

Safe and Strong Communities Select Committee

Thursday, 13 July 2017

10.00 am

Oak Room, County Buildings, Stafford

John Tradewell
Director of Strategy, Governance and Change
5 July 2017

A G E N D A

1. **Apologies**
 2. **Declarations of Interest**
 3. **Minutes of the Safe & Strong Communities Select Committee meeting held on 13 June 2017** (Pages 1 - 4)
 4. **Children's and Families System Transformation** (Pages 5 - 84)
Report of the Cabinet Member for Children and Young People
 5. **Children, Young People and Families Pilots** (Pages 85 - 114)
Report of the Cabinet Member for Children and Young People
 6. **Public Analyst and Scientific Services Laboratory** (Pages 115 - 120)
Report of the Cabinet Member for Communities
 7. **Work Programme** (Pages 121 - 126)
 8. **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) nil

Committee Membership

John Francis (Chairman)
Syed Hussain
Trevor Johnson
Jason Jones
Natasha Pullen

Kyle Robinson
Paul Snape
Conor Wileman (Vice-Chairman)
Victoria Wilson
Mike Worthington

Note for Members of the Press and Public

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Scrutiny and Support Manager: Tina Gould Tel: (01785) 276148

**Minutes of the Safe and Strong Communities Select Committee Meeting held on
13 June 2017**

Present: John Francis (Chairman)

Attendance

Syed Hussain	Paul Snape
Trevor Johnson	Conor Wileman (Vice-Chairman)
Jason Jones	Victoria Wilson
Natasha Pullen	Mike Worthington
Kyle Robinson	

Also in attendance: Mark Sutton

PART ONE

1. Declarations of Interest

There were none at this meeting.

2. Minutes of the Safe & Strong Communities Select Committee held on 6 March 2017

RESOLVED – That the minutes of the Safe and Strong Communities Select Committee held on 6 March 2017 be confirmed and signed by the Chairman.

3. Introduction to the Safe and Strong Communities Select Committee

The Select Committee received a presentation by the Deputy Chief Executive and Director for Families and Communities which outlined the areas for scrutiny across the Select Committee's remit. Members were reminded that select committees were themed around County Council outcomes and therefore didn't sit exactly within the work of one directorate. However a large proportion of the work of this Select Committee was within the Families and Communities Directorate and covered children's social care, children and families commissioning, community safety and regulatory services. The Select Committee's remit also covered safer roads partnership and adult safeguarding.

Members heard details of the work within children's social care, including:

- a 24 hour a day, 365 days a year emergency and out of hours service;
- the Multi Agency Safeguarding Hub (MASH) which brought together a range of partners from social care, health and the Police. The Staffordshire MASH was very highly regarded and it was suggested that Members may find a visit beneficial to understanding the type of work undertaken there;
- services across the continuum and the four tier levels of support around: early help (2776 families); children in need (4897cases); child protection (545 children); Looked After Children (994 children); and children with disability (492 children);

- the areas within the Looked After Children's Services, which included fostering, adoption, residential care, respite and kinship care and the role of both the Virtual School and the Corporate Parent;
- Looked After Children and the various targeted Preventative Services which included intensive prevention, family group conferencing, intensive prevention support services and the Breathing Space project; and
- Youth Offending Services (YOS) and the YOS Board. Staffordshire's YOS had recently been given 22 out of 24 stars for this service, which is believed to be the highest rating achieved so far nationally.

Members heard that within Children's Commissioning, work included child health and wellbeing 0-19 and the work of Children's Centres, Health Visitors and the School Nurse. Commissioning was also around:

- Early help intervention;
- Building Resilient Families and Communities (BRFC) (Staffordshire's version of the national Troubled Families programme);
- Child Sexual Exploitation (CSE) and Missing Service. Missing episodes could include children missing from home, school or care, with any episode explored to identify whether it was symptomatic of the individual being drawn into behaviours with serious safeguarding consequences;
- the Emotional Health and Wellbeing Framework;
- Sustain+, which offered mental health support for children and their families within the looked after system;
- Children and Adolescent Mental Health Services (CAMHS) pathways;
- Locality based commissioning which was pertinent to a specific area's need, such as BRFC;
- People Helping People through the Voluntary, Community & Social Enterprise (VCSE) contract; and
- Supporting the victims and perpetrators of domestic violence, where the aim was to increase the level of reporting whilst decreasing the level of repeat reported as a result of effective intervention.

Members noted that Children, Young People and Families Services were being significantly reshaped to ensure a sustainable set of future services. The proposed re-design was being considered by Cabinet at their meeting of 21 June, with the proposals coming to the July Select Committee meeting. Members had some concerns over decisions being made by Cabinet prior to the Select Committee scrutinising proposals. Whilst acknowledging that this was not ideal, it had been agreed with the Select Committee Chairman as due to the local elections, no timely Committee meetings had taken place. Members were also informed that this issue had previously been brought to the Select Committee as the reshaping processes developed and that there would still be an opportunity to comment and make recommendations on the developing services.

The Community Safety Agreement partnership priorities were informed by strategic assessment of risk and threat, based on intelligence, and these were shared with Members. Members also received details of Regulatory Services within the remit of the Committee, including the work of Trading Standards and the Public Analyst and Scientific Services.

There were a number of annual scrutiny items that were considered by the Select Committee and Members received details of these, including the Staffordshire Safeguarding Board Annual Reports for both children and adults.

The Staffordshire Safer Roads Partnership (SSRP) was another area of work for this Select Committee and Members received details of the strategic vision, objectives and partnership plans. Staffordshire continued to have some of the safest roads in the Country and were currently rated the second safest in the Country.

Mr Stuart James, Lead Officer for Safeguarding Adults, outlined the work of the Adult Safeguarding Team. In particular Members heard details of the West Midlands Peer Review which had taken place during January and February 2017. Members requested that a report on this review be included on their work programme.

Members noted that “localism” was an area of work for the Select Committee and asked for clarification as to what this work covered. Community capacity and the People Helping People approach was the way in which localism was now referred to and much of this work was considered by the Corporate Review Committee as it was a more strategic and cross cutting area of work.

Members raised concerns over the difficulties that could be faced in encouraging reporting of domestic violence or CSE amongst some communities where culture inhibited them from accessing this support. Hard to reach communities were acknowledged as a challenge, however Members were assured that those services were available to all and that awareness raising and education was key in challenging behaviours. It was important that communities were given confidence that this sort of behaviour was unacceptable and that reported incidents would be dealt with effectively. Evidence showed there was underreporting from some communities and work was needed to remove the internal inhibitors from some hard to reach communities. The issue of modern day slavery was also one where communities needed the reassurance that reported incidents would be appropriately addressed.

The Member for Burton Trent shared his concerns at the difficulties in reporting faced within some of the communities he represents. It was suggested that he may benefit from a visit to the Burton Social Work Team to see the breadth of work they do and specifically how they approach issues around hard to reach communities. The Vice Chairman requested that he be included in the visit.

The Select Committee thanked the Officers for a comprehensive presentation.

RESOLVED – That: a) the presentation be noted;
b) a link to the Staffordshire Children’s Safeguarding website be forwarded to Select Committee Members;
c) a visit to the MASH be organised for Select Committee Members;
d) a report on the Adult Safeguarding West Midlands Peer Review be included on the work programme;
e) that a visit be arranged to the Burton Social Work Team for the Member for Burton Trent and the Vice-Chairman.

4. Developing the Work Programme

The Scrutiny and Support Manager presented a report on work programme planning which set out the remit of the Select Committee, considered methods of scrutiny and looked at work previously considered by this committee.

Members requested the following be included on their work programme:

- the West Midlands Peer Review of Adult Safeguarding;
- how to engage with hard to reach communities;
- modern day slavery and domestic violence; and
- CSE.

Having given consideration to the information received at this meeting Members were asked to contact either the Chairman, Vice-Chairman or Scrutiny and Support Manager with any requests for items to be included on the work programme.

RESOLVED – That the items listed above be included on the work programme.

Chairman

Local Members' Interest
N/A

Safe and Strong Communities Select Committee – 13th July 2017

Children, Young People and Families System Transformation Progress

Recommendation

1. That the Committee scrutinise this Children, Young People and Families Transformation Programme update, which is the Cabinet Report of 21 June 2017 and outlines progress since December 2016.

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

Summary

What is the Select Committee being asked to do and why?

2. The Select Committee is asked to scrutinise the attached Cabinet Report of 21 June 2017 which outlines the progress of the programme since the previous update in December 2016, and describes the principles that underpin the Children's and Families' Transformation Programme and the proposed changes to the operating model and associated working practices. This is the earliest opportunity for the committee to consider the report due to the County Council election in May 2017.
3. Comments of the Select Committee will be reported to the Programme Management Group on 14 August 2017 and will inform the future planning, management and delivery of the next phase of the programme.
4. An additional report on the progress of the pilots which are part of the children and families system transformation and are informing the rest of the transformation is also being considered by this Select Committee in July 2017.

Report

Background

5. The Children's and Families System Transformation Programme continues to address the challenges identified within the children's social care system and the broader children's system. The papers to this Select Committee in June, July and December 2016, and January 2017 highlighted that a new way of working had been developed with partners, which recognises the importance of system

leadership, commissioning in partnership and empowering communities and families to help each other and themselves.

6. The recommendations in the attached Cabinet Report, appendix A, were agreed on 21 June 2017. Also attached is a summary of the Community Impact Assessment, appendix B, and the detailed Community Impact Assessment, appendix C.

Link to Strategic Plan

The Children and Families System Transformation is a key outcome in the delivery plan and links to the Best Start strategic priority.

Link to Other Overview and Scrutiny Activity

- Children, Young People and Families Transformation Programme – Safe and Strong Communities Select Committee – 8th June 2016
- C,Y,P&Fs Transformation Programme – Overview of Programmes Including the Vision Pilot – Safe and Strong Communities Select Committee – 8th July 2016
- Progress with the Children and Families Transformation Programme – Safe and Strong Select Committee – 12th December 2016
- Children and Families System Transformation Programme – 16th January 2017

Community Impact

Appendices B and C detail the Community Impact Assessment

Contact Officer

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Appendices/Background papers

Appendix A – Cabinet Paper 21 June 2017 – Children and Families System Transformation

Appendix B – CIA Checklist and Executive Summary

Appendix C – Community Impact Assessment



Cabinet Meeting on Wednesday 21st June 2017

Children's and Families System Transformation

Cllr Mark Sutton, Cabinet Member for Children and Young People said

“We want Staffordshire children to have the best possible start in life, to grow up in safe, loving homes. Through innovation and closer working with other organisations, the county council has helped deliver real results for families and children in Staffordshire in recent years. More children are starting school ready to learn and thrive, the number of children in care is reducing and our Children's Services – rated good by Ofsted – are among the best anywhere in the country.

“But we want to do more, to help more families manage the problems that come their way, to keep children safe, and to reduce the numbers of children in care. Our vision is to transform the way we work with families and children, providing the most effective help when it is needed and increasing support available from and in the community.

“We will always take immediate action if a child is at risk. This new approach aims to create more stable, supportive homes for our children, reducing the need for our help, and allowing us to target specialist support where it really makes a difference.”

Report Summary:

Most children and families in Staffordshire tell us they are happy, safe and enjoy life. The county has high employment and more, better paid jobs are being created all the time that give families more opportunities. Evidence tells us that resilient and stable families will enjoy a better life.

In Staffordshire, more children than elsewhere in the country are ready to start school at age 5, we have fewer children going into care and our children's services are rated by Ofsted as among the best anywhere in the country.

Those who do need help tell us they don't want to be in 'systems' or 'services'. They want to be supported by their friends, families and in their communities to deal with the day-to-day challenges they face. As long as people are safe, we want this too.

Their lives will be better and the demand for public services from families will also reduce at a time when other demands (such as those for adult social care) are rising and we can no longer afford to do everything we used to.

We will continue to step in if a child's safety is at risk. Supporting families and communities to help each other and draw on the strengths and resources around them is not a new approach for us.

However, identifying and building on the strengths in a family is already a key part of children's social work. We are working more closely with our partners with a 'community first: services last' approach to help families and children. In any given place, we aim to work openly with partners and communities to identify what's there, what works and what's missing.

The aim is to provide the right mix of support from professionals, the voluntary sector, communities, families and friends so that people can live their lives to the fullest. This report details the progress we are making towards this innovative way of working.

This report also evidences how we will deliver the current savings detailed in the MTFS 2017/18 – 2021/22.

Recommendations

I recommend that:

- a. Cabinet agree the principles that underpin the Children's and Families' Transformation Programme
- b. Cabinet agree the proposed changes to the operating model and associated working practices
- c. Cabinet agree to the implementation of system change

Local Members Interest	
N/A	N/A

Cabinet – 21st June 2017

Children's and Families System Transformation

Recommendations of the Cabinet Member for Children and Young People

I recommend that:

- a. Cabinet agree the principles that underpin the Children's and Families' Transformation Programme
- b. Cabinet agree the proposed changes to the operating model and associated working practices
- c. Cabinet agree to the implementation of system change

Report of the Deputy Chief Executive and Director for Families and Communities

Background

1. Evidence tells us that Staffordshire is a great place to live. Most families are happy, safe and have loving homes, however there are some families who face challenges that mean they cannot thrive in the way they want to.
2. We are working hard to reduce the number of children who reach a point in their lives where they require the statutory intervention of a social worker or other specialist professional to intervene.
3. By targeting support to the children who need it most and by addressing the problems faced by their whole family (not just the symptoms of the problem being shown by the child), we have reduced the number of children in Staffordshire who are considered to be Children in Need or are subject to a Child Protection Plan.
4. Since 2015, the number of Children in Need in Staffordshire has reduced from 296 to 270 per 10,000 of the population and the number of children subject to a Child Protection Plan has reduced from 38 to 34 per 10,000 of the population.
5. The number of children in care has remained relatively stable for the past five years (excluding Unaccompanied Asylum Seeking Children), against a national increase in numbers.
6. The support that these children currently receive from our children's services is officially rated as 'Good' by Ofsted.

7. However, as Staffordshire's population continues to grow, the number of children needing statutory intervention and intensive specialist support from children's services remains significant.
8. Evidence tells us that the lives of children and young people who need this level of support are not as good as the general population. Intensive specialist support is also expensive and trend analysis demonstrates that if we continue to provide this volume of support our service will become unaffordable.
9. When we asked them (through consultations between 2012 and 2015), children said they wanted to be supported by their families to resolve the day-to-day problems they face. Providing children are safe, we also want them to thrive within their families and communities.
10. We recognise that children's lives are directly impacted by the quality of their family life. The issues that their parents face can have a negative impact on the lives of their children. Our challenge is to find a way of working that will enable Staffordshire's children to thrive within their own families and communities by addressing the root causes of difficulties for the whole family at the earliest point.
11. Through this approach we aim to support families to resolve problems early and wherever possible, prevent a problem escalating to the point where intensive specialist support is required.
12. We cannot do this alone. The most vulnerable and troubled families in Staffordshire receive support from adult services as well as many of our partner organisations.
13. We are committed to exploring opportunities to commission in partnership and in a way that empowers communities and families to help each other and themselves.
14. We have already developed an Early Help Strategy through the Staffordshire Safeguarding Children Board (SSCB) and we are committed to developing and supporting Earliest Help through our communities and local providers.
15. Throughout this work our priority remains to keep children safe.

