are a small learn of 5. Recovery Plan	No Police attendance to any ICPC ICPC reports would be delayed Recovery Plan	Redeployment of personnel. CPET team would have to assist in compiling reports for ICPC Recovery Plan			RED	GREEN	
^{ssp} Page 36	Station	ordshire Police	DBS	Police	Demand in DBS is currently low and team numbers are maintained. Service is currently unaffected.	These potential risks are graduated at 10/20.00% staff reductions 10%: DBS - Service Level agreement may be breached but this would be minimal as we already work on a 10% reduction due to annual leave etc. 20% - SLA of 60 days would start to be breached DBS Clerks - would not be able to complete all the agplications that was sent to us daily from DBS Clerks - would not be able to complete all the agplications that was sent to us daily from DBS Clerks - would not be able to complete all the agplications that was sent to us daily from DBS Clerks - would not be able to complete all the agplications that was sent to us daily from DBS Clerks - would not be able to complete all the agplications that was sent to us daily from DBS Clerks - bread be able to complete his stage of the process so the impact would be less significant. 30% - SLA requires 85% of applications to be dosed off in 12 working days. This would be breached and normally requires a recovery Action plan to be created from DBS Liverpool. DBS Clerks - Breach of Work in Progress 85% of applications dosed in 12 days. DBS Clerks - Breach of Work in Progress 85% of applications dosed in 12 days. DBS Clerks - Breach of Work in Progress 85% of applications would be affected and be cut by over 50 % as well as delegation of work and management dives. We would not be able to confline to complete our work in accordance with the SLA and get applications out in a timely manner. This could lead to safeguarding issues where applicants and registere bodies and employees would nor receive ther DBS certificati in a timely manner. The would also have an impact of the SLA BIS full that as once the SLA 60 days is breached there may be further contact from the public; registered bodies and employees with the increase of complaints regarding our breach of SLA. Recovery Plan	The DBS Clarks would priorities Homebased applications as these hold the most risk to the vulnerable and then PLX work which are intelligence led. There is a reduction forecast in DBS Applications due to the reduction in Recruitment generally. Impact RAG varies upon level of abstraction. Detail provided within risk overview. Recovery Plan			NA	GREEN	
58 SSSC	CP Staffo	ordshire Police	Assault Services	Mountain Health Care. Commissioned by OPCC & PHE	Service is currently operating as normal 365 24/7 – it is a regional model. Recovery Plan	Should staffing levels be impacted upon there would be a reduction in service provision. This service provides the forensic medical examination as well as the holistic health needs, therefore the medical examination is time critical following the report. Recovery Plan	A BCP is in place detailing plans for 10/20/30 % abstraction rates and how that will affect service.			RED	GREEN	

Ref:	Sub Groups required by	Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Updated	Checked by SSSCP
59	Page 37	SCVYS	Partner: Children, Young People and	Voluntary Youth	Varied picture across the 210 organisations in our membership: -Some organisations have simply closed activities, whilst remaining in regular contact with participants and their families. -Others are proving a range of online youth services including online activities, group meetings, one to one support (memtoring, counselling, etc), alternative deucation, support for schols, foxolang, counselling, etc), alternative deucation, support for schols, foxolang, counselling, etc), alternative deucation, support for schols, foxolang, etc), alternative -Others are deulewing in different ways, such as using printed age appropriate activity packs delivered to existing participants unable to latend sessions and without unlimited online access, capacity to print, etc. -Others are focusing their efforts on supporting community-based responses to CV19, playing their part alongside others in addressing vulnerability and supporting tooms must in need in pracical ways (chopping, collecting guidelines SCVYS continues to support the 'Youth Vicice activities and are exploring a number of altemative methods to enable young people to Find their Vicice. SCVSY semains open for business and continuing to offer our core support offer to the sector alongside some specific support needs to excisice and raculculae demand for Information, Arka and can dividicand people 16 and the Vicice. SCVSY semains open for business and continuing to the current crisis. Recovery Plan Incrusted levels of support anound safely reopening youth services of all types. This includes demand for Information, Arka and sex support 17 ships. The Management Training, etc. Support for YP to transition back to social environment overcome fears, build confidence, etc. There may be a need for new younger withmeers in seetings, so DBS, youth work training, safeguarding, etc. will all be needed to bring the workforce up to speed.	https://www.ukyouth.org/covid-19/ Post CV 19 exit and sustainability strategies for many voluntary sector organisations. Recovery Plan	Guidance on digital services including privacy, safeguarding, etc. provided via Youth Work Support website, supported by social media postings and emails to sector PDBS Umbrells services still fully operational as is core safeguarding support offer around policy and procedures information, advoc and guidance CVIP spage set up on SCVPS website including DBS information section, Heiping others safely, mental health online support, etc. Peveloped a SCVPS support tool to enable organisations to determine their response and ensure this is safe and appropriate. ScVPS staff are fully equipped to work remotely/intually using telephone/video conferencing wherever possible Staff are juning ones that are refoorm meetings happening locably ScVPS have built and are regularly updating the picture of community-based responses (both new, emerging noses and existing ones that are refoormed in an attempt to kint activities together, avoid duplication, identify and if necessary, address gas. -The information and intelligence in our CBF Community Response spreadables is being fed into the County Council de response alongeide current education, children's social care, children's centres, commissioned providers' offers to enable any unforesen vulnerabilities to be addressed. -Responders and ideas exchanges are happening through UK Youth Innovators weekly Zoom meetings and a WhatsApp group -RAG Raing will depend on:- Where services will stand short term disruption, again mostly these are moving towards alternative methods of delivery. Where they will stand longer term disruption, again mostly these are moving towards alternative methods of delivery. Where they will stand borger term disruption, again mostly these are moving towards alternative methods of delivery. Where they will stand addrivities for local YP to engage with. Mary local youth organisations have continue to deliver their youth apper barries for line organized in a hibernate mode. Signposting to various websites, online tools, heplines, etc.			NA	GREEN		
60	SSSCP	НМҮОІ	Her Majesty's Prison & Probation Service	Youth Custody Service HMYOI Werrington	Provision of Meals Gowmon has met with catering manager & Prison Officers Association (POA) (Uhion) to agree the level of catering service to be provided during the COVID-19 period. Recovery Plan As a custolial site it is hard to answer all these questions. Our increase will be new admissions to custody and they will get same offer but in a different way. Our recovery model will be a long process to open back up again.	- Staff labour shortage • Non delivery of supplies Recovery Plan	Non catering staff from different functions have received training in case of outbreak within catering function Local catering plan for Covid19 has been produced Provision of Ramadam packs between 23 April and 23 May Hays focam ready meals in stock as contingency Additional focus to been produced uning this time to young people and welfare packs to those young people who do not have any money for canteen. Recovery Plan			AMBER	GREEN		
61	SSSCP	НМҮОІ	Her Majesty's Prison & Probation Service		Provision of Medication & NeathCare - Governor has may with Head HealthCare & POA to agree the towal of healthCare and medication service to be provided during the COVID-19 period. - Mental Health Hearn managing caseload via internal telephone system and via face to face using PPE and social distancing Recovery Plan	- Staff labour shortage - Medicine Shortage - PPE shortage Recovery Plan	Local healthcare and medication delivery plan for Covid19 has been produced Medicine being administered in healthcare, protocol in place for on wing dispensation if required Standard Opending Procedures Netwares Cohon Unit (RCU) - Unit or area for the temporary separation of newly received young people for up to 14 days, allowing the prison to verify that teach individual is not symptomatic - identified as WADE Unit. Protective laciation Unit (RU) - Unit or area for the temporary isolation of symptomatic young people for up days, identified as WADE Unit. Sheding Unit (SU) - Unit or area for the temporary isolation of symptomatic young people for up days, identified as WADE Unit. Sheding Unit (SU) - Unit or area for the temporary isolation of those young people within the NHS England whenhale gland subcle Unit. Constraints, reducing the lack individual is not symptomatic young people within the NHS England shere the subcle Unit. Associated to Local Resilience Forum in Statfordshire Recovery Plan			AMBER	GREEN		