Select Committee

16. The Safe and Strong Communities Select Committee has been regularly updated on changes we are making to the way we work with partners to support Staffordshire's children and families.
17. The Committee has demonstrated its support for our policy direction.
18. Following a presentation in January 2017 on eight community based pilot projects, the committee requested that they work across communities, which may not sit within a single district, rather than being tied to district or borough council boundaries.

19. This recommendation is being used to inform local (place based) workshops involving the council and other organisations looking at where and how to focus their efforts to support families with low level needs and to prevent those needs arising or worsening.
20. The Committee has also requested that data and evidence to support the work is collected from across the partnership. We are currently using data from across the partnership to choose the issues that we will address/are addressing jointly with partners.
21. We remain committed to seeking the views of the Select Committee and providing regular updates on progress.

Legislation

22. As a Local Authority we have to comply with a number of key pieces of legislation. These are designed to ensure the safety and wellbeing of children, including protection from harm and neglect, alongside other outcomes.
<https://www.nspcc.org.uk/preventing-abuse/child-protection-system/england/legislation-policy-guidance/>
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/592101/Working_Together_to_Safeguard_Children_20170213.pdf
23. We work with relevant partners and provide a range of services to meet these duties. The Lead Member for Children's Services and the Director of Children's Services are politically and professionally accountable for these key functions.
24. We have a well-established Safeguarding Children's Board (SSCB) made up of representatives from the county council and other partners, and a document detailing the levels of need that trigger different levels of support.
<https://www.staffsscb.org.uk/Professionals/Procedures/Section-One/Section-One-Docs/Section-1E-SSCB-Threshold-framework.pdf>
25. We are also subject to independent regulation and inspection from Ofsted across a range of our children and families services and functions.
<https://www.gov.uk/topic/schools-colleges-childrens-services/inspections>

Transformation Programme

Aims

26. The Children's and Families' Transformation Programme aims:
 - a. To ensure that Staffordshire's families live the best possible lives by using the knowledge, skills and resources we have across partner organisations effectively and efficiently.

- b. To see safe, healthy, thriving children whose needs are met within their families and communities where it is safe to do so, reducing the need for high cost, statutory services.
- c. To provide a high quality statutory children's service that works with those children and families who require this specialist level of support

Challenges and Approach

- 27. Systems are complicated. We face a number of challenges with the system of support for Staffordshire's children and families.
- 28. Our main challenge is that we are not always able to consistently or comprehensively address the root cause of issues in a family, responding instead to the symptoms of the problem displayed by a child or young person.
- 29. For example, we may work with a child and their school to improve school attendance, but because the overcrowded house, family debt and mother's depression have not been addressed, the problems with school attendance soon return.
- 30. In such cases, a child's need can escalate and the possibility that more intensive specialist support will be required increases.
- 31. As Staffordshire's population continues to grow, by 2020/21, if nothing changes, the number of children suffering abuse and neglect will grow and this will result in increasing and significant financial pressures.
- 32. We are therefore taking a whole system approach to change: changing the way we work at the council and at the same time working with partners to design a shared approach that can respond to differences in the communities we live in and the challenges individual families face.
- 33. We are committed to a system that supports Staffordshire's families and communities to be strong and stable. A system that:
 - a. Recognises that communities have different strengths and builds on these
 - b. Helps families to resolve their challenges at the earliest possible point
 - c. Targets support to those families who need it most
 - d. Reduces the need for costly statutory intervention
 - e. Can meet the needs of more families as Staffordshire's population continues to grow
 - f. Is affordable

Progress to date

- 34. The first phase of change has focused on leadership.

35. A Families Strategic Partnership Board (FSPB), which is a sub-group of the Health and Wellbeing Board (HWBB) has been created.
36. This has enabled partners to formally engage with each other, develop a shared understanding and thinking, and agree shared priorities. It has also provided a way to monitor and evaluate progress and test areas of development as a partnership. This has included:
 - a. Beginning the development of a shared intelligence function
 - b. Ensuring that our service is responsive and effective
 - c. Piloting new ways of working together in districts
 - d. Working intensively with families with complex needs to understand if this improves their lives and prevents needs escalating to a level that requires statutory intervention
 - e. Reviewing our commissioning policies and practice to enable us to commission effectively using all of our available resources
37. There is still a need to increase engagement with adult services and to build on the local relationship with schools.
38. Since October 2016, the second phase of the change programme has focused upon the future design of the children and families system through all levels of need. This has initially focussed on three areas, shown in the diagram below:
 - a. how to build on what we've learned and continue to improve the way we target early support to families with complex needs, who are likely to need statutory services should they not receive this support
 - b. understanding how we should commission services to support a system which builds strong and stable families and communities; and
 - c. working with partners to develop and pilot a "Place Based Approach" which tests how our new way of working can be flexible to recognise the different strengths and challenges in an individual district or borough



39. We have done a lot of work to better understand, identify and address the root causes of problems in Staffordshire's families, particularly in relation to those children and families who are likely to need statutory services.
40. Our Intensive Prevention Service was established to provide intensive intervention with children and their parents to prevent the children being taken into care, and to support children remaining in and returning to the care of their families. This has kept children from needing higher level specialist services and has avoided the costs associated with this.
41. Our Breathing Space project is targeting support to families who have had a child removed from their care to reduce the likelihood that any subsequent children will need to be taken into care too.
42. The Intensive Family Support Service has been developed to target support to parents who misuse drugs and alcohol, as this is a common cause of wider problems in the family.
43. This targeted support has prevented 86% of the families supported and 85% of children needing to receive more intensive, higher tier services by meeting their needs before they hit a point of crisis. It has also collectively reduced spending by £2.02m as of May 2017. Based upon this evidence, we expect that this way of working will, over the next five years, translate from cost avoidance to cashable savings as it will reduce demand into statutory care services.

Proposed Changes

Principles

44. We have developed and agreed with partners a set of principles for the Place Based Approach which underpins the changes we want to make to the way we work together. We have also developed a set of principles which underpin the redesign of our whole internal system.

Place Based Approach:

- a. We will build on what is already working and remove duplication
- b. Make better, collective use of our assets, resources and knowledge
- c. We will use intelligence to effectively target resources to meet the local needs
- d. We will address the issue presented by the child and the wider root causes of this issue within the family
- e. We will engage appropriate stakeholders in planning and delivery
- f. Be flexible in our approach and learn from emerging ideas and practice
- g. Address and resolve barriers and issues that arise

Whole System:

- a. A system which safeguards children, young people and families and supports them to achieve their best outcomes

- b. Maintain statutory compliance
- c. Have clear accountability and leadership at all levels within the system
- d. Address root causes issues through intelligence
- e. Work to safely reduce demand
- f. Whole system approach with a resilient and flexible workforce
- g. Have a culture which enables shared ownership of issues and decision making
- h. A system which provides value for money and is sustainable
- i. Create the right environment for families and children to be supported at appropriate levels

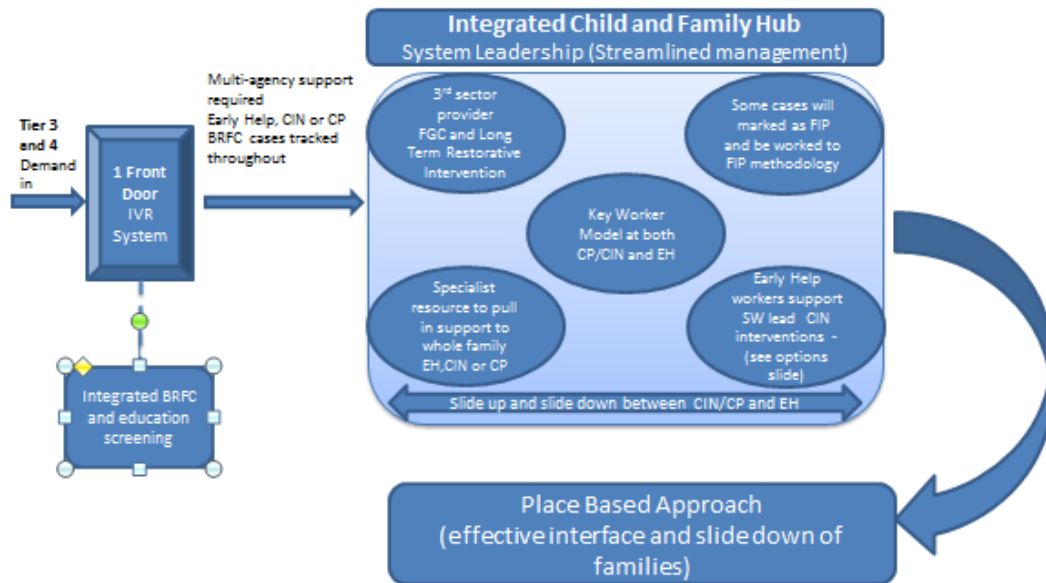
Development of a Place Based Approach in Partnership

- 46. Strategic conversations have taken place with partners from October 2016 to March 2017. The aim has been to agree a definition of a Place Based Approach and the principles which will underpin the way we build strong and stable families and communities in a particular place. The working definition has been agreed as:
- 47. “A collaborative approach using the right resources (multi-skilled teams, universal services, voluntary sector, communities etc.) at the right time to improve outcomes for children, young people, families, vulnerable people and communities in an identified locality”
- 48. We have agreed shared outcomes and what a Place Based Approach may look like.
- 49. The principles have informed a programme of local workshops which are currently taking place with partners, initially in Tamworth and Newcastle.
- 50. The aim is to understand how to build on existing local strengths, fill the gaps in local provision and how we can best work with communities, the voluntary sector and locally commissioned providers to develop strong and stable families and communities
- 51. It is acknowledged that this approach will take time to build.

Changes to the way the county council supports families with complex needs

- 52. We are proposing to change the way we work with families who have complex needs.
- 53. The proposed changes are based on our learning from work in projects including Intensive Prevention, Breathing Space, Intensive Family Support and in Family Intervention Programme Teams.
- 54. This work has shown that targeting intensive support to tackle the root causes of problems experienced by a family with complex needs can improve their lives and reduce the likelihood of them needing specialist statutory services in the future. As a result, the county council can avoid the costs associated with these specialist services.

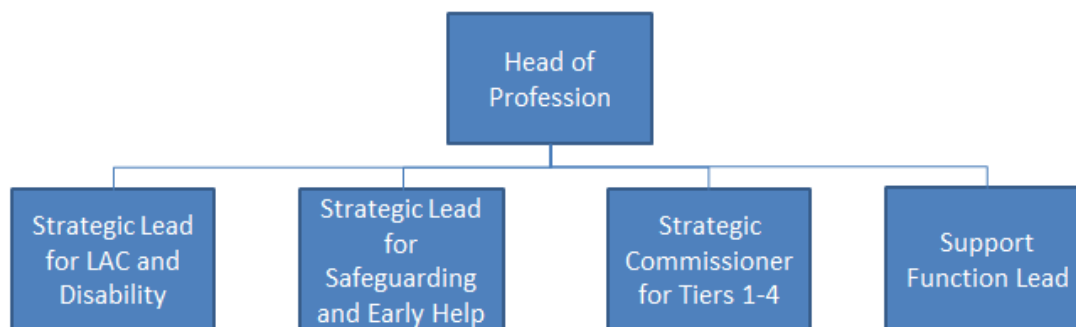
55. The proposed way of working brings together the learning from these projects and will extend this way of working across the service allowing our adult and children's services specialist to work at the right level to help families at the earliest point, whilst continuing to keep children safe.
56. The development of an Integrated Children and Families Hub for each district or borough in the county will further integrate our current Local Support Team and Specialist Safeguarding Units into a joined up service that can tap into community strengths and respond to local needs.
57. Within each Hub, families with needs at tiers 3 and 4 of the Staffordshire Safeguarding Children Board (SSCB) continuum of need (formal Early Help, Child in Need and Child Protection) will benefit from the additional direct support of a dedicated Early Help worker, working alongside their allocated Social Worker where this is appropriate.
58. Early Help key workers, where appropriate will stay with a family throughout their time of support. If a family's situation worsens and they need support from a Social Worker, the Early Help key worker may continue to work with the family. Similarly, when the family's situation improves and they no longer need a social worker to support them, the Early Help key worker will be able to remain involved enabling a seamless transition to lower tier services.
59. Early Help key workers will provide a well-coordinated, evidence based and focused approach, building strong and trusting relationships with the families they support. This approach will also allow our children's workforce to work more efficiently and effectively by reducing the need for reassessment or engagement of new key workers.
60. The Hubs will mean that there is just one point of access to a range of family support services (the 'front door'). This will allow us to manage and respond to demand better.
61. To facilitate this approach, Early Help and Safeguarding functions have now been brought together under one Strategic Lead.
62. The below diagram illustrates how the Integrated Child and Family Hubs will work.



- 63. In the future, we aim to bring specialist drug and alcohol, mental health, finance and housing expertise into the Hubs.
- 64. There will also be work to develop a way of identifying and then supporting those families who, with a limited level of support for an extended period, could maintain themselves within the community and avoid the need for specialist statutory support.
- 65. This will be further supported by the development of the Family Group Conference approach, a well tried, tested and evidence based way of supporting communities to be strong and resilient.

Changes to commissioning

- 66. Our commissioning needs to be focused on supporting families to be strong and stable so that we can reduce the number who need specialist statutory services.
- 67. We believe that some services and support will be most effective if we commission them across the whole county. In other instances, it will be more effective if our commissioning is designed to meet a local need and specific services/support cover a smaller area.
- 68. Work has taken place to identify the functions and capabilities required for this to happen effectively and efficiently.
- 69. We intend to bring commissioning and delivery together so that there can be a joined up conversation which reflects evidence of what's needed and what works.



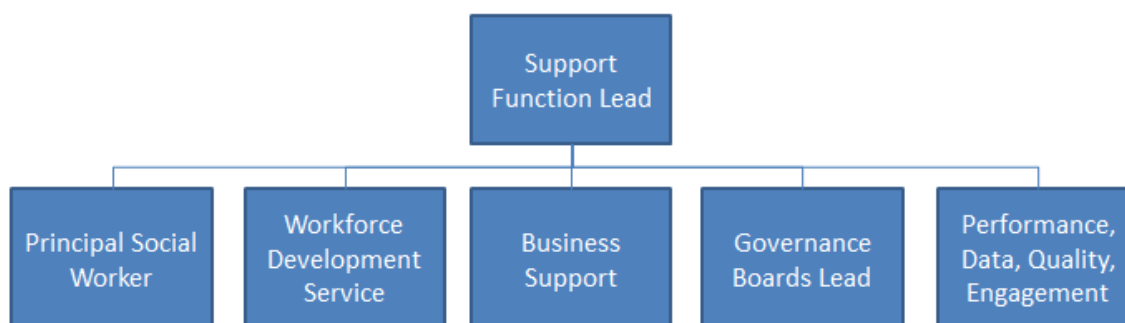
Support Function Development

70. To support the commissioning and delivery of work across the Families and Communities Directorate, a support function is required.