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	SSSCP		Her Majesty's Prison & Probation		Provision of young person safety and welfare Govermor has met with appropriate functional head, safety team, POA, junior management team and other local stakholders to agree safer custody and welfare support for young people confined to norms for extended periods due to COVID-19. Vatis Suspended-antionally Weekly safety clocks by Safety team including resident Social Workers in place Provision for daily showers/sexrcise In room entertainment products Pastoal care packs Clearing schedule and provision of cleaning materials for young people LAC reviews via technological solutions Managing Minimiang Physical Restrain (MMPR) – PPE sought for staff for planned removals, preventative conversations with each young person taken place Child protection process in place. Hurkingson process in place, interviews considerated social distancing. Escalation process in place in case of absence of social Workers, including comms plan Advocacy services being managed remotely, head of safety is single point of contact wuld signery meeting every weekday morning at 8am chaired by the Governor/De, child protection activity, all failered via social distancing. Cushody Support Plan – each child receiving one CUSP session per week to enhance relationship with carers. Command mode – each child receiving one CUSP session per week to enhance relationship with carers. Command mode – each child receiving one CUSP session per week to enhance relationship with carers. Command mode – each child receiving one CUSP session per week to enhance relationship with carers. Im command mode, all regime plans as approved with this structure via arginal primor publicet accing as Silver commander. Governor is Bronze commander on sile In room education packs provided by Education contractor Recovery Plan	Staff labour shortage (also specialist trained staff) Lack of effective welfare checks ineffective safeguarding and welfare for young people Recovery Plan	Attendance management and regime management planning Assessment Care Custody Teamwork (self-harm and suicide management planning) – adhering to regional adfer custody lead protocols Solad Worker Cover Salet formation Notice and Notice to Young People Salet formation Notice and Notice to Young People Salet formation Notice and Notice to Young People Salet Johnstone Notice and Notice to Young People Salet Johnstone Notice and Notice to Young People Recovery Plan			RED	AMBER	
[®] 38)	HMYO			Provision of Family/Carer contact Gowen Char and with appropriate functional heads, safety team, POA, junior management team and other local stakeholders to agree family contact support for young people duming COVID-19. - Extra pin credit added for all young people - Access to YOT, Social Workers and Children's commissioners added to pin for young people and call paid for by site. - Tachnological issues being sought to counteract suspension of visits - Extra calls - Email a pisoner - Videolink - Artisk holme and wellbeing hotline for family/carers - Big word translation Service Recovery Plan	Ineffective family contact for young people Staff labour shortage Recovery Plan	Resettlement PlackBonent/Social Workers contacting family/carers of all young people alongside external professionals Attendance Management i Eatry release where appropriate Home Detension Curliew Staff Information Notice and Notice to Young People Recovery Plan			GREEN	GREEN	
64	Mental Health	Staffordshire Police	Triage (North)	Response Team	Response Officer between the hours of 4pm and 2am, 7 days a week is allocated to the Trage Service and works alongside a mental health nurse to respond where considered appropriate to incidents whereby mental health is a concern.	Increase in demandincidents will see an officer not being allocated to the Triage service Officers becoming unwell and/or having to self-isolate and remain absent from duty will create ahortage of staffing on shift and not allow for allocation to Triage duties Those experiencing mental crisis who call the Police for service/support (where no crime is evident) will not receive the most appropriate response. Recovery Plan	Shift Sergeant will be able to contact the mental health nurse (via phone) to discuss incidents and seek advoinfirmation on alternative responses, these may incidee: Paciar response Referal to alternative service such as Access/Orisis Teams Consideration for overtime for Officers from other teams to cover the Triage duty. Recovery Plan			AMBER	GREEN	03/06/20
65	Mental N Health	Alidlands Partnership NHS Foundation Trust	In Patient Mental Health Wards	Midlands Partnership NHS Foundation Trust	in patient wards al St Georges Hospital Recovery Plan	Increase in ward admissions and mental health act assessments in the community. A number of DTOC patients currently across the wards and a delay in appropriate placements being allocated. Clinical staff becoming unwell and or having to self isolate and remain absent from clinical duties will create shortage of staffing on shift. Recovery Plan	Staffing levels being reviewed daily. Community staff have also been redeployed onto the wards to offer more support. Patient discharge being reviewed daily and where appropriate encouraging returning to the community. Regularly liaising with social care staff in regards to DTOC patients and exploring alternative placements. Recovery Plan			AMBER	GREEN	03/06/20

	Sub Groups required by	Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in deman? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)	Date Checked by Updated SSSCP
66	Mental Health	Midlands Partnership NHS Foundation Trust	136 Suite	Midlands Partnership NHS Foundation Trust		The suite is currently staffed by x2 acute ward staff at St Georges hospital. When ward acuty rises this will have an impact on the ability for the suite bo be safely staffed. This as a result will add pressure to police/ triage services in the community. Clinical staff becoming unwelf and or self isolating resulting in their absence from clinical areas will result in staff shortages. Recovery Plan	Staffing levels are being reviewed on a daily basis to ensure that this service can continue to be provided. Community staff have redeployed to the wards. Site manager to request neighbouring wards to support staff the 136 suite. Consider the use of Triage worker on the West to support Recovery Plan			AMBER	GREEN	03/06/20
2	Health	Midlands Partnership NHS Foundation Trust	Triage South West		Staff due to commence in post week commencing 13th April 2020, will require full Induction into Role	additional support in order to provide this	For workers to work from CRHT Base effering support and Response to Officers dealing with Mental Health related Issues in conjunction and supported by Crisis Home Treatment Team, in line with CRHT Workoad and Service Demands Shift Sergeant will be able to contact the mental health nurse in CRHT (via phone) to discuss incidents and seek advolutiformation on alternative responses, these may include: Police response Availability of mental Health Worker to support with Mental Health Assessment subject to availability Referal to alternative service such as Access/Crisis Teams Recovery Plan			AMBER	AMBER	03/06/20
	Mental D Health	Midlands Partnership NHS Foundation Trust	Triage South East		Currently No service operating due to inability to recruit to the posts. Posts to be Re-Advertised Service will operating in same way as south once posts have been recruited to and the service is fully operational Recovery Plan	Any Referrals Directed to CRHT, may result in delays to response, which is currently up to 4 hours, may be further delays due to workload prioritisation and statting capacity Recovery Plan	Local CRHT Team to offer support and response to officers dealing with Mental Health Issues in line with CRHT Workload and Service demands Staff sergeant to contact CRHT Mental Health Nurse via phone and seek advice regarding alternative response should CRHT be able to provide a timely response, these may include Police Response Availability of mental Health Worker to support with Mental Health Assessment subject to availability Referral to alternative service such as Access/Crisis Teams Recovery Plan			AMBER	AMBER	03/06/20
69	Mental Health	Midlands Partnership NHS Foundation Trust	Liaison South West	NHS Foundation Trust	Service Core Operating hours 08:30-4.30 Mon-Fri enabling Assessment of Service users presenting with Mental Health Needs to the County Hospital Short term acheroids no the operating hours of laison currently in place with extended winter pressure funding enabling cover on sat-sun 08:30-4.30 subject to ability to cover shifts Cover provided outside these hours by CRHT to A+E only not inpatient wards Recovery Plan	Staff becoming unwell and/or having to self-isolate and remain absent from duty will create shortage of staffing on shift and not allow for allocation to Triage duties Staff being unable to offer face to face assessments due to their own Physical Health Vulnerabilities	Telephone Triage of all referrals in the first instance Availability of 1:1 Consultation software to enable safe face to face activity where appropriate Dementia Liaison and CRHT Team to Support with any Essential face to face assessments where appropriate in the absence of the second worker To further review process regarding patients awaiting MHA Assessment To consider optice available to support assessment for patients outside operating hours of Liaison service to enable earlier discharge/release of patients occupying acute Trust bed's nine with bed demand and capacity Consider of potent of staff to support service if required in line with increased pressure/demand on acute trust bed's Consider the utilisation of bank staff to cover service shortfalls Recovery Plan			AMBER	GREEN	03/06/20
70	Mental Health	Midlands Partnership NHS Foundation Trust	Liaison East Staffs	NHS Foundation Trust	Service Core Operating hours 08.30-4.30 Mon-set enabling Assessment of Service users presenting with Mental Health Needs to the Queens Hospital Short term extension to the operating hours of liaison currently in place with extended whiter pressure funding enabling cover until 10pm mon-sat sat.08.30-4.30 on Sunday subject to ability to cover additional shifts Cover provided outside these hours by CRHT to A+E only not inpatient wards Awaiting confirmation letter enabling expansion of service to core 24 model Recovery Plan	Increase in demand Staff becoming unwell and/or having to self-isolate and remain absent from duty will create shortage of staffing on shift and not allow for allocation to Triage duties Staff berg unable to offer face to face assessments due to their own Physical Health Vulnerabilities Currently No out of hours cover for inpatient wards Currently No out of hours cover for inpatient wards Currently a vacamp dosk with in the team Patients in the department with no physical Health need they may be waiting MHA assessment causing delays to transferdidscharge Current Recruitment restrictions limited to Nursing posts only Recovery Plan	Telephone Triage of al referrals in the first instance Availability of 1:1 Consultation software to anable safe face to face activity where appropriate To other review process regarding patients awaiting MMA Assessment To consider options available to support assessment for inplatients outside operating hours of Liaison service to enable enable individual angeliness occupying acoust Turs bets in line with bed demand and capadry Consider deployment of staff to support service if required in line with increased pressure/demand on acute trust beds Attempt to recruit to Nursing posts Consider the utilisation of bank staff to cover service shortfalls Recovery Plan			AMBER	GREEN	03/06/20

Ref:	Sub Group required b	by Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mittigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (I.e. is the service currently effectively mitigating the risk?)		Checked by SSSCP
71	Menta Healt			2 477 A hour response to all urgent requests for assessment for people presenting with Acute Meal hadhit Needs Response time up to 4 hours Gatekeeping function to all admissions to mental health inpatient wards Facilitating Early lockange from Hospital Provision of intensive Home Treatment to offer patients an alternative to hospital admission Recovery Plan	Increase in demand Staff becoming unwell and/or having to self-isolate and remain absent from duty will create shortage of staffing on shift Staff being unable to offer face to face assessments due to their own Physical Health Vulnerabilities Potential pressure that may impact on both mental health and Acute trust beds Potential Delays in response to service users, the acute Trust and Urgent care services Recovery Plan	Telephone Trage of all referrats in the first instance Availability of 11 Consultains onthere to enable safe face to face activity where appropriate Consider deployment of staff to support service if required in line with increased pressure/demand on acute and mental Health trust bods Staff to be working from home where possible to minimise risk of spread of infection Community Pathways to extend hours of operation to cover out of ours Home Treatment requirements Consider the utilisation of bank staff to cover service shortfalls Recovery Plan			AMBER	GREEN	03/06/20	
	Page 40	ip Staffordshire on Community Mental st Health Access	Midiands Partnershi NHS Foundation Trus	24/7 Access services to adult mental health service.	Potential risk of increased referrals and contact to services with current situation an introduction of Mit helpline. Potential risk due to redeployed staffing knowledge and experience re MH. Potential risk re need for WFH increasing and limited IT accessibility. Recovery Plan	Increase of staffing into services, redeployment of staff into Access re to cover call handler role and MH Helpline. Review and redevelopment of induction for redeployed staff and mentoring. To include update re access to resources and training re processes. Training plan and induction adapted to incorporate changes to service and developments of MH Help line to include also remote working and answering / triaging calls. Lap tops provided to enable remote working. Cloud and Hunt group being explored. Review of staffing levels on daily basis as service: action taken as necessary re relocation of staff within Teams. Collection of data re understanding key access times, demand and capacity to enable flexibility in workforce provision and response. Recovery Plan			AMBER	AMBER	03/06/20	
73		ip Staffordshire nn Community st Intervention Pattway, Intensive Life Skills. (ILS)	Midiands Partnershi NHS Foundation Trus	Operationally remains same, Monday to Friday with additional provision to provide possible extended hours (to 8 pm) and limited weekend cover (9 to 5 Saturday & Sunday) Recovery Plan	Staffardable Community Intervention Pathway Risk of service provision and interventions due to need to review and priority 1-1 and group consultation with current environment. Risk re increased need of service due to increase in demand due to current situation re COVID 19. (raised MH issue) Risk re reduction in staffing due to sickness, self isolating and shielding. Risk re capacity and ability re NWW re IT digital solutions and working remotely. 4068 Risk re provision re medication introduction, thration and supply due to remote working and possible reluctance of service users attending clinics. (As below also if required and appropriate) Recovery Plan	Staffordshire Community Intervention Pathway Development / Introduction of digital platforms. Clinical review of caseload re priorities and must dos, (red amber green) Review and monitoring of staffing levels, relocating staff re priorities of service provision. It digital platforms developed and SOPS / guides produced. Access to appropriate PPE for face to face appontments Review of NWW for al team members re assessment and interventions. Cross covering services and Pathways. Expansion of hours and availability 7 days a week (review in 1 month) Intensive Life Skills (ILS) Clarity and support to service users re options. Medication provision revised and in place, delivery drops to pharmacry to avoid people attending clinics if clinically appropriate. (As below also if required and appropriate) Recovery Plan			AMBER	GREEN	03/06/20	

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Page 2	Midlands Patheship NHS Foundation Trust	Psychosis East and West. Early Intervention		Operationally remains same with additional provide no provide extended hours (up to 8 pm) and limited weekend cover(9 to 5) Recovery Plan	Risk of increased demand due to relapsing of service users due to current situation. Risk of induction in interventions including administering of medication due to current situation, staffing. NWW and engagement. Provision of medication currently prescribed by MPFT(As above if required and clinically appropriate) Recovery Plan	Review of case load and priorities, re service provision and need via daily MDTs. Daily MDT to prioritise work load and needs of service users. Review of staffing levels and options re redeployment for priority and critical services. Accessibility of PPE. (ordering storage and access.) Cross cover / redeployment of staff into area to cover priorities. Review of process re review and provision of prescriptions in place. East and west. Continuation of physical health clinics re initiation, monitoring and provision of medication. Revised way of working re clinics and face to face, re 1 Consultation platform and actual face to face as clinically necessary. Expansion of hours working by team to include weekend working, review in 1 month. Continued face to face lither digitally or actual dependent upon need Access and availability to PPE: processes in place for ordering and access. IT equipment to enable staff to with where clinically appropriate. (As above if required and clinically appropriate) Recovery Plan			AMBER	GREEN	03/06/20	
A Mental Health	Midlands Partnership NHS Foundation Trust	Community Older Adult and Dementia Mental Health Services South Staffordshire	Midlands Partnership NHS Foundation Trust		Community staff from a range of clinical disciplines available 7 days a week as of Monday 6th April 2020 (8-9 weekdays and 10-6 weekends). Response to challenging situations where the person may have dementia or frail and mentally unwell. Social distancing is not always maintained due to these challenges. Staff are enteining values isulations. Staff are responding face to face urgently to cases where there is a risk of the situation worsening and putting in essential support therapy interventions (this includes all settings: satisfies thom, respectively interventions (this includes all settings: to the satisfies the setting staff of the satisfies the satisfie	Staff who are at higher risk are placed into roles where they do not need to make face to face visits eg: duty phone / Access worker and telephone wellbeing / maintenance calls. At routine services to enhance response. 'A dy a week working put into place to extend the service for those who need and it and to support in continuity those accessing the service as well as specialised community support every day working on hospital avoidance and home treatment. Direct links and access to other services such as Home First to ensure a joined up approach and to avoid duplication. Immediate response available for those being discharged from mental health wards to enable earlier discharges to be actioned as the community enrices now taking on this role over the 7 day working week. The community service is staffed at around 88% at presents able to mainte in essential functions and the postive.			AMBER	GREEN	03/06/20	
76 Mental Health	NSCHT	Place of Safety	NSCHT	POS located within the Crisis Care Centre remains fully operational.	Increases in demand from across Staffordshire into designated POS Delays in assessments due to workload/ capacity issues of medical and AMHP colleagues and geographical footprint resulting in the POS being occupied for significant periods of time. Recovery Plan	Continues to be monitored through Trust performance and governance mechanisms. Managed at local level as part as BAU. However in the absence of the SEC 136 steering group we now need a forum to discuss any issues' challenges we have across partners'system. Recovery Plan			AMBER	AMBER	03/06/20	

	ub Groups required by	Completed by Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service I Status (I.e. is the I service currently effectively mitigating the risk?)	Date Checked by Updated SSSCP
77	Mental Health	NSCHT Crisis Care Cer	tre NSCH	T Orisis Care Centre including All Age Access & Home Treatment Team remains fully operational.	Increase demands in Crisis Assessments in particular diversions from A&E. Patients awaiting Mental Health Act assessments (that have not being detained on a 136 are diverted to the Crisis Care Centre to await this assessment. Delays in assessments due to workload (capacity issues of medical and AMHP colleagues may impact on staffing levels and availability to respond to calls. Recovery Plan	Demand will be monitored service manager and an increase in staffing will be arranged where required. Community Mental Health Teams continue to work with caseloads which will support and prevent patients known to mental health services end up in crisis. Recovery Plan			AMBER	GREEN	03/06/20
78	Mental Health	NSCHT Mental Health Liaison Team		T MHL T which includes all age service remains fully operational.	requests to enable people to move out of UHNM.	Demand will be monitored service manager and an increase in staffing will be arranged where required. Community Mental Health Teams continue to work with caseloads which will support and prevent patients known to mental health services end up in crisis. Recovery Plan			AMBER	GREEN	03/06/20
79	Mental Health	Staffordshire County A countywele Council Approved Men Health Profess (AMHP) respon	al Counc onal	il or for whom a Mental Health Act assessment has been requested within statutory	An increase in demand may lead to delays in being able to co-ordinate assessments. AMHPP may be unavailable due to having symptoms of, or self-isolating due to, Covid 19. This would create a shortage of staff to cover rolas. Additional resources may be impacted by similar staff shortages resulting in either an inability to co-ordinate assessments or a reduction in available options to avoiding detention under the MHA. Access to beds may be impacted due to exceptional demand or tighter admission criteria. Recovery Plan	AMHP is considered as a core function for the Council and all available resources to support this are being deployed.			AMBER	GREEN	03/06/20
L L L L L L L L L L L L L L L L L L L		Staffordshire County MH Social Council Inclusion and Recovery Contracts	Rethink (Newcastle and Moorfands)	I Rethink rare keeping in daily and weekly contact with all clients with updates at can planned 11:s. They are reaching out to organisations with more yest up volunteer groups for shopping etc and link those with heir most vulnerable. The service is looking at face time for those who mult to see a finitefly tice, skype for those who have it. They have set up a small neveletter with possible thoughts, practical ways to look after yourself and these will be ent via text, Facebook. They are working on supporting the peer groups to set up virtual groups and exercise groups recorded and put on social media. Rethink have a yoga teacher at another service who is on digital methods of contact with service users and telephone one to one sessions Recovery Plan		Recovery Plan			GREEN	GREEN	03/06/20
81	Mental Health	Staffordshire County MH Social Council Inclusion and Recovery Contracts	Making Space (Stafford, Cannock and South Staffs)	Staff are calling existing clients to inform of current service arrangements and contact numbers as well as, establishing with them what support they want and need. offering different input subting the client. This includes, supporting clients to sign up to distance learning courses. Most clients are requesting quite intense support of a call regular way. Which the service currently the capacity to do. The service is satting up a couple of get batter connected" peer support skype groups, to alleviate the social isolation aspect for some, and just give some people groups, to alleviate the social isolation aspect for some, and just give some people the opportunity to talk to others and discuss any coping strategies etc. Tisk, assessments have been cartied out on all medium and high clients - this is part of the BCP. The service continues to have contact with CHMT, Social Prescribers etc. Recovery Plan	Racovery Plan	Racovery Plan			GREEN	GREEN	03/06/20
82	Mental Health	Staffordshire County MH Social Council Inclusion and Recovery Contracts		Work has been undertaken to prioritise dients most at rick. Most work now being undertaken remotely. Reviewing how people access the service and changing the work to meet needs. Eg use of Whatsapp Peer Support groups, Faetbock more signosting. Staff all confining their normal caseloads and working from home keeping in egular contact with lents. The current caseload of dients in 1-1 support & peer support groups have been identified and risk assessed. Recovery Plan	happened just before COVID-19 hit. Therefore, staff and clients are still getting used to the changes.	The waiting list is now being protritiend & triegod - so far papely from Circlei Team, for example have been prioritised, and people are being supported well by other services currently where expropriate. TMM also locing a clorions to all if un 8 maintain groups through platforms like whatsapp. zoon and signposting to other online support services. Staff will also offer support to people over the phone and video calling, support will mean goal closes de BCP enacted. Recovery Plan			AMBER	GREEN	03/06/20