71. This function will:

- a. initiate and support programmes of work that ensure appropriate data is collated and intelligence/insight gathered to improve, develop and quality assure our work.
- b. ensure we are meeting our statutory responsibilities and are able to respond appropriately as part of the Ofsted inspection framework
- c. inform future service planning, commissioning and delivery
- d. call upon existing corporate functions where appropriate to ensure best use of resource and avoid duplication of activity.

72. Work has been completed to identify the core functions required. As such, the proposed structure will consist of:



Children with special educational needs and disabilities (SEND)

73. In line with Staffordshire's All Age Disability Strategy- 'Living My Life, My Way - A Strategy for disabled people in Staffordshire (2013-18)', the vision for the SEND transformation program is:

'All children and young people with special educational needs and disability receive the right support at the right time and in the right way so that they are able to realise their aspirations and lead fulfilling lives in their local school, home and community wherever possible'.

74. The question we are seeking to answer is: 'How do we enable and facilitate a more inclusive and effective education for children with Special Educational Needs and Disability?'
75. We want children with special educational needs and disabilities to:
- a. Be empowered to live as independently as possible and live the life they choose;
 - b. Learn, develop and achieve their potential;
 - c. Be safe and secure
 - d. Live and thrive wherever possible in their local community
76. We have a growing number of children and young people with special education needs and/or disabilities in Staffordshire. This places significant demand on our services and special schools, with increased: requests for Education Health and Care Plans (EHCPs), numbers of children subject to an EHCP, numbers of children placed in both our own or independent special schools (more than other local authorities for those children with moderate learning difficulties), tribunals and exclusion.
77. The cost of providing these services (including associated transport costs) is increasing every year. If this continues at the current rate, our current way of working will be unaffordable from 2018.
78. In the future, we would like to see:
- a. Children with special education needs and disabilities included in local schools and communities (supported by a clear Inclusion Strategy embedded across the county)
 - b. Children achieving better at school
 - c. More children successfully progressing in their local school (narrowing the gap in progress and achievement compared to other children and young people of the same age)
 - d. Special schools with the capacity and capability to cater for children and young people with more complex needs, preventing the need for these children to be educated in schools outside of Staffordshire
 - e. Locality model of working
 - f. Integrated working with social care
 - g. Reduction of costs in and across the system and efficient and effective use of High Needs Block funding for SEND
 - h. Fixed and permanent exclusions at or below the national level across all sectors
 - i. Authorised and unauthorised absences at or below national levels across all sectors

j. Parents who are confident in meeting the needs of their children

79. To achieve this we are working closely with a range of internal and external partners to support a major change in the way we work together to support children with special educational needs and disabilities. It is anticipated that this work will move to the “test”/“experiment” stage of a “check, experiment, do” programme from summer 2017.
80. The changes we are making to support for children with special educational needs and disabilities are aligned with the wider changes to children’s services with integrated leadership and support functions.

Education

81. Education in Staffordshire continues to change. Around one third of Staffordshire’s schools are now academies or free schools, which has significantly changed the role of the Local Authority in education.
82. Schools remain a vital part of the community, working with us and a range of statutory and voluntary partners to ensure that families get the help they need as early as possible, to be strong and stable, so that they can thrive in their communities without the need for specialist or statutory children’s services.

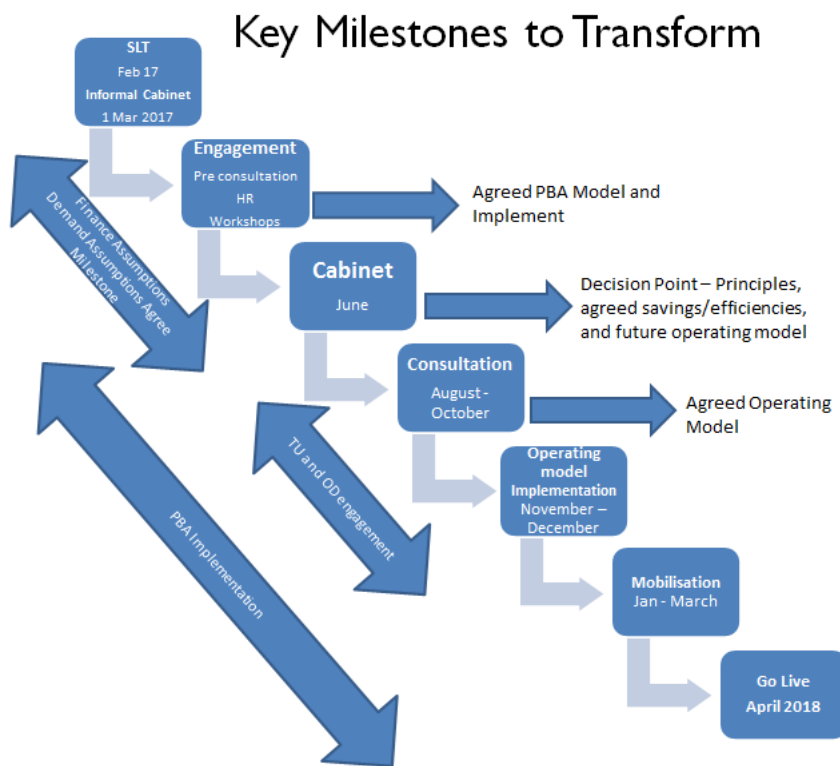
Finance

83. We recognise that the current way of supporting Staffordshire’s children and families will become unaffordable by 2020/21.
84. Despite stabilising the number of children requiring specialist support over the past two to three years, our population continues to. We therefore face a significant financial challenge.
85. We expect that the work described within this paper will build strong and stable families and communities, allowing families to thrive whilst safely reducing the number of children needing specialist support.
86. Within the current Medium Term Financial Strategy (MTFS), we have committed to saving £3.693m in 2017/18 as a result of this new approach and whilst this is challenging due to timescales, work is currently underway to identify how this will be achieved.
87. In 2018/19 we have committed to further savings of £413,000 as a result of reducing the demand for specialist services. In addition, a further £2.340m will be removed from the system as a consequence of the removal of the Direct School Grant (DSG) and the Education Support Grant (ESG).
88. By 2021/22 we have committed to a total of £7.939m savings.

89. We have already evidenced cost avoidance of £2.02m as of May 2017, as a result of targeting intensive support to families who are likely to require statutory services should they not receive this extra help.
90. To design and deliver aspects of these system-wide changes we will be seeking capital funding or alternative funding options for some discrete areas which will support the transformation process (for IT, development of the intelligence function, changes to First Response, introduction of adults services workers to prove the concept of new ways of working at the cusp of statutory services).
91. Our Insight Team will be undertaking a detailed piece of work, based on our plans for change, to analyse current demand and predict our future demand.
92. We aim to return to Cabinet in June 2018 with a further update on our progress and the findings from this work which will define our future projections and savings.

Next Steps

93. If Cabinet accept and endorse the recommendations within this report, we will begin a process of change to reorganise our children’s services accordingly.
94. We will actively seek the views of colleagues across the Children’s and Families service to help shape and inform the new functions, practice and operating model.
95. Those who are affected by this change will be formally consulted as appropriate in partnership with Trade Unions.
96. The timeline is as follows:



List of Background Documents: [Refer to Cabinet Report template guidance notes](#)

Report Commissioner: Helen Riley

Job Title: Deputy Chief Executive and Director for Families and Communities

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Community Impact Assessment – Checklist and Executive Summary

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Name of Proposal: Children’s and Families System Transformation – to improve the way we work to reflect the wider children and families system and to design a locally responsive system with our partners that is both sustainable and fit for the future.

Project Sponsor: Councillor Mark Sutton (Cabinet Member for Children and Young People)

Project Manager (or Lead): Helen Riley (Deputy Chief Executive and Director for Families and Communities)

Date: 13th June 2017

Final Checklist – Prior to submitting your Community Impact Assessment (CIA), please ensure that the actions on the checklist below have been completed, to reassure yourself/ SLT/ Cabinet that the CIA process has been undertaken appropriately.

Checklist	Action Completed (tick)	Comments/Actions
The project supports the Council's Business Plan, priorities and MTFS.	Y	
It is clear what the decision is or what decision is being requested.	Y	
For decisions going to Cabinet, the CIA findings are reflected in the Cabinet Report and potential impacts are clearly identified and mitigated for (where possible).	Y	
The aims, objectives and outcomes of the policy, service or project have been clearly identified.	Y	
The groups who will be affected by the policy, service or project have been clearly identified.	Y	
The communities that are likely to be more adversely impacted than others have been clearly identified.	Y	
Engagement / consultation has been undertaken, and is representative of the residents most likely to be affected.	Y	
A range of people with the appropriate knowledge and expertise have contributed to the CIA.	Y	
Appropriate evidence has been provided and used to inform the development and design of the policy, service or project. This includes data, research, engagement/consultation, case studies and local knowledge.	Y	
The CIA evidences how the Council has considered its statutory duties under the Equality Act 2010 and how it has considered the impacts of any change on people with protected characteristics.	Y	
The next steps to deliver the project have been identified.	Y	

Executive Summary – The Executive Summary is intended to be a collation of the **key issues and findings** from the CIA and other research undertaken. This should be completed **after** the CIA and research has been completed. Please structure the summary using the headings on the left that relate to the sections in the **CIA template**. Where no major impacts have been identified, please state N/A.

	Which groups will be affected?	Benefits	Risks	Mitigations / Recommendations
PSED – What are the impacts on residents with a protected characteristic under the Equality Act 2010 ? <i>Highlight any concerns that have emerged as a result of the equality analysis on any of the protected groups and how these will be mitigated. It is important that Elected Members are fully aware of the equality duties so that they can make an informed decision and this can be supported with robust evidence.</i>	Children, young people and family members (CYP&F) from different races, with disabilities, of different sexes and ages, with different beliefs, religions, sexual orientation, young people who are pregnant, married or in civil partnerships.	All CYP&F will benefit from improved ways of working; improved commissioning to address root causes, improved approaches to identify and meet needs earlier, improved ways of working when needs escalate to reduce needs and prevent further escalation. The needs of those with protected characteristics can be incorporated into the new ways of working.	There is a risk that improved ways of working will not fully consider the needs of those with protected characteristics.	Ensure that while the new ways of working are designed centrally and locally through a place-based approach, that the needs of those with protected characteristics are fully considered.
Health and Care – How will the proposal impact on residents' health? How will the proposal impact on demand for or access to social care or health services?	All CYP&F including CYP&F with mental health issues. All CYP&F (including CYP&F with needs or issues relating to their lifestyle (such as substance misuse, sexual health issues and obesity) All CYP&F (including those with earliest help, early help and specialist support	Working differently and with partners to identify and address needs earlier and address root causes will help improve mental health of CYP&F. A whole family approach will address parental lifestyle issues. Commissioning appropriately will ensure provision is accessible at the point where it is most effective.	There is a risk that those with health issues may not fully engage with support available, or that insufficient resources are available to meet needs for those families with complex needs. There is a risk that insufficient provision to address health needs locally of CYP&F will be developed through the place based approach.	Ensure new ways of working when designed and implemented considers the holistic needs of the whole family, centrally and through the place based approach

	needs)			
Economy – How will the proposal impact on the economy of Staffordshire or impact on the income of Staffordshire’s residents?	CYP&F	Working holistically with a family to address needs could improve the income of families and budgeting skills, particularly through the [place based approach, reducing poverty as a root cause for children requiring statutory interventions.	There is a risk that insufficient priority is placed on addressing poverty as a root cause issue.	Ensure place based solutions which are developed are evidence based, based on needs in the locality.
Environment – How will the proposal impact on the physical environment of Staffordshire?	No major impacts			
Localities / Communities – How will the proposal impact on Staffordshire’s communities?	All Staffordshire communities	Development of the place based approach will result in more resilient communities and families, with families accessing support locally when appropriate at an earlier opportunity, preventing the escalation of need and reducing the need for higher tier statutory interventions.	Limited engagement with groups and organisations that work with CYP&F in communities may limit the success of the partnership-led PBA to meet the needs of local populations.	As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations that support CYP&F. Recognition and promotion of positive prevention and earliest help cases in relation to strengthening community capacity in order to share learning across communities and localities to promote maximum impact.



Community Impact Assessment

Name of Proposal: Children's and Families System Transformation – to improve the way we work to reflect the wider children and families system and to design a locally responsive system with our partners that is both sustainable and fit for the future.

Project Sponsor (if applicable): Councillor Mark Sutton (Cabinet Member for Children and Young People)

Project Manager (if applicable) or Lead: Helen Riley (Deputy Chief Executive and Director for Families and Communities)

Date: 18th May 2017

Please note; this Community Impact Assessment will be updated as appropriate during the life of the transformation programme. It is also recommended that separate Community Impact Assessments are undertaken as and when necessary for specific projects within the programme.

Completing a CIA

- A CIA will help you to identify the potential **impacts, risks and benefits** of your proposed policy, service or project. Doing this at an early stage enables engagement and research to be undertaken to identify actions that will either **lessen the risk** or **maximise the benefits**. The assessment will also help you to identify mitigating factors whereby risks may be balanced out to an extent by the benefits.
- This template should be used to support the development of a proposal during the **planning stage**, therefore supporting the council's approach of [Achieving Commissioning Excellence](#).
- A good CIA will involve input from more than one person. A **Project Team** should be identified with different, but relevant expertise to ensure that a full range of views are considered.
- **Engagement and/or consultation** should take place with appropriate and representative groups of people that are most likely to be affected. This must then be used to help shape the design/outcomes of the project. Please note that due to the publication of CIAs, it is advisable not to record personal details of members of the public, such as names or addresses.
- **Once completed**, the main findings from your CIA should be transferred to the '**Checklist and Executive Summary**' template. Then both documents need to be approved/signed off by the appropriate people. Depending on the size of your project, this could be your manager, project lead, sponsor or SLT.
- For CIAs that are going to **Cabinet**, only the '**Checklist and Executive Summary**' should be submitted as part of the Cabinet Papers. The full CIA document should be submitted as a **Background Paper**.

Completing the CIA template

This table describes what is required when completing the key sections of your assessment.