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83	Mental Health	Stoke City Council		Stoke on Trent City Council -Day Team is managed by NSCHT EDT - Stoke on Trent City Council	Day Team – Mon- Thursday 08:30 – 17:00 Friday 08:30 – 16:30 Emergency Duty Team – out of hours including BH Recovery Plan	Shortage of AMHPs - Day Team Increase in referrals due to COVID 19 Some staff are in the vulnerable category which may lead to staff shortage Shortage of AMHP- out of hours Recovery Plan	We have a pool of AMHPs some from the Trust and others employed by Sloke Social Care. If the rota is short of availability we can try to resource replacement AMHPs from the pool following escalation to senior managers in the Trust and Social Care. We continue to use these staff on rota, however some are now office based, instead of being in the community. This will allow the service to continue to run effectively. If the rota is short for AMHPs, we also same as the day team try to resource from sessional AMHPS. This is also escalated to senior management. Recovery Plan			AMBER	GREEN	03/06/20
84	Mental Health	Police	24/7 Response and general policing cover to Rail Stations and Rail Network and any Railway related incidents.	British Transport Police	BTP is currently operating an almost near normal Officer capability with minimal abstractions and is able to respond to Immediate and scheduled incidents. This is kept under daily review.	That response Officer numbers may decline from Covid symptoms or self-isolation resulting in a reduced capability to respond to incidents. If there is a reduction in Response capability BTP may have increased response times to winerable people in distress or have to triage calls for service. Potential for some Officers from all units to be redeployed to London. This will have an impact on the number of Officers within stations and within vulnerability teams. Recovery Plan	BTP monitors Officer numbers daily and has plans in place to bolster Response capability by overtime or temporally disbanding specialist Units to support if required. Use of neighbourhood PCSO's to provide visibility in and around local stations. Recovery Plan			AMBER	GREEN	03/06/20
85	Page 43	CCGs	Core CAMHS/ EMHP's	NSCHT	Core CAMHS All C and YP have been individually RAG rated and those who require face to face care will receive this, others will be assessed and treated through the use of remote technology. Team presence reduced and bases closed, teams amaigamated into the Darwin School to reduce the spread of COVID 19 EMMP's Joint working with head teachers and identified vulnerable children are being assessed and treated through digital platforms where appropriate Team presence reduced and bases closed, teams amaigamated into the Darwin School to reduce the spread of COVID 19 Recovery Plan	Core CAMHS Increase in NH need due to the reduction in F2F consultations. Increase in new referrals due to COVID 19 EMHP's Increase in MH need due to the schools closure Recovery Plan	Core CAMHS Staff who are remotely working can be drafted in should the need for F2F appointments increase Crisis Care Centre 100% operational Redeployment of EMHP's into core CAMHS if required Developing digital self help packages EMHP's Staff who are remotely working can be drafted in should the need for assessments increase Developing digital self-help packages Recovery Plan			AMBER	GREEN	03)06/20
86	Mental Health	Commissioner:	Mental Health and Community Safety Strategic Board		In light of the COVID crisis, a decision has been made to cancel future meetings of the Mental Health and Community Safety Strategic Board while the pandemic persists. The Board will return to a business as usual arrangement as soon as it is practicable and safe to do so. Racovery Plan		Relevant aspects of the Board's agenda, during the crisis and over the short term, will be overseen by the Mental Health subgroup of the Safeguarding and Vulnerability Strategic Coordination Group.			GREEN	GREEN	03/06/20
87	Mental Health	Staffordshire Commissioner: Police, Fire and Rescue, Crime			Partners in Statfordshire and Sloke on Trent have recently signed up to a refreshed version of the Concordat with the new, updated version of the Concordat coming into effect from 1 April 2020. A multi-agency Board has been established to oversee implementation of the Concordat and its associated delivery plans however due to the impact of COVID 91 A has not been possible to arrange a first meeting of the Board. The Board will return to a business as usual arrangement with more regular meetings as soon as it is practicable and safe to do so. Recovery Plan		It is intended that over the coming weeks dial-in discussions will be held between members to help decide next steps in taking forward delivery of the Concordal's key priorities, once current COVID19 restrictions are eased Recovery Plan			GREEN	GREEN	03/06/20
88	Mental Health	Staffordshire Commissioner. Police, Fire and Rescue, Crime	Requirement		The plot project was due to commence at the beginning of April to file till the use of Communk Orders with a Mental Health Treatment Requirement (MHTR) in Staffordshire and Stoke on Trent. Delivery of the project is being overseen by a multi-agency Steering Group, comprising of representatives from a mix of health and justice agencies including NHSE. CCC, HMCTS, Probation. CRC and the OPPCC MPFT has been appointed as lead delivery partner Due to the impact of COVID19 it has not been possible to arrange a first meeting of the Steering Group or to progress delivery of the pilot as planned. Recovery Plan		All partners remain committed to the project and are exploring ways of working flexibly over the coming weeks to enable preparatory work for the baunch of the pilot to be taken forward It is hoped to be able to move forward with the pilot at the earliest opportunity Recovery Plan			GREEN	GREEN	03/06/20

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⁸⁹ Domesic Abuse	4	Slow Domestic Louse Victim Alernices	Giow	Business Continuity and Contingency Plan in place as well as COVID specific risk register. All staff now working from home with remote access to systems including central case management system. Agreement in place with commissioners / funders regarding amended service delivery. Group work and face to face 1:1 work has been replaced with telephone and video call contact where possible and safe to do so. Risk assessments and safety plans have been updated and continue to be monitored. Children and Young People's Team continue to operate, offering phone support as well as some face-bace support in school or home settings. In high risk cases. Text service launched 25:04/20 to encourage customers isolating with perpetrator to reach out. Specialist adults and children's team operating this. Liakon with partner agencies <i>e.g.</i> MH Services, Social Care in order to ensure alternative channels of communication are in place and remain open	burden on organisation's server. Extra financial burden on the charity coupled with loss of income (especially trading income) may threaten future financial feasibility of services. Recovery Plan	Regular check ins with staff in order to monitor wellbeing and provide support where needed. Regular team meetings taking place virtually are helping to maintain 'team spirit' and encourage per support. Access to employment agency that can provide specialist DVA staff if required. Seeking opportunities for funding to enhance current and future service offer and <i>i</i> or to recoup additional costs of numing the service during locidown. Upgrade of central server. Glow benefits from being part of a larger organisation and the established infrastructure that is established – this includes a dedicated ICT Team. Comms plan in place to ensure that promotion of the service occurs as widely as possible and to increase fundasing opportunities. Plan is contruly reviewed to ensure relevance. Participation in DA Task Group, which allows for risks to be highlighted and opportunities to be explored. Recovery Plan			AMBER	GREEN		
90 Nomesic Abuse	4	Jow Domestic buse Perpetator Pervices	Glow	guidelines. 1:1 and group risk management / check ins continue on a regular basis.	No behaviour change work is available to current customers. Risk of them reverting to use of abusive behaviours. Risk of missing the opportunity to support new individuals who are willing to seek support for behavioural change. Reduced face to face contact risks support being less personable / effective for both perpetrators and customers supported via ISS. Service operating with limited staff resource due to sickness / childcare responsibilities etc Remote working is reliant on individuals' intermet / WIFI connectivity and has also caused extra burden on organisation's server. This un-commissioned service is reliant on trading income. Current large reduction of this income to fund existing posts may threaten future financial feasibility of services. Recovery Plan	Weekly participation with RESPECT Practitioners working group. Close liaison with CAFCASS in order to ensure current service model is meeting their requirements. Support being provided from elsewhere in the chartly to safeguard delivery of this service. Work has commenced in order to prepare for safe re-introduction of group work. Seeking opportunities for funding to enhance current and future service offer and / or to recoup additional costs of running the service during lockdown. Glow benefits from being part of a larger organisation and the established infrastructure that is established – this includes a dedicated ICT Team. Recent upgrade of central server. Participation in DA Task Group, which allows for risks to be highlighted and opportunities to be explored. Regular check ins with staff in order to monitor wellbeing and provide support where needed. Regular team meetings taking place virtually are helping to maintain 'team spirit' and encourage peer support. Recovery Plan			AMBER	GREEN		

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Page 45	Giow Domestic Abuse Refuge Provision		Business Continuity and Contingency Plan in place as well as COVID specific risk register. Steleton staff based in ettinge. Some staff from elsewhere within Glow have been redeployed to refuge in order to maintain 24/17 staff presence. Provision of additional right / weekend staff, in order to replace those who are having to isolate due to underlying health conditions is proving costly to the charity. Amended house rules' in order to encourage social distancing and so ensure safely of residents and staff. DVA support is being delivered by telephone where possible in order to maintain social distancing. Staff working from home with remote access to systems including contral case management system supported with PPE and extra cleaning materials. Agreement in place with commissioners / funders regarding amended service delivery. Chilterne group work has ceased however families with children continue to be supported and participation with child protection measures continue. Text service launched 25/04/20 to encourage customers isolating with perpetrator to reach out. Specialist adults and children's team operating this. Liaison with partner agencies e.g. MH Services, Social Care in order to ensure alimenter channels of communication are in place and remain open Recovery Plan	to be a barrier to people seeking support. Service operating with limited staff resource due to sickness / childcare responsibilities / those with underlying health issues not being present in refuge. Remole working is reliant on individuals' internet / WIFI connectivity and has also caused extra budre no regarations's server. Extra financial burden on the charity may threaten future financial feasibility of services. Reduced move on from refuge is affecting throughput and impacting number of available refuge spaces for new people requiring safe accommodation. Difficulty enforcing social distancing measures amongst some customer groups. Increased feelings of anxiety and isolation amongst customers. National demand for PPE and cleaning materials have created delays in supply. Recovery Plan	Untracet staff staff from siter or parent organisation could be redeployed into refuge if required. Potential pool of volumeters available from Oft and county Councils Access to employment agency that can provide specialist DVA staff if required. Regular check ins with staff in order to monitor wellbeing and provide support where needed. Regular team meetings taking place virtually are helping to maintain team spriff and encourage per support. Seeking opportunities for funding to enhance current and future service offer and <i>I</i> or to recoup additional costs of naming the service during lockdown. Giow benefits from being part of a larger organisation and the established infrastructure that is established – this includes a dedicated ICT Team. Recent upgrade of central server. Participation in DA Task Group, which allows for risks to be highlighted and opportunities to be explored. Experineod staff are being further supported to be able manage customers' anxieties and <i>I</i> or non-compliance with social distancing measures. Staff have access to Routes to Support so are able to assist customers' in welding have a vacancy ourselves. Comms plan in place to ensure that promotion of the service occurs as widely as possible and to increase fundiasing opportunities. Plan is continually reviewed to ensure relevance. Recovery Plan			AMBER	GREEN	
92 Domesic Abuse	Pathugi Domestic Abuse Victim Services		Business Continuity and Contingency Plan in place. Funders all communicated with and agreed changes in working structures implemented. Additional funding to aid capacity and service delivering being applied for. 24hr helpline, helpline email, social media and live chat (launched 28/04) all operating for an open access referral system to all avorkice areas, or for emotionalipractical one off support. All services are still open for referrals apart from group work. All staff now working from home remolely, using laptops and mobile phones. All staff new working from home remolely, using laptops and mobile phones. All staff new working from home remolely, using laptops and mobile phones. All staff new working from home remolely, using laptops and mobile phones. All staff new working from home remolely, using laptops and mobile phones. All staff new working from home remolely, using laptops and mobile phones. All staff new working from home remolely, using laptops and mobile phones. All staff new working from home remolely and the can return to normal working conditions. Everyone on a group is now receiving a weekly phone call to check in with them and manage risk. Additional support packs being produced around ongoing, frequently mentioned concerns such as mental health and historic abuse. Telephone based support sessions being offered to al adult service users as appropriate, this includes updating risk assessments and safety planning. All service users. Liaked in with a specialist organisation that has an online educational and support group for parents being abused by children, to access their facilities for appropriate service users. Liaked with the BACP to move our counselling programme to remote support through Stype and phone calls, so that counselling can continue and new cases can be taken on. Children's Coordinator is continuing to work with all CYP who are in a position, or safe to engage. Support is ato being offered to the parent where appropriate. We hewe moved a arepate	Inability to meet anticipated increased demand. Demand outshipping staffing levels. Refuge provision / move on safe accommodation unavailable. Potential reduction in the levels of reports of domestic abuse to the helpline, while abuse is likely to be on the rise.	Weakly calls in with staff to nonitor mental and physical health. Additional provisions put in for mental health concerns, including staff counselling and staff external healthe. Established counselling and staff external healthe. Planning already in place around how we facilitate increase in demands. Conversation initiated with funders about increases in demand. New funding applications going in weakly around securing services and dealing with demand. Peer mentors and volunteer team in place to add in additional support to staff teams. Availability through Routes to Support, sourcing placements in other areas of the country. Working with locat automities around a we can, this includes opening up social media to support conversations, opining of live chait facility, using social media to pomote communication options and DA education. Open communication between providers. Weakly DA Task Group conference call All staff working externally have been given secure access to the data and case management system. Recovery Plan			AMBER	GREEN	

Ref	Sub Groups required by	s Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in deman? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	service currently effectively mitigating the risk?)	Checked by SSSCP
93	Domestic		Pathway Domestic Abuse Refuge Provision	Pathway	Business continuity and confingency plan in place, revised after temporary dosume Tranworth Refuge (so Insi) operating as normal, reduced staffing levels to maintain social distancing in the small main office. Lichfield Refuge (4 unsis) operating as normal, currently on till staffing, with provisions in place to move to skeleton staffing, voluntieer staffing, contingency staffing Utwine required. Chikfere services fully operating emotional/practical support and chikferer services fully operating emotional/practical support and chikferer services fully operating emotional/practical support and chikferer services fully operating emotional/practical support and thickaevide/utadational support. High-relevant Service School Alexes Full package of emotional and practical support in place for all service users. Additional support tip in place for anxieties caused by COVID 19. New referrats being accepted in large vacancies through the helpline facility. Counselling being offered online or by phone. Recovery Plan	High levis of sickness within refuge, also preventing safe training of agency staff, leading to closure of provision. Issues around redeployment of staff from other areas. Lack of skilled volunteers to be able to oversee refuge requirements. Levels of support available due to social distancing New resident entering with COVID 19 symptoms. No capacity to support due to full room speces. Mantal health impact on staff due to being front line workers in a pandemic. Recovery Plan	Plans in place to manage on skeleton staffing, vidualneer staffing, additional contingency staffing. Focus on prevention - Office spaces ammedde to allow for social distancing. PPE experiment provided to reduce chances of illness. Government guidelines implemented across reluges. General regulations sound deanlines, communal areas and hawashing reinforced across the refuges. No nights out to atternative accommodationfamily allowed. All funders lialaed with. Programme of staff who can support in refuge developed. Working with County to access available volunteers from re-deployed staff that can help support refuge staffing. Looking aith County to access available volunteers from re-deployed staff that can help support refuge staffing. Looking aith county to access available volunteers from re-deployed staff that can help support refuge staffing. Looking aith counts as support offered as long as veryone is symptom free. Health checks being performed alongside risk assessments. Helpfun resourcing any available space elsewhere in the country to try and ensure everyone needing refuge is rehoused. Staff counselling support in place, external employee helpline in place. Recovery Plan			AMBER	GREEN	
94	Page 46	5	Staffordshire Womens Aid Domestic Abuse Victim Services	Staffordshire Women's Aid	Business Contingency Plan in place, and regularly reviewed as situation develops Support Services Staff are working from home delivering support by telephone, messaging and viele. Staff team remobilised so that 24 Hour Help Line is covered from home. Al Serior Manages and admin working from home. Food bank reduced, and community support drawn upon. Group Work not being delivered, but regular calls to participants in place. Recovery Plan	Reduction in available volunteers for 24 Hour Help Line risks reduction in our availability locally Staff sickness means that community outreach services cannot be delivered. Potential service users and public are unaware of our availability Increase in demand for refuge accommodation on Help Line, alongside less availability. Lack of preparedness for when social distancing begins to lift, and potential surge in demand. Lack of capacity to delivery contract requirements, particularly spot purchased. Recovery Plan	All community outreach services are operational apart from Group Work Mobile system implemented so that Help Line is being delivered from home working staff. Home working remotely implemented. Strong local presence via social media and updates on website. Work alongaide partners to publicise pan Staffordshire availability. Working with local partners, and national sector network to seek alternative solutions. Working with potential funders, stakeholders an escor network to develop appropriate responses such as increased methal bits sport, advoid with henefits, confidence building, parenting and children's support. In discussions with funders and contractors. Seeking potential LA and government support. Recovery Plan			RED	AMBER	
95	Domestic Abuse	2 9	Staffordshire Womens Aid Refuge Provision	Staffordshire Women's Aid	Business Contingency Plan in place, and regularly updated as situation develops. Staff team mobilesd so that refuge cover is prioritised in case of staff absence. Social distancing an thygiene regimes in place at refuge. Any visiting restricted to mimirum and where necessary. Staff and residence movided with mutuic undates on onverment and NHS	Unanticipated costs and demand impact on financial capacity. Recovery Plan	Risks mitigated well to date, mainly through remobilisation of staff feam. Refuge continuing to operate at capacity. Libran social media as fundraising tool.			RED	AMBER	
96	Domestic Abuse	C 9	Cannock Safe Accommodation	Cannock Chase District Council and Housing Providers	Can access B&B accommodation. Lettings for domestic abuse prioritised. Recovery Plan	Limited accommodation and competing pressures from different groups.	Turnover of stock will start to increase as lockdown ends. Major hotel chains likely to reopen. National accommodation helpline available to source emergency accommodation. Recovery Plan			AMBER	GREEN	
97	Domestic Abuse	9	Cannock Sanctuary Scheme	Theam Security	Provision of sanctuary support through commissioned service provision Recovery Plan	Lack of commissioned Sanchary support until 11/5/20 due to Theam ceasing operations and their suppliers closing as a result of lockdown. Recovery Plan	Mitigation had been in place, buil if referral came in now the case can be progressed so it is ready for when Theam are operating from Monday 11/5/20.			AMBER	GREEN	
98	Domestic Abuse		East Staffs Safe Accommodation	East Staffs District Council with Various Housing Providers	Available units of emergency accommodation, domestic abuse a priority for lettings Recovery Plan	Competing pressures from different groups for limited accommodation.	Turnover of stock will start to increase as lockdown ends. Major hotel chains likely to reopen on lockdown lifting which will increase supply of emergency accommodation. As a last resort, national accommodation helpline, however lack of clarity relating to other cohorts in same accommodation and, if out of the area concern about support provision. Recovery Plan			AMBER	GREEN	