Which groups will be affected	Benefits	Risks	Mitigations / Recommendations
<p>Which groups of people will be impacted by the proposed policy, service or project? This could be people in a particular area, a street, or a group of people with similar characteristics e.g. older people, young people or people with care needs.</p> <p>Also consider staff, residents and other external stakeholders.</p>	<p>Think about the impact the proposal may have on each of the different category areas, and identify the benefits of each decision.</p>	<p>Think about the impact the proposal may have on each of the different category areas, and identify the risks associated with the proposal.</p>	<p>Set out any recommendations as to how the benefits will be maximised and the risks minimised.</p> <p>Also highlight any trade offs that may occur.</p>
<p>Evidence Base: (Evidence used/ likelihood/ size of impact) How certain are you about the assessment of each potential impact, and what evidence have you used to arrive at the decision? E.g. Data – population trends data, census data, service data. Research – national, regional, local research. Engagement/ Consultation – with partners, the public, the voluntary sector.</p>			

Use the following template to highlight the impacts of your proposal on each of the following categories: the Public Sector Equality Duty (PSED), Health and Care, the Economy, the Environment, and Localities/ Communities.

Community Impact Assessment Template

Public Sector Equality Duty (PSED) – Use this section to identify if the proposal will impact on our legal obligations under the Equality Act 2010 for both residents and staff. In summary, those subject to the general equality duty must have due regard to the need to: Eliminate unlawful discrimination, harassment and victimisation, advance equality of opportunity between different groups and foster good relations between different groups.

Please consider:

- Who is currently using the service, across the protected characteristics?
- What do we know about their experiences and outcomes?
- What relevant information is available from the Census and population trends data?
- What were the findings of the engagement/consultation?
- Is there any relevant national, regional and/or local sources of research/evidence available?
- Is there any relevant information from partners or voluntary, community, social enterprise organisations?
- What is the analysis of the impact on those with relevant protected characteristics?

Protected Characteristics:	Which groups will be affected	Benefits	Risks	Mitigations / Recommendations
<ul style="list-style-type: none"> • Race 	Children, young people and family members (CYP&F) whose first language is not English or do not speak English; CYP&F from diverse cultural backgrounds; Asylum Seekers and Refugees; Gypsies and	<ul style="list-style-type: none"> • District access points as part of the partnership-led PBA could be adapted to meet local needs for CYP&F from diverse cultural backgrounds; • Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is 	<ul style="list-style-type: none"> • If district access points and digital solutions do not adapt to meet the local needs of families accessibility may be limited for some CYP&F; • Available engagement (though recognised as limited) indicates different preferences in the first point of contact for information, advice and guidance (IAG) and communication methods 	<ul style="list-style-type: none"> • Through developments of the partnership-led Place Based Approaches (PBA) considerations are given to the local population demographics and their needs, with appropriate actions taken accordingly to enable IAG and access to support as necessary; • Consideration to be given to those whose first language is not English or who do not speak English when accessing a local

	<p>Travellers; (please note this is not an exhaustive list)</p> <p>Groups and organisations that represent, support and/or work with CYP&F from different race, colour, nationality, ethnic or national origins.</p>	<p>more sensitive to and effectively meets the needs relevant to CYP&F from culturally diverse backgrounds;</p> <ul style="list-style-type: none"> • Key working at Early Help (EH) and Children in Need (CiN) interventions may support families to meet their specific needs which could relate for example to access to English for Speakers of Other Languages (ESOL) courses, local groups and supporting Asylum Seekers and Refugees to engage with resident communities; • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support CYP&F from culturally diverse backgrounds' could be supported; • The partnership-led PBA may help to foster good relations between CYP&F from different cultural 	<p>(e.g. first preference within their family rather than with other parents/carers or the internet), therefore if this is not taken into account accessibility to IAG and effective communication may be limited for CYP&F from some culturally diverse backgrounds;</p> <ul style="list-style-type: none"> • Limited engagement with groups and organisations that work with and support CYP&F from culturally diverse backgrounds may limit the success of the partnership-led PBA to meet the needs of local populations; • There is a risk that all volunteers and staff members do not have the necessary skills to identify and take appropriate action in relation to meeting the needs of CYP&F from diverse cultural backgrounds to prevent needs escalating, deliver earliest help and EH. • The successful implementation of the proposal is closely linked 	<p>district access front door or the central front door to promote accessibility and designing digital solutions;</p> <ul style="list-style-type: none"> • Promote community capacity and workforce development to meet the needs of those from culturally diverse backgrounds (including for local commissioning, delivery and partnership-led PBA); • Engagement with CYP&F and relevant groups that work with or represent CYP&F from culturally diverse backgrounds and whose first language is not English / do not speak English to promote accessibility of the digital solutions; • As part of local asset mapping, gather an understanding and strengthen links with and between relevant community groups and organisations; • Engagement with local groups to promote effective prevention and early help for CYP&F from culturally diverse backgrounds and to understand potential additional capacity building needs; • An intelligence function includes insight (including trends) relevant to inform the partnership-led PBA, commissioning and delivery
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		<p>backgrounds through the promotion of community capacity and resilience.</p> <ul style="list-style-type: none"> The voice of CYP&F from culturally diverse backgrounds could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery. 	<p>to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals.</p>	<p>which is understanding of, sensitive to and adapts to meet local culturally diverse populations;</p> <ul style="list-style-type: none"> Monitor impact of the proposals on the access and outcomes of those from culturally different backgrounds and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). Identification of any training and development needs to enable volunteers and staff members to meet the needs of CYP&F from diverse cultural backgrounds. Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further understand potential impact. Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<ul style="list-style-type: none"> Disability 	<p>CYP and family members with a physical and/or mental</p>	<ul style="list-style-type: none"> District access points as part of the partnership-led PBA could be adapted to 	<ul style="list-style-type: none"> Barriers to physical access to local buildings and community resources as part of the partnership- 	<ul style="list-style-type: none"> As part of the partnership-led PBA, consideration is given to accessibility to physical community resources and

	<p>impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. For example, CYP&F with learning disabilities, mental health conditions such as anxiety and sensory impairments (please note this is not an exhaustive list).</p> <p>Groups and organisations that represent, support and/or work with CYP&F with a physical and/or mental impairment.</p>	<p>meet local population needs in relation to disabilities;</p> <ul style="list-style-type: none"> • Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is more sensitive to and effectively meets the needs relevant to CYP&F with additional needs and/or disabilities; • Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support to CYP and/or their family members with an additional need and/or disability thereby improving outcomes and reducing the escalation of needs; • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support 	<p>led PBA may limit access to people with physical disability needs;</p> <ul style="list-style-type: none"> • If district access points do not adapt to meet the local needs of families accessibility may be limited for some CYP&F with additional needs and/or disabilities; • Digital solutions to share IAG and communication may not meet the needs of some CYP&F with a disability therefore limiting access to IAG, communication and potentially not reducing the likelihood of escalation of needs; • Limited engagement with groups and organisations that work with and support CYP&F with additional needs and/or disabilities may limit the success of the partnership-led PBA to meet the needs of local populations; • There is a risk that all volunteers and staff members do not have the necessary skills to identify and take appropriate action in 	<p>appropriate action taken as necessary to promote access;</p> <ul style="list-style-type: none"> • Engagement with CYP&F and relevant groups that work with, represent and/or support CYP&F with additional needs and/or disabilities on the design and implementation of digital solutions; • Engagement with young carers and those groups that represent and/or work with young carers on the further development and implementation of proposals to promote access and positive outcomes; • As part of local asset mapping, gather an understanding and strengthen links with and between relevant community groups and organisations; • Engagement with local groups to promote effective prevention and early help for CYP&F with additional needs and/or disabilities to understand potential additional capacity building needs; • An intelligence function includes insight (including trends) relevant to disabilities of local populations to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on the access and
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		<p>CYP&F with additional needs and/or disabilities could be promoted.</p> <ul style="list-style-type: none"> • The voice of CYP&F with additional needs and/or disabilities could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery; • The partnership-led PBA, commissioning and delivery within the proposals could also benefit young carers of those with a disability to promote positive outcomes. 	<p>relation to meeting the needs of CYP&F with additional needs and/or disabilities to prevent needs escalating, deliver earliest help and EH.</p> <ul style="list-style-type: none"> • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>outcomes for CYP&F with additional needs and/or disabilities and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant).</p> <ul style="list-style-type: none"> • Appropriate learning, development and resources available for volunteers and staff members to identify the needs of CYP&F with additional needs and/or disabilities and take appropriate action (e.g. signpost to relevant services or provide EH); • Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further understand potential impact. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<ul style="list-style-type: none"> • Sex 	<p>Male and female CYP&F</p> <p>Groups and organisations that represent, support and/or</p>	<ul style="list-style-type: none"> • Effective locally based commissioning and county-wide commissioning, through effective use of intelligence, could promote prevention, 	<ul style="list-style-type: none"> • If preferences for IAG, communication and support mechanisms vary between males and females and this is not taken into account there may be limited 	<ul style="list-style-type: none"> • As part of the partnership-led PBA and development of local and central front-doors, preferences for IAG, communication and support mechanisms for males and females to be considered and

	<p>work with CYP&F with men or women (for example dads or mums groups)</p>	<p>earliest help and EH provision which is sensitive to and effectively meets the local needs (for example, a service targeted specifically at males or females)</p> <ul style="list-style-type: none"> • Through community capacity building and the partnership-led PBA, the sustainability of groups that work with and support males or females to prevent or identify / respond to needs early could be promoted. 	<p>engagement with some CYP&F;</p> <ul style="list-style-type: none"> • Lack of understanding of particular needs and existing support mechanisms for males or females that could prevent issues occurring or escalating; • Barriers to physical access to some local buildings, community resources, groups or commissioned provision depending on sex may limit access to prevention and earliest help; • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>adaptations made as necessary;</p> <ul style="list-style-type: none"> • Engagement with any relevant groups that work with, represent and/or support males or females in the development of the partnership-led PBA, digital solutions and proposals. • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; • An intelligence function includes insight (including trends) relevant to the needs of males or females in the local populations to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on the access and outcomes for males and females to identify potential barriers or issues and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further

				<p>understand potential impact.</p> <ul style="list-style-type: none"> Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<ul style="list-style-type: none"> Age 	<p>All ages – including CYP aged up to 25 years, adults and older people (whole family)</p> <p>Groups and organisations that represent, support and/or work with CYP&F of different age groups (e.g. Early Years)</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of CYP and also their family members of all ages by promoting prevention, earliest help and family based early help and effective commissioning; District access points as part of the partnership-led PBA could be adapted to meet local population needs and preferences depending on age (for example under 11s, teenagers, grandparents); Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is 	<ul style="list-style-type: none"> If district access points (including digital solutions) do not adapt to meet the local needs of CYP&F of different ages, accessibility may be limited for some CYP&F (for example older people that are carers for CYP in their family); Limited engagement with groups and organisations that work with and support CYP&F from different ages may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have the necessary skills to identify and take appropriate action in relation to meeting the needs of CYP&F from different ages (for 	<ul style="list-style-type: none"> Engagement with CYP&F and relevant groups that work with, represent and/or support CYP&F from all ages on the design and implementation of digital solutions; As part of local asset mapping, gather an understanding and strengthen links with relevant community groups and organisations; Engagement with local groups to promote effective prevention and early help for CYP&F from all to understand potential additional capacity building needs; An intelligence function includes insight (including trends) relevant to age ranges of local populations to enable effective partnership-led PBA, commissioning and delivery; Monitor the impact of the proposals on the access and outcomes for CYP&F from different age ranges and adapt

		<p>more sensitive to and effectively meets the needs relevant to CYP&F from different age ranges;</p> <ul style="list-style-type: none"> • Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support to CYP and/or their family members of all ages thereby improving outcomes and reducing the escalation of needs for families; • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support CYP&F of specific ages could be promoted (for example teenage parents, early years) • The voice of CYP of all ages to be promoted and enabled through the partnership-led PBA, commissioning and delivery. 	<p>example if they predominantly work with early years age group, teenagers or adults) to prevent needs escalating, deliver earliest help and EH;</p> <ul style="list-style-type: none"> • Agreement and alignment for the Integrated Child and Family Hub is not obtained from relevant Adult provision therefore limiting the potential for the Hub to be fully family focused; • Systems and processes in place are not all fully family focussed and therefore may not facilitate an Integrated Child and Family Hub (for example if there are separate processes to be followed for adult services). • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant).</p> <ul style="list-style-type: none"> • Appropriate learning, development and resources available for volunteers and staff members as required, to identify the needs of CYP&F from different ages and to work holistically with the whole family regardless of age; • Promote the voice of CYP&F of all ages in future developments, delivery and commissioning; • Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs; • Explore and co-design appropriate streamlined processes and systems to enable family key working in an Integrated Child and Family Hub to support family members of all ages. • Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further understand potential impact. • Continued commitment, communication and support by
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				<p>SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.</p>
<ul style="list-style-type: none"> Religion or Belief 	<p>CYP&F of all religious and philosophical beliefs (including lack of belief)</p> <p>Groups and organisations that represent, support and/or work with CYP&F of different religious or belief groups (e.g. Mosques, churches)</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of CYP and their family members regardless of their religious or philosophical beliefs (including lack of belief); Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is more sensitive to and effectively meets the needs relevant to CYP&F from religious and philosophical beliefs in the relevant population(s); The partnership-led PBA may help to foster good relations between CYP&F from different religious and philosophical beliefs through the promotion of community capacity 	<ul style="list-style-type: none"> If district access points are not sensitive to the religious and philosophical beliefs of the local population(s) they may limit accessibility for some CYP&F to access Earliest Help or EH; Limited engagement with groups and organisations that work with and support CYP&F of all religious beliefs in the local population(s) may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have the necessary skills and awareness to identify, work with and commission for CYP&F of all religious beliefs in the local population(s) therefore potentially reducing the positive benefits; 	<ul style="list-style-type: none"> Engagement with CYP&F and relevant groups that work with, represent and/or support CYP&F of religious beliefs in the local population(s) on the design and implementation of access points; As part of local asset mapping, gather an understanding and strengthen links with and between relevant religious and community groups and organisations; Engagement with local groups to promote effective prevention and early help for CYP&F from all religious beliefs to understand potential additional capacity building needs; An intelligence function includes insight (including trends) relevant to religious beliefs of local populations to enable effective partnership-led PBA, commissioning and delivery; Monitor the impact of the proposals on the access and outcomes for CYP&F of religious and adapt plans as necessary based on findings, to address any identified

		<p>and resilience.</p> <ul style="list-style-type: none"> Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support CYP&F from all religious and philosophical beliefs could be promoted. The voice of CYP&F from all religious and philosophical beliefs could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery. 	<ul style="list-style-type: none"> The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>disadvantage or under / over-representation (as relevant).</p> <ul style="list-style-type: none"> Appropriate learning, development and resources available for volunteers and staff members to identify the needs of CYP&F of religious beliefs and take appropriate action; Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further understand potential impact. Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<ul style="list-style-type: none"> Gender Reassignment 	<p>All CYP&F undergoing the process of transitioning from one gender to another; CYP&F whose gender identity does not correspond with the sex assigned at birth (whether or not they are transitioning); CYP&F who</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of all CYP and their family members in Staffordshire, including transgender people Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is 	<ul style="list-style-type: none"> Front doors and support may not be sensitive and adaptable to the needs of CYP&F undergoing the process of gender reassignment, therefore risking barriers to access and effective support. Limited engagement with groups and organisations that work with and support CYP&F that are undergoing the process of gender reassignment 	<ul style="list-style-type: none"> As part of the development of local front doors, a central front door and support consideration to be given locally and centrally to any adaptations required to promote access and effective support for transgender CYP&F Engagement with CYP&F and relevant groups that work with, represent and/or support transgender CYP&F on the design and implementation of digital solutions, access and support, as appropriate;