Re	f: Sub Gro required 9 Dome	by	Service:	Provider: Theam Security	increases in demand?	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce? Will monitor any referrals made.	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help No mitigation required at present.	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service Status (i.e. is the service currently effectively mitigating the risk?) GREEN	Date (Checked by SSSCP
	Ab	358 	Sanctuary Scheme		No demand for service since 2019. Recovery Plan	Recovery Plan	Racovery Plan						
10	Ab		Lichfield Safe Accommodation	with Housing Providers	Capacity for the accommodation of referrais but need to continue to be vigilant to ensure that accommodation is suitable both in terms of location and other occupants. We are working with Pathway to accommodate those Beeing DA in refuges, as the most suitable temporary accommodation. We have made all coupants of temporary accommodation a priority for move on and have encouraged RP's to work with us on direct matches, rather than advertising properties. Recovery Plan	Challenge to find suitable accommodation for large families quickly Competing pressures from different groups for limited accommodation. When courts reopen for possession hearings, backlog of cases will require rehousing Recovery Plan	Turnover of stock will start to increase as lockdown ends. Major hotel chains likely to reopen on lockdown lifting which will increase supply of emergency accommodation. As a last resort, national accommodation helpline, however lack of clarity relating to other cohorts in same accommodation and, if out of the area concern about support provision. Recovery Plan			AMBER	GREEN		
10		stic Jse	Lichfield Sanctuary Scheme	Theam Security	Delivery restarting 11.05.20	Progress with restart will be monitored	No mitigation required			GREEN	GREEN		
10		stic Ise	Newcastle Safe Accommodation		Recovery Plan We have some temporary accommodation provision within the Borough for families and we conflue to monitor orgoing demand. Many local hotels that we usually access in an emergency have shut up shop, so this is further limiting our options, we have been exploring working with other LAs to join forces and procure bet speces in advance but we've not had any success with this to date. We're also concerned about the capacity of available support to those in temporary accommodation Recovery Plan	Competing demands for limited supply of permanent accommodation.	Recovery Plan Turnove of stock will start to increase as lockdown ends. Major hotel chains likely to reopen on lockdown lifting which will increase supply of emergency accommodation. Government accommodation sourcing helpline available. Recovery Plan			AMBER	GREEN		
10	3 Dome Ab		Stafford Safe Accommodation	Stafford Borough Council and Housing Providers	Currently one unit of emergency accommodation evailable, sufficient B&B accommodation, limited move on accommodation due to emergency lettings only in the social sector however, domestic abuse is prioritised. Limited turnover in private rented sector Recovery Plan	Chalenge to find suitable accommodation for large families quickly Competing pressures from different groups for accommodation, backlog of demand from existing homeless applications, increase in relationship breakdown and new instruction to ensure no rough speepers are returned to the street. When courts reopen for possession hearings backlog of cases will require rehousing. Recovery Plan	Work with SWA to enable move on from the refuge to free up space. Monitor B&B capacity with option to purchase space if demand is identified. Turnover of stock will start to increase as lockdown ends. Major hotel chains likely to reopen on lockdown lifting which will increase supply of emergency accommodation. As a last resort, national accommodation helpline, however lack of clarity relating to other cohorts in same accommodation and, if out of the area concern about support provision. Recovery Plan			AMBER	GREEN		
10	4 Dome Ab		Stafford Sanctuary Scheme	Theam Security	Provision of sanctuary support through commissioned service provision Recovery Plan	Theam reopening on 11/5/20, need to monitor delivery to ensure no blockages as work restarts. Recovery Plan	If there are blockages to the restarting of Sanctuary, need to see if urgent works can be fast-tracked through Theam or if necessary an alternative provider. Recovery Plan			GREEN	GREEN		
10	Ab	150	Safe Accommodation	Staffordshire Moorlands District Council and Housing Providers	sanctuary adapted house). Under Alliance with High Peak Borough Council there it may be possible consider use of High Peak owned stock. During Covid 19 worked with servard different B&B providers, one Leek based provider can support vulnerable domatic abuse cases, as opposed to for instance other B&B providers assisting with the 'everybody in' rough sleeper initiative. Recovery Plan	Chalenge of finding accommodation for larger families, impacts on move on from refuge. Competing pressures from different groups for accommodation, backlog of demand from existing homeless applications, increase in relationship breakdown and new instruction to ensure no rough sheepers are netwared or the street. When courts reopen for possession hearings backlog of cases will require rehousing. Recovery Plan	Possible option for authorities to explore is the commissioning of hotel/ B&B. This has recently been undertaken by Dertyshire District/ Boroughs (excluding Derty City & HPPC). This is facilitated by 50% funding contribution from Dertyshire County Council. utilising Covid 19 local authority funding. Press & public website appeal to property owners in private sector for self contained properties. Commissioned providers, Adulam & Call Before You Serve, also reached out to private sector contacts. Discussions with Registered Providers underway to understand position and opportunity. Recovery Plan				GREEN		
10	6 Dome Ab		Staffs Moorlands Sactury Scheme		Recovery Plan	Recovery Plan	Recovery Plan			N/A	N/A		

Ref:	Sub Groups required by	Completed by	Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service I Status (I.e. is the I service currently effectively mitigating the risk?)	late C Ipdated S	Checked by SSSCP
107	Domestic Abuse		Stoke-on-Trent City Safe Accommodation	Stoke-on-Trent City Council	Services are operating normally at present and include Stoke-on-Tenn City Courd commissions the value House – Relevance service providing support in community settings where refuge is not suitable and up to 10 units in community based accommodation and Nousing Advocate working in each of the 3 North Staffs Housing Options teams to support security accommodation. Hotel accommodation has been secured for victime/families to support additional emergency accommodation and Covid-19 Move-on options to be considered on a case by case basis and SOTCCC to commence lettings in line with Covid-19 recommendations Recovery Plan	Lack of move on options for Refuge residents to allow throughput	Some backfilling from other service areas to ensure capacity remains enabled to continue service delivery Recovery Plan			GREEN	GREEN		
108	Domestic Abuse		Stoke-on-Trent Target Hardening Scherne		Recovery Plan	No target hardening activity may cause an increase in homeless presentations if wicimsTamlies are not able to remain safely in community accommodation to prevent the need for move Staff sickness for HIA (Honeycomb Group) Recovery Plan	No report of reduced activity for the service delivered by Revival Home Improvement Agency Recovery Plan			GREEN	GREEN		
109	Domestic Abuse			South Staffs District Council and Housing Providers	Four units of temporary accommodation available and B&B accommodation can be sourced. Limited move on accommodation due to emergency lettings only in the social sech theorem, formestic abuse is prioritised. Limited turnover in private rented sector.	Competing pressures from different groups for accommodation, new instruction to ensure no rough sleepers are returned to the street. When courts reopen for possession hearings backlog of cases will require rehousing.	Turnover of stock will start to increase as lockdown ends. Major hotel chains likely to reopen on lockdown lifting which will increase supply of emergency accommodation. As a last resort, national accommodation helpline, however lack of clarity relating to other cohorts in same accommodation and, if out of the area concern about support provision. Recovery Plan			AMBER	GREEN		
110	Abuse		South Staffs Sanctuary Scheme	Theam Security	Theam restarting works 11.05.20, two referrals passed through. Recovery Plan	Monitoring referrals to ensure scheme fully functional. Recovery Plan	No mitigation required at present. Recovery Plan			GREEN	GREEN		
	10 ^e Abuse 48		Tamworth Safe Accommodation	Tamworth Borough Council	Some movement from B&B into PSL/TBC temporary accommodation. Currently have the following available - 2 double rooms. We currently have 20 units in use within our com stock and PSL. And if needed can look to pull extra for this purpose. Obviously availability can change on a day to day basis. Target hardening carried out if it means a family can remain in their property for at least 6 months to prevent homelessness. Recovery Plan	Competing pressures from different groups for accommodation. When courts reopen for possession hearings backlog of cases will require enhousing. Recovery Plan	Turnover of stock will start to increase as lockdown ends. Major hotel chains likely to reopen on lockdown lifting which will increase supply of emergency accommodation. National accommodation helpline available to assist accommodation search. Recovery Plan			AMBER	GREEN		
112	Domestic Abuse		TecSOS Safety Devices	TecSOSIVodaphone	Business Continuity Plan in place and implemented. Funding commitment by Commissioner provided. System operating as normal, no issues identified. Weekly update to SCO by Provider. Police regularly reviewing allocation of 130 available handsets, currently circa 60% allocated. 40% smallable for use SCO secured commitment of additional available PSDs from provider. Recovery Plan	7 day delay in securing additional handsets. Lack of further additional supply of handsets Reduced ability for victims to contact for help / assistance Increase in vulnerability / sevenity of issues Recovery Plan	PCC has funded and ordered an additional 20 units to be with the Force in next few days and available for distribution Recovery Plan			AMBER	GREEN		
113		Staffordshire County Council	Education	Various	Recovery Plan	Recovery Plan	Attendance Returns Total of schools submitting the weekly ones we are asking for is; 89%. Total schools submitting the DFE one; 98% (ever submitted) 62% submitted today Recovery Plan			N/A	N/A		
114		Stoke City Council		Various	Recovery Plan	Recovery Plan	Recovery Plan			N/A	N/A		
115	Drug/alcohol	Staffordshire County Council	Public Health	CDAS and STARS	Recovery Plan	Staff exposure to COVID Recovery Plan	Limited access to clients/ other staff Recovery Plan			N/A	N/A	01/06/20	

Ref: Sub Groups required by	Completed by Service:	Provider:	Service Update (Overview): Please take into consideration as part of your recovery are you planning for increases in demand? If yes what increases are you planning for? E.g. 10%	Potential Risks (Overview) Are there any aspects of service you will have to stop or reduce to help you mitigate these risks or met additional demand? If Yes what will stop or reduce?	Mitigations (Overview): Provide a summary of initiatives already in place to support families pre any formal Early Help	How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service I Status (I.e. is the I service currently effectively mitigating the risk?)	Date Checked by Jpdated SSSCP
116 Drug/alcohol	Staffordshire County Public Health Council	CDAS and STARS	"Very similar changes made in the city and county Service starting to prepare for lock down easing and building being used more often	Client exposure to COVID	Limited access to building and relaxed access to phamacies			N/A	N/A	01/06/20
			Primarily phone-based services - limited face-to-face Key change is liberalised supply of medications	Recovery Plan	Recovery Plan					
117 Drug/alcohol	Staffordshire County Public Health Council	CDAS and STARS	Service scope limited - mainly safe and well Residential unit remain open but reduced access"	Reduced staff available	Reduced service delivery model			N/A	N/A	01/06/20
			Recovery Plan	Recovery Plan	Recovery Plan					
118 Drug/alcohol	Staffordshire County Public Health Council	CDAS and STARS		Reduced effectiveness of service	Focus changes to safe and well in short term			N/A	N/A	01/06/20
				Recovery Plan	Recovery Plan			N/A	N/A	01/06/20
119 Drug/alconol	Staffordshire County Public Health Council	CDAS and STARS		Increased client problems	Safe and well checks			N/A	N/A	01/06/20
100 0 (1)	0	CDAS and STARS	-	Recovery Plan	Recovery Plan			N/A	N/Δ	01/06/20
120 Drug/alconol	Staffordshire County Public Health Council	CDAS and STARS		Leakage of medications	Risk assessments/ storage boxes, client contact			N/A	N/A	01/06/20
101 Drus/slashal	Oleffendebin Osunti Dublin Unellb	CDAS and STARS	4	Recovery Plan	Recovery Plan			N/A	N/A	01/06/20
121 Urug/aicohol	Staffordshire County Public Health Council	GUAS and STARS		Surge in referrals	New staff in County - City only not County			n/A	n/A	01/06/20
101 Development	Staffordshire County Public Health	CDAS and STARS	4	Recovery Plan Child safegaurding increases	Recovery Plan Service being adapted to balance risks			N/A	N/A	01/06/20
	Council	CDAS and STARS						N/A	N/A	01/06/20
	Staffordshire County Public Health	CDAS and STARS	-	Recovery Plan Adult safegaurding increases	Recovery Plan Service being adapted to balance risks			N/A	N/A	01/06/20
l	Council	COAG and GTARG		Recovery Plan	Recovery Plan					01100/20
124 Dag/alcohol	Staffordshire County Public Health	CDAS and STARS	4	Recovery Plan Restricted access to mental and physical health services	Staff trying but this leads to futher pressures on services			N/A	N/A	01/06/20
	Council	CDAS and STARS		Recovery Plan	Recovery Plan			N/A	N/A	01/00/20
125 Oralephol	Staffordshire County Public Health	CDAS and STARS	4	Changing patterns of use - e.g. MD	Service prepared forMonkey Dust/ multi-agency group etc			N/A	N/A	01/06/20
120 Drugiulionol	Council									01/00/20
126 Drug/alcohol	Staffordshire County Public Health	CDAS and STARS	4	Recovery Plan Ongoing IT problems - STARS only	Recovery Plan Work-arounds in place and BT scheduled			N/A	N/A	01/06/20
	Council			Recovery Plan	Recovery Plan					
127 Drug/alcohol	Staffordshire County Public Health	CDAS and STARS	Recovery Plan	Potential cost savings - CDAS only	No details confirmed			N/A	N/A	01/06/20
	Council			Recovery Plan	Recovery Plan					
128 SSSCP	Staffordshire Councy Council	CAFCASS	the Court. Recovery Plan In terms of new work coming through to the service, this has decreased as the Courts are not currently progressing private law work however this will be sitting with the Court and there will be a surge in our demand when this starts to move through the process and Section 7 reports are required. In respect of public law work, wa an wave that there are a number of aplications to be made by both LA's that the	applications to be made by both LA's that the Court have encouraged team to delay making at this time, therefore there will be a surge in our demand for Guardian's to be allocated to these upon issue. We have a significant amount of cases sat within our teams awaiting hearings that we are unable to progress or potentially close at this time therefore caseloads are growing as throughput has decreased significantly. Recovery Plan We work to allocate all work the day that it is received. The worst case scenario is that we have to extend the timescales that we would normally work to.	Currently amber but rise to red once court lists private cases again and predicted are proceedings increase from			AMBER	AMBER	19/06/20

Ref:	Sub Groups required by		Provider:	Please take into consideration as part of your recovery are you planning for increases in demand?	Potential Risks (Overview): Are there any aspects of service you will have to stop or reduce to help you miligate these risks or met additional demand? If Yes what will stop or reduce?		How will you maintain staff wellbeing	How will you maintain service user wellbeing	Impact (RAG):	Current Service I Status (I.e. is the service currently effectively mitigating the risk?)	Date Jpdated	Checked by SSSCP
129	Page 50	CCGs CCGs	NHS111 & OOHs	Leads/ Clinical risk meeting. Section on safeguarding included • Meetings were by zoom Some staff were furloughed/ some self-isolating		Hof Hick continues Hof Hick continues Hill 247 Oueues in 111 started to return to more of a normal during May, however the last 2 weeks has seen an increase again OPS have commenced video conferencing Conflutation of staff training. OPS sortinue to do more telephone trage and video conferencing Heetings will remain via zoom and Microsoft Teams Safeguarding referrals have returned eleximing Some furtional Advisors working from home to aid with social distancing and seating capacity to ensure an effective service Some furtioughed staff returning to work Recovery Plan			GREEN	GREEN		



WORK PROGRAMME Safe and Strong Communities Select Committee 2020/21

This document sets out the work programme for the Safe and Strong Communities Select Committee for 2020/21. The Safe and Strong Communities Select Committee is responsible for scrutinising: children and adults' safeguarding; community safety and Localism. The Council has three priority outcomes. This Committee is aligned to the outcome: The people of Staffordshire will feel safer, happier and more supported in and by their community.

We review our work programme at every meeting. Sometimes we change it - if something comes up during the year that we think we should investigate as a priority. Our work results in recommendations for the County Council and other organisations about how what they do can be improved, for the benefit of the people and communities of Staffordshire.