	<p>identify as 'trans' or 'transgender'</p> <p>Groups and organisations that represent, support and/or work with CYP&F undergoing the process of transitioning from one gender to another and / or identify as 'trans' or 'transgender' and / or whose gender identify does not correspond with the sex assigned at birth.</p>	<p>more sensitive to and effectively meets the needs relevant to transgender CYP&F</p> <ul style="list-style-type: none"> • Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support to transgender CYP&F , thereby improving outcomes and reducing the escalation of needs; • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support transgender CYP&F could be promoted. • The voice of transgender CYP&F could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery. 	<p>may limit the success of the partnership-led PBA to meet the needs of local populations;</p> <ul style="list-style-type: none"> • There is a risk that all volunteers and staff members do not have necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of CYP&F undergoing the process of gender reassignment to prevent needs escalating, deliver earliest help and EH. • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<ul style="list-style-type: none"> • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; • Engagement with any local groups to promote effective prevention and early help for transgender CYP&F to understand potential additional capacity building needs; • An intelligence function includes insight (including trends) relevant to gender reassignment to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on the access and outcomes for transgender CYP&F and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Appropriate learning, development and resources available for volunteers and staff members to identify the needs of transgender CYP&F and take appropriate action (e.g. signpost to relevant services or provide EH); • Further analysis is required on the current use of service users
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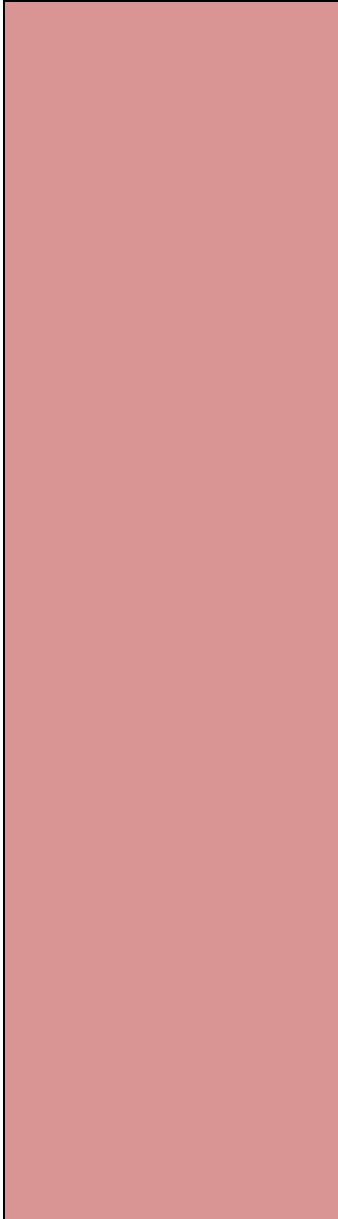
				<p>of EH by this protected characteristic (included at a local level) to further understand potential impact.</p> <ul style="list-style-type: none"> Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<ul style="list-style-type: none"> Sexual Orientation 	<p>Lesbian, gay and bisexual people and those questioning / exploring their sexual orientation.</p> <p>Groups and organisations that represent, support and/or work with LGBQ people.</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of CYP and their family members regardless of their sexual orientation; Local front doors and the central front door could be adapted and sensitive to meet the needs of LGBQ CYP&F ; Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is more sensitive to and effectively meets the needs relevant to LGBQ CYP&F; Taking a whole family, 	<ul style="list-style-type: none"> Front doors and support may not be sensitive and adaptable to the needs of LGBQ CYP&F , therefore risking barriers to access and effective support. Limited engagement with groups and organisations that work with and support LGBQCYP&F may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of LGBQ CYP&F to prevent needs escalating, deliver earliest help and EH. 	<ul style="list-style-type: none"> As part of the development of local front doors, a central front door and support consideration to be given locally and centrally to any adaptations required to promote access and effective support for LGBQCYP&F. Engagement with CYP&F and relevant groups that work with, represent and/or support LGBQ CYP&F on the design and implementation of digital solutions, access and support, as appropriate; As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; Engagement with any local groups to promote effective prevention and early help for LGBQ CYP&F to understand potential additional capacity

		<p>key worker approach to EH and CiN interventions could provide holistic IAG and support to LGBQ CYP and/or their family members thereby improving outcomes and reducing the escalation of needs;</p> <ul style="list-style-type: none"> • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support LGBQ CYP&F could be promoted. • The voice of LGBQ CYP&F could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery. 	<ul style="list-style-type: none"> • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>building needs;</p> <ul style="list-style-type: none"> • An intelligence function includes insight (including trends) relevant to sexual orientation to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on the access and outcomes for LGBQ CYP&F and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Appropriate learning, development and resources available for volunteers and staff members to identify the needs of LGBQ CYP&F and take appropriate action (e.g. signpost to relevant services or provide EH); • Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further understand potential impact. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
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<ul style="list-style-type: none"> Pregnancy and Maternity 	<p>YP and adults that are pregnant, expecting a baby and during the period following birth</p> <p>Groups and organisations that represent, support and/or work with YP and adults that are pregnant, expecting a baby and following birth (e.g. groups working with teenage parents)</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of CYP and their family members, including babies, people that are pregnant, expecting a baby and following birth, such as teenage parents, pregnant women that have previously had a child taken into care, women at risk of domestic abuse whilst pregnant or following the birth of their baby. Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is more sensitive to and effectively meets the needs of people that are pregnant, expecting a baby and following birth; Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support people that 	<ul style="list-style-type: none"> Front doors and support may not be sensitive and adaptable to the needs of people that are pregnant, expecting a baby or following birth, therefore risking barriers to access and effective support. Limited engagement with groups and organisations that work with and support people that are pregnant, expecting a baby or following birth may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have the necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of people who are pregnant, expecting a baby or following birth to prevent needs escalating, deliver earliest help and EH. The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, 	<ul style="list-style-type: none"> As part of the development of local front doors, a central front door and support consideration to be given locally and centrally to any adaptations required to promote access and effective support for people who are pregnant, expecting a baby or following birth. Engagement with people who are pregnant, expecting a baby or following birth and relevant groups that work with, represent and/or support them on the design and implementation of digital solutions, access and support, as appropriate; As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; Engagement with any local groups to promote effective prevention and early help for people who are pregnant, expecting a baby or following birth to understand potential additional capacity building needs; An intelligence function includes insight (including trends) relevant to those who are pregnant, expecting a baby or following birth to enable
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		<p>are pregnant, expecting a baby or following birth that are also in the household, thereby improving outcomes and reducing the escalation of needs;</p> <ul style="list-style-type: none"> • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support people that are pregnant, expecting a baby and following birth could be promoted. • The voice of people that are pregnant, expecting a baby and following birth of their child could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery. 	<p>therefore issues in relation to PBA may reduce the positive impact of the proposals.</p>	<p>effective partnership-led PBA, commissioning and delivery;</p> <ul style="list-style-type: none"> • Monitor the impact of the proposals on the access and outcomes for people who are pregnant, expecting a baby or following birth and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Appropriate learning, development and resources available for volunteers and staff members to identify the needs of people who are pregnant, expecting a baby or following birth and take appropriate action (e.g. signpost to relevant services or provide EH); • Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further understand potential impact. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.

<ul style="list-style-type: none"> Marriage and Civil Partnership The duty to have due regard to the need to eliminate discrimination also covers marriage and civil partnerships in relation to employment issues. 	<p>YP and parents/carers that are married or in a civil partnership.</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of all CYP and their family members, including young people and parents/carers that are married, in a civil partnership, single, cohabitating or other arrangements. Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is more sensitive to and effectively meets the needs of those that are married, in a civil partnership or other arrangement; Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support people that are married, in a civil partnership or other arrangement in the household, thereby improving outcomes and reducing the 	<ul style="list-style-type: none"> Front doors and support may not be sensitive and adaptable to the needs of young people and parents/carers that are married, in a civil partnership or another arrangement, therefore risking barriers to access and effective support. Limited engagement with groups and organisations that work with young people and parents/carers that are married, in a civil partnership or other arrangement may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have the necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of young people and parents/carers that are married, in a civil relationship or other arrangement prevent needs escalating, deliver earliest help and EH. 	<ul style="list-style-type: none"> As part of the development of local front doors, a central front door and support consideration to be given locally and centrally to any adaptations required to promote access and effective support for young people and parents/carers who are married, in a civil arrangement or other arrangement. Engagement with young people and parents/carers from differing relationship status including married, civil partnership and others on the design and implementation of digital solutions, access and support, as appropriate; As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; Engagement with any local groups to promote effective prevention and early help for young people and parents/carers that are married, in a civil partnership or other arrangement to understand potential additional capacity building needs; An intelligence function includes insight (including trends) relevant to those who are
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		<p>escalation of needs;</p> <ul style="list-style-type: none"> • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with young people and parents/carers that are married, in a civil partnership or other arrangement could be promoted. • The voice of young people and parents/carers that are married, in a civil partnership or another arrangement could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery. 	<ul style="list-style-type: none"> • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>married, in a civil partnership or other arrangement to enable effective partnership-led PBA, commissioning and delivery;</p> <ul style="list-style-type: none"> • Monitor the impact of the proposals on the access and outcomes for young people and parents/carers who are married, in a civil partnership or other arrangement and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Appropriate learning, development and resources available for volunteers and staff members to be sensitive to different marital and civil partnership arrangements and to signpost / take action as necessary to promote prevention, earliest help and Early Help. • Further analysis is required on the current use of service users of EH by this protected characteristic (included at a local level) to further understand potential impact. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to

Impact on SCC Staff If the proposal affects SCC staff, consider the workforce profile compared against the protected characteristics pre and post change, the impact of job losses, available support for staff, and HR protocols.	It is likely that groups of SCC employees with protected characteristics may be affected by the proposals, including the numbers and levels of posts within the organisation.	<ul style="list-style-type: none"> • Fit for the Future • Cost efficient • Staffing levels match Workload confirmed 	<ul style="list-style-type: none"> • Workload increasek 	<p>promote effective prevention and earliest help together.</p> <ul style="list-style-type: none"> • Consultation will take place with the Trade Unions and employees, at which time anticipated benefits, risks and mitigations for groups of SCC that may be impacted will be detailed (including details for the protected characteristics).
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Evidence Base: (Evidence used/ likelihood/ size of impact)

Key evidence used to support the above impact assessment (including demographic information) is available online via:

- Children's Story: Joint Strategic Needs Assessment, Staffordshire and Stoke-on-Trent, April 2017
<https://www.staffordshireobservatory.org.uk/documents/Health/JSNA/2017/Childrens-Joint-Strategic-Needs-Assessment-April-2017.pdf>
- Staffordshire's All Age Disability Strategy 2013 - 2018
https://consultation.staffordshire.gov.uk/social-care-and-health/allage_disabilitystrategy-2013-18/
- Commissioning for Children: A Summary of Insight, December 2015
<https://www.staffordshireobservatory.org.uk/documents/Updates/Commissioning-for-Children-A-Summary-of-Insight-FINAL-05.02.16.pdf>
- District Locality Profiles and the Staffordshire Profile, 2016
<https://www.staffordshireobservatory.org.uk/publications/thestaffordshirestory/LocalityProfiles.aspx#.WRxIN2wzX5p>
- Early Intervention Foundation, Spending on Late Intervention, February 2015
<http://www.eif.org.uk/wp-content/uploads/2015/08/SPENDING-ON-LATE-INTERVENTION.pdf>
- Feeling the Difference (Survey Wave 22), March 2017
<https://www.staffordshireobservatory.org.uk/PublicVoice/What-local-people-think.aspx#.WRxJE2wzX5o>
- Health and wellbeing outcomes and performance report for Staffordshire, February 2017
<https://www.staffordshireobservatory.org.uk/documents/Health/JSNA/2017/Health-and-Wellbeing-Outcomes-Report-February-2017.pdf>
- HM Government, Early Intervention: The Next Steps, January 2011
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/284086/early-intervention-next-steps2.pdf
- Improving Lives: Helping Workless Families

- <https://www.gov.uk/government/publications/improving-lives-helping-workless-families>
- Improving mental health and wellbeing outcomes in Staffordshire: an evidence base, June 2016
<https://www.staffordshireobservatory.org.uk/documents/Health/JSNA/Improving-mental-health-and-wellbeing-outcomes-in-Staffordshire-FINAL.pdf>
- Staffordshire and Stoke-on-Trent: Community Safety Strategic Assessment, March 2016
<https://www.staffordshireobservatory.org.uk/documents/Families-and-Communities/Communities/Staffordshire-Stoke-on-Trent-Community-Safety-Assessment-2016-FINAL.pdf>
- Staffordshire Census (Short Stories – including ‘ethnicity’, ‘employment’ and ‘health and wellbeing’), 2011
<https://www.staffordshireobservatory.org.uk/publications/thestaffordshirestory/ourpopulation/census/reports.aspx#.WRxKsGwzX5o>
- Staffordshire County Council, Best Start Consultation 2014 (Analysis of Results) (See Appendix B for Best Start)
<http://moderngov.staffordshire.gov.uk/ieListDocuments.aspx?CId=123&MId=5083&Ver=4>
- Staffordshire County Council, Children and Young People: A Profile of Risk and Harm in Staffordshire, 2014
[https://extranet.staffordshire.gov.uk/projects/cfc/Shared%20Documents/Insight/Insight%20-%20surveys/CYPAProfileofRiskandHarminStaffordshire2014%20\(3\).pdf](https://extranet.staffordshire.gov.uk/projects/cfc/Shared%20Documents/Insight/Insight%20-%20surveys/CYPAProfileofRiskandHarminStaffordshire2014%20(3).pdf)
- Staffordshire County Council, Early Years Performance Report, November 2016
<https://www.staffordshire.gov.uk/education/childcare/families/ccentres/data-and-information/EY-Performance-Report-2016.pdf>
- Staffordshire County Council, Leading for a Connected Staffordshire: Our Vision for 2014-2018
<https://www.staffordshire.gov.uk/yourcouncil/strategicplan/Strategic-Plan-2014-18.pdf>
- Staffordshire County Council, ‘What do you think...?’ Children & Young People’s Survey Results (Wave 1), 2013
<https://extranet.staffordshire.gov.uk/projects/cfc/Shared%20Documents/Insight/Insight%20-%20surveys/Results%20of%20CYP%20Survey%20Wave%201%202013.pdf>
- Staffordshire Health and Wellbeing Board, Living Well in Staffordshire, Keeping you well, Making life better – Our Five Year Plan 2013-2018
<https://www.staffordshirepartnership.org.uk/Health-and-Wellbeing-Board/Health-and-Wellbeing-Strategy-for-Staffordshire-Executive-Summary.pdf>
- Staffordshire Safeguarding Children Board (SSCB) Children, Young People and Families Early Help Strategy, 2015 to 2018
<https://www.staffsscb.org.uk/Professionals/Staffordshire-Early-Help-Strategy/FINAL-SSCB-Early-Help-Strategy-2015-2018.pdf>
- Staffordshire’s Children, Young People and Families Strategy, 2016-2026
<https://www.staffordshire.gov.uk/health/childrenandfamilycare/SCYPFS-FAMILY-STRATEGY-a4-LANDSCAPE-April-17.pdf>
- Support for Carers Phase 3 Report, December 2016
<http://healthwatchstaffordshire.co.uk/download/support-for-carers-phase-3/>
- Teenage Pregnancy: Briefing Note, April 2016
<https://www.staffordshireobservatory.org.uk/documents/Updates/Teenage-Pregnancy-in-Staffordshire-Briefing-Note-April-2016.pdf>
- The Story of Health & Care: Population Insights, February 2016
<https://www.staffordshireobservatory.org.uk/documents/Health/JSNA/2016/The-Story-of-Health-and-Care-in-Staffordshire-February-2016.pdf>

- The Story of Staffordshire, 2016
<https://www.staffordshireobservatory.org.uk/documents/StaffordshireStory/Story-of-Staffordshire-2016-Full-report-VERYFINAL.pdf>
- Additional engagement evidence is available in the Appendix.

The overall likelihood of the benefits being achieved is high, subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

The overall potential size of the impact is positive across all CYP&F in Staffordshire, as the transformation aims to promote positive outcomes for CYP&F and maximise the use of available resources, thereby encompassing CYP&F with all protected characteristics. This again is subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

Please note, additional CIAs may be required for detailed analysis of the above potential impacts for specific projects which form part of the wider transformation programme, as deemed necessary at a local and/or county footprint. The mitigations and recommendations to be turned into SMART actions forming part of future delivery plans, as appropriate.

Health and Care – Use this section to determine how the proposal will impact on resident’s health and wellbeing, and whether the proposal will impact on the demands for, or access to health and care services. Please consider the Care Act 2014 and the Health and Social Care Act 2012.

Category Area (Areas highlighted are suggestions only and there may be other impacts in these categories)	Which groups will be affected	Benefits	Risks	Mitigations / Recommendations
Mental Health and Wellbeing Will the proposal impact on the mental health and wellbeing of residents or services that support those with Mental Health	All CYP&F including CYP&F with mental health issues	<ul style="list-style-type: none"> • The proposals are intended to improve the outcomes of all CYP and their family members such as by addressing root causes at the earliest point 	<ul style="list-style-type: none"> • Local and a central front door and digital solutions may not be sensitive and adaptable to the needs of CYP&F with a mental health issue, therefore risking barriers to access 	<ul style="list-style-type: none"> • Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs in order for mental health issues to be addressed;

<p>issues?</p>		<p>which could include mental health needs, operating a family key worker Early Help approach to identify and support potential mental health needs within the family and effective commissioning.</p> <ul style="list-style-type: none"> • Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which is more sensitive to and effectively meets the needs of those with mental health needs and which also promotes the mental health of all CYP&F. • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with CYP&F to promote positive mental health and to support those with mental health issues could be promoted. • The voice of CYPY&F with mental health 	<p>and effective support.</p> <ul style="list-style-type: none"> • Limited engagement with groups and organisations that work with CYP&F with mental health issues may limit the success of the partnership-led PBA to meet the needs of local populations; • There is a risk that all volunteers and staff members do not have the necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of CYP&F with mental health issues to prevent needs escalating, deliver earliest help and EH. • There is a risk that specialist adult provision to address mental health issues is not available or has limited capacity within the Children and Families Hub if sufficient capacity is not secured. • Levels of mental health prevalence can vary slightly in different localities, therefore adding additional pressures to local provision; 	<ul style="list-style-type: none"> • As part of the development of local front doors, a central front door and support, consideration to be given locally and centrally to any adaptations required to promote access and effective support for CYP&F with mental health issues and to promote positive mental health. • Engagement with CYP&F with mental health issues on the design and implementation of digital solutions, access and support, as appropriate; • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; • Engagement with any local groups to promote effective prevention and early help for CYP&F with mental health issues to understand potential additional capacity building needs; • An intelligence function includes insight (including trends) relevant to CYP&F with mental health issues and the mental health of the local population to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the
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		<p>issues could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery.</p> <ul style="list-style-type: none"> • Access to specialist support including mental health within the Children and Families Hub. • A holistic, integrated approach could promote effective support for those families where the 'toxic trio' is present (i.e. mental health, domestic abuse and substance misuse) 	<ul style="list-style-type: none"> • CYP&F with mental health issues may not wish to engage with Earliest Help or Early Help, e.g. disclosing information or engaging with provision , which may result in issues escalating and requiring specialist input. • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>proposals on the access and outcomes for CYP&F with mental health issues and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant).</p> <ul style="list-style-type: none"> • Recognition and promotion of positive prevention and earliest help cases in relation to mental health, in order to share learning across communities and localities to promote maximum impact. • Appropriate learning, development and resources available for volunteers and staff members to be sensitive to the needs of CYP&F with mental health issues and to signpost / take action as necessary to promote prevention, earliest help and Early Help. • Further analysis is required on the current use of service users of EH with mental health issues (including at a local level) to further understand potential impact. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to
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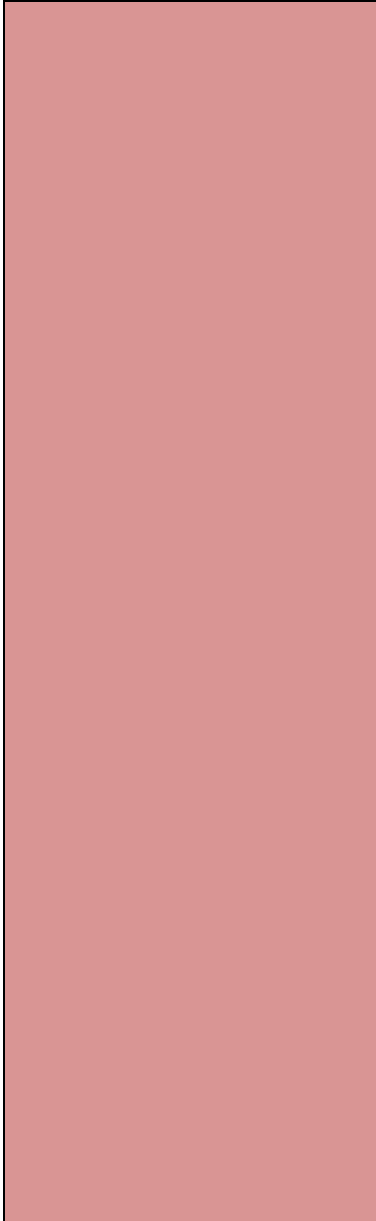
<p>Healthy Lifestyles Will the proposal promote independence and personal responsibility, helping people to make positive choices around physical activity, healthy food and nutrition, smoking, problematic alcohol and substance use, and sexual health?</p>	<p>All CYP&F (including CYP&F with needs or issues relating to their lifestyle (such as substance misuse, sexual health issues and obesity)</p>	<ul style="list-style-type: none"> • The proposals are intended to improve the outcomes of all CYP and their family members such as promotion of personal responsibility, resilience and healthy lifestyles and addressing root causes at the earliest point which could include for example substance misuse. Also by operating a family key worker Early Help approach to identify and support potential issues relating to lifestyles (such as healthy food and nutrition) the needs within the family can be addressed holistically. • Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision which effectively promotes healthy lifestyles. • Community capacity building and through the partnership-led PBA, the 	<ul style="list-style-type: none"> • Limited engagement with groups and organisations that work with CYP&F to support them with healthy lifestyle choices (for example in relation to physical activity) may limit the success of the partnership-led PBA to meet the needs of local populations; • There is a risk that all volunteers and staff members do not have the necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of CYP&F with issues relating to healthy lifestyles in order to prevent needs escalating, deliver earliest help and EH. • There is a risk that specialist adult provision to address substance misuse or other lifestyle related issues is not available or has limited capacity within the Children and Families Hub, if sufficient capacity is not secured. 	<p>promote effective prevention and earliest help together.</p> <ul style="list-style-type: none"> • Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs in order for healthy lifestyle issues to be addressed; • Engagement with CYP&F with healthy lifestyle issues (such as substance misuse) on the design and implementation of digital solutions, access and support, as appropriate; • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; • Engagement with any local groups to promote effective prevention and early help for CYP&F with issues relating to healthy lifestyles (such as in relation to sexual health) to understand potential additional capacity building needs; • An intelligence function includes insight (including trends) relevant to healthy lifestyles of CYP&F of the local population to enable effective partnership-led PBA, commissioning and delivery;
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		<p>sustainability of local groups and organisations that work with CYP&F to promote healthy lifestyles, personal responsibility and independence could be promoted.</p> <ul style="list-style-type: none"> • Access to specialist support within the Children and Families Hub (such as in relation to substance misuse) would promote integrated working and positive outcomes. • A holistic, integrated approach could promote effective support for those families where the ‘toxic trio’ is present (i.e. mental health, domestic abuse and substance misuse) • Digital solutions and front door access points (locally and centrally) aim to promote effective IAG and pathways which enable personal responsibility and resilience; • Clear referral pathways to accessing social care as necessary. 	<ul style="list-style-type: none"> • Issues in relation to healthy lifestyles may be more prevalent in different localities (for example Insight highlights ...) therefore adding additional pressures to local provision; • CYP&F with issues relating to healthy lifestyles may not wish to engage with Earliest Help or Early Help, e.g. disclosing information or engaging with provision, which may result in issues escalating and requiring specialist input. • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<ul style="list-style-type: none"> • Monitor the impact of the proposals on the access and outcomes for CYP&F with issues relating to healthy lifestyles and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Recognition and promotion of positive prevention and earliest help cases in relation to promotion of choice, resilience, responsibility and healthy lifestyles in order to share learning across communities and localities to promote maximum impact. • Appropriate learning, development and resources available for volunteers and staff members to be sensitive to the needs of CYP&F with issues relating to healthy lifestyles and to signpost / take action as necessary to promote prevention, earliest help and EH, including supporting culture change towards greater focus on personal responsibility, independence and resilience. • Further analysis is required on the current use of service users of EH with issues in relation to healthy lifestyles (including at a local level) to further
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				<p>understand potential impact.</p> <ul style="list-style-type: none"> Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<p>Accidents and Falls Prevention Does the proposal reduce or increase the risk of: falls in older people, childhood accidents, road accidents, or workplace accidents?</p>	N/A	N/A	N/A	N/A
<p>Access to Social Care Will the proposal enable people to access appropriate interventions at the right time?</p>	All CYP&F (including those with earliest help, early help and specialist support needs)	<ul style="list-style-type: none"> Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with CYP&F to promote prevention and earliest help could be promoted. A key intended benefit of the Children’s and Families Transformation proposals are to promote access to appropriate interventions at the right time for all CYP&F, where needs are met within their families and communities where safe 	<ul style="list-style-type: none"> Access to Tier 3 and Tier 4 specialist support would be via a single central front door, therefore issues in accessibility to this front door (for example due to protected criteria above such as a CYP&F with a sensory impairment or for CYP&F whose first language is not English) may result in some access to Early Help and Social Care being negatively impacted; There is a risk that all volunteers and staff members do not have the necessary skills and 	<ul style="list-style-type: none"> Engage with CYP&F and groups that represent CYP&F to understand any potential barriers to access of the central front door and monitor accessibility in order address any identified disadvantage or under / over-representation (as relevant). Promote access to the central front door to Tier 3 and Tier 4 across partners and with CYP&F to ensure accessibility. Engagement with CYP&F on the design and implementation of digital solutions, access and support, as appropriate; As part of local asset mapping, gather an understanding and

		<p>to do so, reducing the need for higher cost interventions.</p> <ul style="list-style-type: none"> • The proposals are intended to improve the outcomes of all CYP and their family members such as by addressing root causes at the earliest point and early identification. • Locality and countywide commissioning (including in partnership with others as appropriate) will use intelligence to understand population's need, the wider environment and evidence base to enable appropriate interventions and prevent issues presenting in the future; • CYP&F who would benefit from long term restorative intervention (limited level of support to sustain themselves in the community) would be identified and supported appropriately, aiming to promote positive outcomes and reduce repeated 	<p>awareness to identify and take appropriate action in relation to variety of needs and root causes across CYP&F to prevent needs escalating, deliver earliest help and EH.</p> <ul style="list-style-type: none"> • There is a risk that specialist adult provision to address support families through the Child and Family Hub may not be in place or be insufficient capacity to meet potential demand if capacity not secured. • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>strengthen links with and between any relevant community groups and organisations;</p> <ul style="list-style-type: none"> • Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs in order for an effective integrated hub model to be implemented and capacity secured. • An intelligence function includes insight (including trends) relevant to CYP&F at the cusp of care, repeated referrals to statutory services and further insight to support proactive support which reduces the need for statutory services and understands the needs and outcomes of CYP&F. • Monitor the impact of the proposals on the access and outcomes for CYP&F (including those that have accessed the statutory services), to address any identified disadvantage or under / over-representation (as relevant). • Appropriate learning, development and resources available for volunteers and staff members across the partnership-led PBA, Integrated Child and Family Hub,
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		<p>statutory interventions.</p> <ul style="list-style-type: none"> The proposals aim to support those CYP&F at the cusp of statutory services in order to reduce the number of CYP entering the statutory system; 		<p>commissioning and front doors.</p> <ul style="list-style-type: none"> Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<p>Independent Living Will the proposal impact on people’s ability to live independently in their own home, with care and support from family, friends, and the community?</p>	<p>All CYP&F</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of all CYP and their family members such as promotion of personal responsibility, resilience and healthy lifestyles and addressing root causes at the earliest point, with CYP&F being supported within their families and communities first where safe to do so. Locally based commissioning, through effective use of intelligence, could promote prevention and earliest help provision that promotes independent living, such as through support by the local community. Community capacity building and through the partnership-led PBA, the 	<ul style="list-style-type: none"> Limited engagement with groups and organisations that work with CYP&F in communities may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have the necessary skills and awareness to promote independent living (for example awareness of local assets to meet needs) in order to prevent needs escalating, deliver earliest help and EH. There is a risk that specialist adult provision to support independent living with care and support is not available or has limited capacity within the Children and Families Hub, if sufficient capacity is not secured. 	<ul style="list-style-type: none"> Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs to promote independent living. As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations that could enable care and support within the family and community; Recognition and promotion of positive prevention and earliest help cases in relation to promoting people’s ability to live independently, with care and support from their family and community in order to share learning across communities and localities to promote maximum impact. Appropriate learning, development and resources available for volunteers and staff members on promoting