Councillor John Francis

Chairman of the Safe and Strong Communities Select Committee If you would like to know more about our work programme, please get in touch with Mandy Pattinson, Scrutiny and Support Manager on 01785 278502 or by emailing <u>mandy.pattinson@staffordshire.gov.uk</u>

Membership – County Councillors 2020-21	Calendar of Committee Meetings - 2020-2021	
John Francis (Chairman) Bob Spencer (Vice Chairman) Ann Beech Ron Clarke Ann Edgeller Trevor Johnson Bryan Jones Jason Jones Paul Snape Mike Worthington	28 May 2020 at 10.00 am cancelled due to Covid 197 July 2020 at 10.00 am virtual meeting held on Teams1 September 2020 at 10.00 am5 November 2020 at 10.00 am11 January 2021 at 10.00 am1 March 2021 at 10.00 am22 April 2021 at 10.00 amMeetings usually take place in the Oak Room in County Buildings.	

		Work Programme 20	20-21
Date of meeting	ltem	Details	Action/Outcome
28 May 2020 10.00 am	Progress with the Children's Services Improvement Plan Cabinet Member: Mark Sutton Lead Officer: Helen Riley	Requested at their 28 May meeting – Members wish to see progress made with the Plan following their consideration at the May meeting.	Meeting cancelled due to Covid 19
	Domestic Abuse Cabinet Member: Gill Heath Lead Officer: Trish Caldwell	At their meeting of 1 October 2019 Members requested a six-monthly update on progress made with the newly commissioned New Era services Note that following the 7 November Triangulation meeting the Cabinet Member requested that this be considered in light of the new DA Act. The report needs to focus on the effectiveness of the new contract and the current shortfall in funding	Briefing notes were requested after the 7 July meeting to update members on these items and help prioritise future work programme planning.
Page 52	Catch 22 Cabinet Member: Mark Sutton Lead Officer:	Having met with members of the Catch 22 team the Vice Chairman and Members updated the select Committee on their work at their 1 October meeting. Members requested an update from Catch 22 in six month time	
7 July 2020 10.00 am Virtual Teams Meeting	Update on Children's Transformation	The Select Committee to receive an update on Children's Transformation in light of the impact of Covid 19 and the County Council's response to this.	The Children and Families Services approach and response to Covid- 19 was endorsed and Members congratulated officers on their understanding of the impact and risks associated with the Covid-19 and responding to these. Members also asked for a letter of thanks be sent to Catch22 for their continued professionalism and commitment throughout the crisis.
1 Sept 2020 10.00am Virtual Teams Meeting	Staffordshire & Stoke- on-Trent Safeguarding Children's Board – response to Covid-19 Cabinet Member: Mark Sutton Lead Officer: Helen Riley	Following the 7 July Select Committee Members requested another opportunity to consider the response to Covid-19 by the Staffordshire & Stoke-on-Trent Safeguarding Children's Board in more detail.	
5 Nov 2020 10.00am	Customer Feedback and Complaints Annual Report 2019-20 – Adults	Reports brought annually.	

	Social Care		
	Cabinet Member: Alan		
	White		
	Officer: Kate Bullivant		
	Customer Feedback and	Reports brought annually.	
	Complaints Annual		
	Report 2019-20 –		
	Children's Social Care		
	Cabinet Member: Mark		
	Sutton Officer: Kate Bullivant		
tbc		At the 7 Nevember Triangulation meeting it was	
lbc	Safeguarding Adults	At the 7 November Triangulation meeting it was	
	on the cusp of care	proposed to look at any gaps in provision	
	Cabinet Member:	between what is happening in the community for	
	Johnny McMahon	adults on the cusp of care, the neighbourhood	
	Lead Officer: Jo	coaches/provisions and any safeguarding	
	Sutherland	issues this may present.	
tbc	Regional Permanency	Following consideration of the arrangements at	
6 monthly update	Partnership	their 7 November Select Committee Members	
To om 7 November	Cabinet Member: Mark	had requested an up-date on progress with the	
Cheeting	Sutton	arrangements in six months' time.	
May/June 2020)	Lead Officer: Deborah		
Сī	Ramsdale & Jo Sullivan		
<u>ე</u> ფი	Contextual	Following the introduction of the Contextual	
	Safeguarding Review	Safeguarding approach a review at the end of its	
	Cabinet Member: Mark	first year will consider progress made and the	
	Sutton	Select Committee will consider the results of this	
	Lead Officers: Vonni	review.	
	Gordon		
	Hazel Williamson		

Standing Items 2020-21					
Item	Details	Action/Outcome			
Themes emerging from Serious Case Reviews Cabinet Member: Mark Sutton Lead Officer:	Where Serious Case Reviews have taken place the Select Committee will consider any learning that can be taken from the Review	Some areas picked up by the DHR review process			
MTFS Reforms and assessing the "no impact claims"	Suggested at the 29 May Triangulation meeting. To scrutinise those areas of the MTFS that promise "no impact" from the changes made to assess if this was accurate and/or whether the identified mitigating action has been effective. This is routinely scrutinised by Corporate Review,				

approp	iate Select Committee for further scrutiny as	
and wh	en necessary.	

Dete	lt e un	Briefing Notes/Updates/Visits 2020	
Date	Item	Details	Action/Outcome
	Progress with the	Requested at their 28 May meeting – Members	
	Children's Services	wish to see progress made with the Plan following	
	Improvement Plan	their consideration at the May meeting.	
		One of the items from the cancelled meeting due to	
		the pandemic	
	Domestic Abuse	At their meeting of 1 October 2019 Members	
		requested a six-monthly update on progress made	
		with the newly commissioned New Era services	
		Note that following the 7 November Triangulation	
		meeting the Cabinet Member requested that this be	
		considered in light of the new DA Act.	
		The report needs to focus on the effectiveness of	
Ū		the new contract and the current shortfall in funding.	
		One of the items from the cancelled meeting due to	
		the pandemic	
ך ג	Catch 22	Having met with members of the Catch 22 team the	
		Vice Chairman and Members updated the select	
		Committee on their work at their 1 October meeting.	
		Members requested an update from Catch 22 in six	
		month time.	
		One of the items from the cancelled meeting due to	
		the pandemic	
	Lockdown Police raids	During the lockdown period there had been	
	re. County Lines	successful raids by the Police in respect of	
		organised crime and county lines. At their 7 July	
		meeting the Chairman requested a briefing paper	
		outlining the impact of this in Staffordshire on	
		county lines and safeguarding.	

Working Group and/or Inquiry Days 2020-21					
Date	Item	Details	Action/Outcome		

January 2021	Transition & Preparation for Adulthood Cabinet Member: Mark Sutton Lead Officer: Deborah Ramsdale Children & Families	At their 22 January 2019 meeting Members requested this issue be included on their work programme – with consideration to be given to whether this should be considered by a working group. In particular they wanted to look at the transition between children's and adult services, the gaps, those that remained vulnerable but under the Care Act did not meet the criteria to receive adult services and how to prepare individual's to be resilient and prepare for as independent an adulthood as possible.	 clinics. TSU have undertaken a piece of work in this area. A Peer Review on Adults is due in October 2019. Proposed to stall working on this until post the Peer Review. A protocol has now been agreed and will be implemented in November 2019. Following their meeting of 13 January, the Select Committee agreed to postpone a decision on establishing this working group to allow the protocol, which went live in November 2019, to bed in. A report will be brought to the Select Committee in 12 months' time (January 2021) to evaluate progress made and Members can consider whether there remains a need for a working group at that point.
Page 55	Transformation System progress Cabinet Member: Mark Sutton Lead Officer: Janene Cox/Helen Riley	Transformation programme on a monthly (or as appropriate) basis.	At their 13 January 2020 meeting Members agreed that the Chairman (and/or Vice Chairman or Shadow Vice Chairman) will attend the monthly Children's Improvement Board and report back to the Select Committee rather than duplicating work already underway by establishing a separate working group. Consequently, an oral report will be given by the Chairman (and/or Vice Chairman or Shadow Vice Chairman) to the Select Committee reporting on progress.
March 2019 -	SEND Working Group Cabinet Member: Mark Sutton Lead Officer: Tim Moss	Following the joint Ofsted and Written Statement of Action (WSoA) a joint working group was established with Members from the Prosperous Staffordshire, Healthy Staffordshire and Safe and Strong Communities Select Committees to look at progress in implementing the WSoA.	
	Children's Improvement Board informal briefing Cabinet Member: Mark Sutton Lead Officer: Helen Riley	At the 7 July Select Committee the Chairman requested an informal briefing for all Members to update them on the work of the Children's Improvement Board.	

Children's Improvement Board – monitoring of the Children & Families Transformation System progress				
Date	Who attended from the Select Committee	Items discussed	Information	
30 January, 25 February, 29 June 2020	Cllr Francis	 Focus area for discussion Tribunals and the cost implications of SCC conceding/losing at tribunal 	To be reported at the meeting. At the 7 July Committee meeting members asked for an informal workshop to discuss the improvement plan in detail.	

Progress overview Performance – EHCP data	
3. Emergent risks	
4. Forward plan	