		<p>sustainability of local groups and organisations that work with CYP&F to promote independent living and support within the family and community could be promoted.</p> <ul style="list-style-type: none"> • Community Capacity Workers and Community Network volunteers could promote increased prevention and earliest help support within the community for CYP&F, thereby improving independent living and outcomes. • Digital solutions for IAG and local front doors could promote support for CYP&F within their communities. • CYP&F who would benefit from long term restorative intervention (limited level of support to sustain themselves in the community) would be identified and supported appropriately, thereby promoting CYP to be supported within their family and community. 	<ul style="list-style-type: none"> • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>independent living.</p> <ul style="list-style-type: none"> • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together. • Engagement with CYP&F on the design and implementation of digital solutions, access and support, as appropriate;

		<ul style="list-style-type: none"> The proposals aim to support those CYP&F at the cusp of statutory services in order to reduce the number of CYP entering the statutory system therefore promoting care and support within the family and community. 		
<p>Safeguarding Will the proposal ensure effective safeguarding for the most vulnerable in our communities?</p>	<p>Vulnerable CYP</p>	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of CYP&F thereby reducing the need for access to statutory services, including safeguarding concerns or issues. CYP&F who would benefit from long term restorative intervention (limited level of support to sustain themselves in the community) would be identified and supported appropriately, to promote effective safeguarding of CYP. The proposals aim to support those CYP&F at the cusp of statutory services in order to reduce the number of CYP entering the statutory system 	<ul style="list-style-type: none"> Limited engagement with groups and organisations that work with CYP&F in communities may limit the success of the partnership-led PBA to meet the needs of local populations. There is a risk that all volunteers and staff members do not have the necessary skills and awareness to promote effective safeguarding of CYP. There is a risk that specialist adult provision to support independent living with care and support is not available or has limited capacity within the Children and Families Hub, if sufficient capacity is not secured. The successful 	<ul style="list-style-type: none"> Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs to promote independent living. Appropriate learning, development and resources available for volunteers and staff members on promoting safeguarding of CYP building on existing learning and development if/as necessary (for example linking with the SSCB on relevant safeguarding training if additional learning and development needs identified as the proposals develop). Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention

		<p>therefore promoting the safety and wellbeing of CYP.</p> <ul style="list-style-type: none"> • The Child and Family Hub (with a continuum between EH-CiN-CP) aims to promote safeguarding of CYP by enabling effective 'slide' down and 'slide' up between EH and CiN/CP. • Locally based and strategic commissioning can support the through effective use of intelligence to commission provision as necessary to prevent CYP&F entering the statutory services safely and safeguarding of the most vulnerable CYP. • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with CYP&F to promote safeguarding of CYP. • Access to specialist support within the Children and Families Hub (such as in relation to the toxic trio) would 	<p>implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals.</p>	<p>and earliest help together.</p> <ul style="list-style-type: none"> • Engagement with CYP&F on the design and implementation of digital solutions, access and support, as appropriate; • An intelligence function includes insight (including trends) relevant to CYP&F at the cusp of care, repeated referrals to statutory services and further insight to support safeguarding of CYP. • Monitor the impact of the proposals on the access and outcomes for CYP&F in relation to safeguarding, to address any identified disadvantage or under / over-representation (as relevant).

		promote support the effective safeguarding of CYP in the family and positive outcomes.		
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Evidence Base: (Evidence used/ likelihood/ size of impact)

Key evidence to support the above impact assessment (in addition to evidence previously cited in the PSED section) is available online via:

- Childhood Obesity: Briefing Note, February 2015
<https://www.staffordshireobservatory.org.uk/documents/Updates/Childhood-Obesity-briefing-February-2015.pdf>
- Healthy Life Expectancy: Briefing Note, March 2016
<https://www.staffordshireobservatory.org.uk/documents/Updates/Healthy-Life-Expectancy-HLE-March-2016.pdf>
- Infant and Perinatal Mortality: Briefing Note, June 2016
<https://www.staffordshireobservatory.org.uk/documents/Updates/Infant-Mortality-Briefing-Note-June-2016.pdf>
- Sexual Health and Wellbeing, April 2014
<https://www.staffordshireobservatory.org.uk/documents/Health/Sexual-Health-NA/Staffordshire-Sexual-Health-and-Wellbeing-Needs-Assessment-April-2014.pdf>
- Staffordshire and Stoke-on-Trent: Focus on Healthy Lifestyles – Diabetes Prevention, November 2015
<https://www.staffordshireobservatory.org.uk/documents/Health/JSNA/2016/Focus-on-Healthy-Lifestyles-Diabetes-Prevention-November-2015.pdf>
- Young People and Risk: Understanding Attitudes, Perceptions and Behaviours (Survey Report), February 2016
<https://www.staffordshireobservatory.org.uk/documents/Public-Voice/Young-People-and-Risk-Understanding-Attitudes-Perceptions-and-Behaviours-FINAL-MAY16.pdf>

The overall likelihood of the benefits being achieved is high, subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

The overall potential size of the impact is positive across all CYP&F in Staffordshire, though again is subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

Please note, additional CIAs may be required for detailed analysis of the above potential impacts for specific projects which form part of the wider transformation programme, as deemed necessary at a local and/or county footprint. The mitigations and recommendations to be turned

into SMART actions forming part of future delivery plans, as appropriate.

Economy – Use this section to determine how the proposal will impact on the economy of Staffordshire and the income of residents.

Category Area (Areas highlighted are suggestions only and there may be other impacts in these categories)	Which groups will be affected	Benefits	Risks	Mitigations / Recommendations
Economic Growth Will the proposal promote the county as a “go to” location for business, and make it easy for businesses to start up, innovate and expand?	N/A	N/A	N/A	N/A
Poverty and Income Will the proposal have an impact on income? Will it reduce the gap between high and low earners?	CYP&F	<ul style="list-style-type: none"> • Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support to CYP and/or their family members in relation to income and addressing poverty as a root cause of parental issues and impacts on CYP; • Community capacity and the partnership-led 	<ul style="list-style-type: none"> • Limited engagement with groups and organisations that work with CYP&F living in poverty or with issues in relation to income may limit the success of the partnership-led PBA to meet the needs of local populations; • There is a risk that all volunteers and staff members do not have the necessary skills and 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential impact further. • Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs in order for issues in relation to poverty and income to be addressed; • Engagement with CYP&F in areas of deprivation on the

		<p>PBA may support local initiatives to support CYP&F living in poverty, thereby promoting positive outcomes for CYP&F in local communities.</p> <ul style="list-style-type: none"> • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with CYP&F to promote positive outcomes in relation to poverty and income, could be promoted. • Access to specialist support within the Child and Family Hub could promote integrated working and positive outcomes in relation to poverty and income. 	<p>awareness to identify and take appropriate action in relation to meeting the needs of CYP&F living in poverty or with income issues to prevent needs escalating, deliver earliest help and EH.</p> <ul style="list-style-type: none"> • There is a risk that specialist support in relation to poverty and income is not available, subject to capacity. • Some localities have higher levels of deprivation and therefore there may be additional pressures to local provision to support these needs. • CYP&F with issues in relation to poverty or income may not wish to engage with Earliest Help or Early Help, e.g. disclosing information or engaging with provision, which may result in issues escalating and requiring specialist input. • The successful implementation of the proposal is closely linked to the success of 	<p>design and implementation of digital solutions, access and support, as appropriate;</p> <ul style="list-style-type: none"> • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; • Engagement with any local groups to promote effective prevention and early help for CYP&F with issues in relation to poverty or income to understand potential additional capacity building needs; • An intelligence function includes insight (including trends) relevant to CYP&F living in poverty or with issues in relation to income to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on the access and outcomes for CYP&F living in poverty or with issues in relation to income and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Recognition and promotion of positive prevention and earliest help cases in relation to
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			<p>the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals.</p>	<p>poverty and income, in order to share learning across communities and localities to promote maximum impact.</p> <ul style="list-style-type: none"> • Appropriate learning, development and resources available for volunteers and staff members to be sensitive to the needs of CYP&F with issues in relation to poverty and income and to signpost / take action as necessary to promote prevention, earliest help and Early Help. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<p>Workplace Health and Environments Will the proposal impact on working conditions and the health of Staffordshire’s workforce?</p>	<p>People, groups and organisations that work with CYP&F (volunteers and employees)</p>	<ul style="list-style-type: none"> • The proposals aim to build stronger partnerships across the Children’s workforce (public, private and voluntary), which will also promote positive outcomes for CYP&F and can support a positive, collaborative working environment. • Recognition of the role of community leaders, volunteers and the valuable contribution 	<ul style="list-style-type: none"> • Risk that community capacity building and collaboration between partners is not sufficient to not have a positive impact on workplace health and environment. • Risk that there may not be an appetite or other challenges that may prevent the potential benefits for workplace health and environments in the children and families 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential impact further. • Consideration could be recommended to local partnership groups leading the PBA in localities on the potential impact of the PBA on this category and local action plans adapted accordingly. • Continued commitment, communication and support by SCC to working with partners locally to support the

		<p>they make to the children and families system may also improve morale across the wider workforce.</p>	<p>system.</p> <ul style="list-style-type: none"> The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>partnership-led PBA and community capacity building, to promote collaboration.</p> <ul style="list-style-type: none"> As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations.
<p>Access to jobs/ Good quality jobs Will the proposal create the right conditions for increased employment in more and better jobs?</p>	<p>Adult Family Members</p>	<ul style="list-style-type: none"> Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support to family members in relation to accessing employment and training, addressing root causes of poverty and financial stress which can impact on CYP;;; Community capacity and the partnership-led PBA may support local initiatives to adult family members in accessing employment and training, thereby promoting positive outcomes for CYP&F in local communities. Community capacity building and through the partnership-led PBA, the sustainability of local 	<ul style="list-style-type: none"> Limited engagement with groups and organisations that work with adult family members on access to employment and training may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have the necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of family members with issues in relation to employment or skills to prevent needs escalating, deliver earliest help and EH. There is a risk that 	<ul style="list-style-type: none"> Further engagement and evidence gathering is required to understand and consider this potential impact further. Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs in order for issues in relation to employment and skills to be addressed; Engagement with families with issues in relation to employment and skills on the design and implementation of digital solutions, access and support, as appropriate; As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; Engagement with any local

		<p>groups and organisations that work with adult family members on access to employment and training, could be promoted.</p> <ul style="list-style-type: none"> • Access to specialist support within the Child and Family Hub could promote integrated working and positive outcomes in relation to employment and training. 	<p>specialist support in relation to employment and skills is not available, subject to capacity.</p> <ul style="list-style-type: none"> • Some localities have higher levels of issues in relation to unemployment and skills therefore there may be additional pressures to local provision to support these needs. • Family members with issues in relation to employment or skills may not wish to engage with Earliest Help or Early Help, e.g. disclosing information or engaging with provision, which may result in issues escalating and requiring specialist input. • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>groups to promote effective prevention and early help for CYP&F with issues in relation to employment and skills to understand potential additional capacity building needs;</p> <ul style="list-style-type: none"> • An intelligence function includes insight (including trends) relevant to employment and skills to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on the access and outcomes for families with issues in relation to employment or skills and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Recognition and promotion of positive prevention and earliest help cases in relation to employment and skills, in order to share learning across communities and localities to promote maximum impact. • Appropriate learning, development and resources available for volunteers and staff members to be sensitive to the needs of families with issues in relation to employment and skills and to
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				<p>signpost / take action as necessary to promote prevention, earliest help and Early Help.</p> <ul style="list-style-type: none"> Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
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Evidence Base: (Evidence used/ likelihood/ size of impact)

Key evidence to support the above impact assessment (in addition to evidence previously cited in the PSED section) is available online via:

- Staffordshire Rural Economy Evidence Base, July 2015
<https://www.staffordshire.gov.uk/environment/eLand/rural-development-team/Staffordshire-Rural-Economy-Evidence-Base.pdf>
- Summary of Child Poverty in Staffordshire, 2015
<https://www.staffordshireobservatory.org.uk/documents/ChildrenandYoungPeople/ChildPoverty/summaryofchildpovertyinstaffordshire2015v2.pdf>
- Unemployment Briefing, March 2017
<https://www.staffordshireobservatory.org.uk/documents/Economy/Unemployment/Unemployment-Briefing-Note---March-2017.pdf>

The overall likelihood of the benefits being achieved is high, subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

The overall potential size of the impact is positive for CYP&F in Staffordshire, again is subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

Please note, additional CIAs may be required for detailed analysis of the above potential impacts for specific projects which form part of the wider transformation programme, as deemed necessary at a local and/or county footprint. The mitigations and recommendations to be turned into SMART actions forming part of future delivery plans, as appropriate.

Environment – Use this section to identify the impact of the proposal on the physical environment. How does the proposal support the utilisation and maintenance of Staffordshire’s built and natural environments, thereby improving health and wellbeing and strengthening community assets?

Category Area (Areas highlighted are suggestions only and there may be other impacts in these categories)	Which groups will be affected	Benefits	Risks	Mitigations / Recommendations
Built Environment/ Land Use Will the proposal impact on the built environment and land use?	All CYP&F Voluntary, community and social enterprise organisations and other partners working with CYP&F	<ul style="list-style-type: none"> Potentially through community capacity building and the partnership-led PBA there may be greater use and sharing of local built environment assets, such as community centres by CYP&F, groups and communities and other partners. 	<ul style="list-style-type: none"> Risk that community capacity building and collaboration between partners is not sufficient to not have a positive impact on the use of built environment. 	<ul style="list-style-type: none"> Further engagement and evidence gathering is required to understand and consider this potential impact further. As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations.
Rural Environment Will the proposal impact on the rural natural environment or on access to open spaces?	All CYP&F Voluntary, community and social enterprise organisations and other partners working with CYP&F	<ul style="list-style-type: none"> Potentially through community capacity building and the partnership-led PBA there may be greater use of local assets such as parks, play areas, conservation areas and other rural environments by CYP&F, groups and communities. 	<ul style="list-style-type: none"> Risk that community capacity building and collaboration between partners is not sufficient to not have a positive impact on the use of the rural environment. 	<ul style="list-style-type: none"> Further engagement and evidence gathering is required to understand and consider this potential impact further. As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations.
Air, Water and Land	N/A	N/A	N/A	N/A

<p>Quality Will the proposal affect air quality (e.g. vehicle, industrial or domestic emissions), drinking water quality or land quality (e.g. contamination)?</p>				
<p>Waste and Recycling Will the proposal affect waste (e.g. disposal) and recycling?</p>	<p>Voluntary, community and social enterprise organisations and other partners working with CYP&F</p>	<ul style="list-style-type: none"> • Potentially through community capacity building, the partnership-led PBA and promoting the best use of total shared resources, there may be increased recycling and reuse of items for CYP&F and community use between partners. 	<ul style="list-style-type: none"> • Risk that community capacity building and collaboration between partners is not sufficient to not have a positive impact on recycling and/or reusing resources, as appropriate. 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential positive impact further.
<p>Agriculture and Food Production Will the proposal affect the production of healthy, affordable and culturally acceptable food?</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>
<p>Transport Will the proposal affect the ability of people/ communities/ business to travel? Will the proposal impact on walking/ cycling opportunities?</p>	<p>All CYP&F Voluntary, community and social enterprise organisations and other partners working with</p>	<ul style="list-style-type: none"> • Potentially through community capacity building and the partnership-led PBA and promoting greater access to support within local communities there may be a reduced requirement to travel further distances to access support. 	<ul style="list-style-type: none"> • Risk that community capacity building and collaboration between partners is not sufficient to not have a positive impact on the need to travel further to access support outside of the local community. • Risk that CYP&F in rural 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential impact further. • Consideration could be recommended to local partnership groups leading the PBA in localities on the potential impact of the PBA on this category and local action

	CYP&F		communities may not benefit on potential reduced travel to access support within their local communities as others.	<p>plans are adapted accordingly.</p> <ul style="list-style-type: none"> • Link with the SCC Rural Development Team on potential opportunities to support the community capacity building and partnership-led PBA within rural communities. • Consideration given to CYP&F and groups in rural settings when developing community capacity (such as by the Community Capacity Workers) and share learning between areas. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA and community capacity building, to promote collaboration. • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations.
<p>Noise Will the proposal cause disruptive noise?</p>	N/A	N/A	N/A	N/A

Evidence Base: (Evidence used/ likelihood/ size of impact)

Key evidence to support the above impact assessment (in addition to evidence previously cited in the PSED section) is available online via:

- Variety of online resources highlighting local community assets that can include assets within the built or rural environment (such as parks and play areas) are available from District and Borough Council websites (such as: <http://www.staffordbc.gov.uk/leisure>)
- Staffordshire Waste Partnership, 2013 Refresh of the Joint Municipal Waste Management Strategy (highlighting importance of reuse) <https://www.staffordshire.gov.uk/environment/rubbishwasteandrecycling/wastestrategy/2013-Refresh-Headline-Strategy.pdf>

The overall likelihood of the benefits being achieved is medium as further evidence is required to understand the potential impact further and the potential benefits rely on effective community capacity building and partnership-led PBA. Benefits are subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

The overall potential size of the impact is medium again as further evidence is required to understand the potential impact further. This again is subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

Please note, additional CIAs may be required for detailed analysis of the above potential impacts for specific projects which form part of the wider transformation programme, as deemed necessary at a local and/or county footprint. The mitigations and recommendations to be turned into SMART actions forming part of future delivery plans, as appropriate.

The overall likelihood of the benefits being achieved is medium as further evidence is required to understand the potential impact further and the potential benefits rely on effective community capacity building and partnership-led PBA. Benefits are subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

The overall potential size of the impact is medium again as further evidence is required to understand the potential impact further. This again is subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

Please note, additional CIAs may be required for detailed analysis of the above potential impacts for specific projects which form part of the wider transformation programme, as deemed necessary at a local and/or county footprint. The mitigations and recommendations to be turned into SMART actions forming part of future delivery plans, as appropriate.

Localities / Communities – Use this section to identify the impact of the proposal on communities. How will the proposal strengthen community capacity to create safer and stronger communities? It is important to recognise the different localities and communities your proposal may impact upon, and identify any communities that could be more adversely impacted than others. District Commissioning Leads (DCL’s) have a great deal of knowledge about their relevant locality and they must be engaged with as part of your Project Team at an early stage of the process.

Category Area (Areas highlighted are suggestions only and there may be other impacts in these categories)	Which groups will be affected	Benefits	Risks	Mitigations / Recommendations
Community Development/ Capacity Will the proposal affect opportunities to work with communities and strengthen or reduce community capacity?	All Staffordshire communities	<ul style="list-style-type: none"> The proposals are intended to improve the outcomes of all CYP and their family members including through effective community capacity, partnership-led PBA, Community Capacity Workers and Community Network volunteers. Locally based commissioning, through effective use of intelligence, could 	<ul style="list-style-type: none"> Limited engagement with groups and organisations that work with CYP&F in communities may limit the success of the partnership-led PBA to meet the needs of local populations; There is a risk that all volunteers and staff members do not have the necessary skills and awareness to promote the use of local assets within the community 	<ul style="list-style-type: none"> As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations that support CYP&F. Recognition and promotion of positive prevention and earliest help cases in relation to strengthening community capacity in order to share learning across communities and localities to promote maximum impact.

		<p>strengthen communities' capacity.</p> <ul style="list-style-type: none"> • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with CYP&F could be promoted. • Community Capacity Workers and Community Network volunteers could promote increased prevention and earliest help support within the community for CYP&F, thereby improving outcomes. • Digital solutions for IAG and local front doors could promote support for CYP&F within their communities. 	<p>(such as signposting to other groups or provision), in order to prevent needs escalating, deliver earliest help and EH.</p> <ul style="list-style-type: none"> • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. • The needs of communities to support capacity building and the partnership-led PBA may vary, therefore there is a risk that not adapting to the needs of communities may not strengthen the capacity to the full potential. 	<ul style="list-style-type: none"> • Appropriate learning, development and resources available for volunteers and staff members on available local assets. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together. • Engagement with representatives from communities in order to understand potential specific needs alongside the use of relevant intelligence (such as local profiles).
<p>Crime/ Community Safety Will the proposal support a joint approach to responding to crime and addressing the causes of crime?</p>	<p>CYP&F in Staffordshire (including those at risk of crime, ex-offenders, victims of crime)</p> <p>Groups that work with</p>	<ul style="list-style-type: none"> • The proposals are intended to improve the outcomes of all CYP&F and communities, including prevention of issues and earliest help (which could include risk factors related to safety and crime). • Locally based commissioning and 	<ul style="list-style-type: none"> • Limited engagement with groups and organisations that work with CYP&F in communities may limit the success of the partnership-led PBA to meet the needs of local populations and prevent and respond to crime and community safety. • There is a risk that all 	<ul style="list-style-type: none"> • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations that support CYP&F. • Recognition and promotion of positive prevention and earliest help cases in relation to preventing, responding to and

	<p>CYP&F and communities to prevent crime and/or promote community safety, work with victims and/or perpetrators of crime and communities in relation to prevention</p>	<p>strategic commissioning, through effective use of intelligence, could strengthen the joint approach to prevent, respond and address the causes of crime.</p> <ul style="list-style-type: none"> • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with CYP&F and communities in relation to crime prevention, response and community safety may be promoted. • Digital solutions for IAG and local front doors could support prevention and earliest help in relation to crime and community safety. • CYP&F who would benefit from long term restorative intervention (limited level of support to sustain themselves in the community) would be identified and supported appropriately, to promote effective safeguarding of CYP and thereby promoting safety and wellbeing. 	<p>volunteers and staff members do not have the necessary skills and awareness to promote the use of local assets within the community (such as signposting to other groups or provision), in order to prevent crime, respond and address the causes of crime and promote community safety.</p> <ul style="list-style-type: none"> • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. • The needs of communities to support capacity building and the partnership-led PBA may vary, therefore there is a risk that not adapting to the needs of communities may not strengthen the capacity to the full potential and therefore may not prevent and respond to crime and community safety to the potential. 	<p>addressing crime and community safety in order to share learning across communities and localities to promote maximum impact.</p> <ul style="list-style-type: none"> • Appropriate learning, development and resources available for volunteers and staff members on crime and community safety to promote prevention, earliest help and EH. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together. • Engagement with representatives from communities in order to understand potential specific needs alongside the use of relevant intelligence (such as local profiles).
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		<ul style="list-style-type: none"> • The proposals aim to support those CYP&F at the cusp of statutory services in order to reduce the number of CYP entering the statutory system therefore promoting the safety and wellbeing of CYP. • The Child and Family Hub (with a continuum between EH-CiN-CP) aims to promote safeguarding of CYP by enabling effective 'slide' down and 'slide' up between EH and CiN/CP. • A holistic, integrated approach could promote effective support for those families where the 'toxic trio' is present (i.e. mental health, domestic abuse and substance misuse) 		
<p>Educational Attainment and Training Will the proposal support school improvement and help to provide access to a good education? Will the proposal support the improved supply of skills to employers and the employability of</p>	<p>CYP&F in Staffordshire People, groups and organisations that work with CYP&F (volunteers and employees)</p>	<ul style="list-style-type: none"> • The proposals aim to promote positive outcomes for all CYP&F in Staffordshire by addressing root causes of issues, including in relation to education (such as absence) through community capacity building, the partnership-led PBA, 	<ul style="list-style-type: none"> • Limited engagement with groups and organisations that work with CYP&F on access to learning and training opportunities may limit the success of the partnership-led PBA to meet the needs of local populations; • There is a risk that all volunteers and staff 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential impact further. • Engagement with leaders and representatives from relevant adult services on the proposals, co-development of Integrated Child and Family Hubs in order for issues in relation to education and skills to be

<p>residents?</p>	<p>and potential volunteers and employees</p>	<p>effective local and county commissioning and service delivery.</p> <ul style="list-style-type: none"> Improving community capacity and the partnership PBA could awareness of, capacity and sustainability of groups and organisations that could support CYP&F in the family and community, which may be beneficial to schools and educational establishments. Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support to YP and family members in relation to accessing learning and training, thereby improving outcomes and reducing the escalation of needs; Community capacity and the partnership-led PBA may support local initiatives to YP and adult family members in accessing learning and training, thereby promoting positive outcomes for CYP&F in local communities. 	<p>members do not have the necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of CYP&F in relation to education, learning and training needs, to prevent needs escalating, deliver earliest help and EH.</p> <ul style="list-style-type: none"> There is a risk that specialist support in relation to education, training and skills is not available, subject to capacity. Some localities have higher levels of issues in relation to education and training (for example school attendance) therefore there may be additional pressures to local provision to support these needs. Family members with issues in relation to learning or skills may not wish to engage with Earliest Help or Early Help, e.g. disclosing information or engaging with provision, which may result in issues escalating and requiring specialist 	<p>addressed;</p> <ul style="list-style-type: none"> Engagement with families with issues in relation to education, training and skills on the design and implementation of digital solutions, access and support, as appropriate; As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations; Engagement with any local groups and organisations (e.g. schools) to promote effective prevention and early help for CYP&F with issues in relation to education, training and skills to understand potential additional capacity building needs; An intelligence function includes insight (including trends) relevant to education, training and skills to enable effective partnership-led PBA, commissioning and delivery; Monitor the impact of the proposals on the access and outcomes for families with issues in relation education and/or training and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as
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		<ul style="list-style-type: none"> • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with YP and adult family members on access to learning and training, could be promoted. • Access to specialist support within the Child and Family Hub could promote integrated working and positive outcomes in relation to training and skills. 	<p>input.</p> <ul style="list-style-type: none"> • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>relevant).</p> <ul style="list-style-type: none"> • Recognition and promotion of positive prevention and earliest help cases in relation to education, training and skills, in order to share learning across communities and localities to promote maximum impact. • Appropriate learning, development and resources available for volunteers and staff members to be sensitive to the needs of families with issues in relation to education, training and skills and to signpost / take action as necessary to promote prevention, earliest help and Early Help. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<p>Leisure and Culture Will the proposal encourage people to participate in social and leisure activities that they enjoy?</p>	<p>All CYP&F Voluntary, community and social enterprise organisations and other partners working with</p>	<ul style="list-style-type: none"> • Potentially through community capacity building and the partnership-led PBA there may be greater use of local assets in relation to social and leisure activities (such as community centres and sports clubs) by CYP&F, 	<ul style="list-style-type: none"> • Risk that community capacity building and collaboration between partners is not sufficient to not have a positive impact on the use of leisure, social and cultural activities. • Risk that there may not be an appetite or other 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential impact further. • Consideration could be recommended to local partnership groups leading the PBA in localities on the potential impact of the PBA on this category and local action

	<p>CYP&F in relation to social and leisure activities</p>	<p>groups and communities.</p> <ul style="list-style-type: none"> • Potentially through community capacity building and the partnership-led PBA and promoting the best use of total shared resources, there may be increased collaboration between partners in relation to social and leisure activities (for example to maximise use of available total resources). • Greater access to social and leisure activities, for example through prevention and earliest help may support the health and wellbeing of CYP&F (such as in relation to obesity and mental health) 	<p>challenges that may prevent an increased sharing of available resources between partners.</p>	<p>plans are adapted accordingly.</p> <ul style="list-style-type: none"> • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA and community capacity building, to promote collaboration. • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant groups and organisations (including those that support leisure, culture and social activities).
<p>Volunteering Will the proposal impact on opportunities for volunteering?</p>	<p>CYP&F in Staffordshire (including potential and current volunteers in the CYP&F system)</p> <p>Individuals in communities who may want to</p>	<ul style="list-style-type: none"> • Building community capacity and the partnership-led PBA could lead to further opportunities for volunteering in Staffordshire to support CYP&F; • Promoting community capacity and the partnership-led PBA could also support existing volunteers that 	<ul style="list-style-type: none"> • Limited engagement with groups and organisations that have or support volunteers may limit the success of the partnership-led PBA to meet the needs of local populations; • There is a risk that all volunteers do not have the necessary skills to provide support for CYP&F with a variety of 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential impact further. • Engagement with volunteers and also leaders and representatives from groups and organisations that have or support volunteers on the proposals and developments. • As part of local asset mapping, gather an understanding and strengthen links with and

	<p>volunteer</p> <p>Groups and organisations that work with CYP&F and communities that may currently or in the future have volunteers.</p>	<p>work with CYP&F, thereby promoting the sustainability of the volunteering opportunity and the group / organisation.</p> <ul style="list-style-type: none"> • Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support to family members in relation to accessing volunteering opportunities, thereby improving outcomes and reducing the escalation of needs and similarly building further community capacity; • Community capacity and the partnership-led PBA may support local initiatives to YP and adult family members in accessing volunteering opportunities, thereby promoting positive outcomes for CYP&F in local communities. • Locally based commissioning and strategic commissioning, through effective use of intelligence and investment in evidence based provision which is 	<p>earliest help needs in order to prevent needs escalating, deliver earliest help and EH.</p> <ul style="list-style-type: none"> • There may not be a sufficient appetite for community members to volunteer as part of the CYP&F system and/or there may be gaps in specific areas of the system (for example in relation to particular needs or issues). • There may also not be the appetite for groups and organisations working with CYP&F to widen their volunteer base (for example if there were concerns on volunteer management or training) to support effective community capacity building and the partnership-led PBA. • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>between any relevant community groups and organisations that have or would like to have volunteers to promote community capacity and volunteering opportunities.</p> <ul style="list-style-type: none"> • An intelligence function includes insight (including trends) relevant to volunteering within the CYP&F system to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on volunteering in Staffordshire and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Recognition and promotion of volunteering delivering positive outcomes for CYP&F, in order to share learning across communities and localities to promote maximum impact. • Appropriate learning, development and resources available for volunteers to signpost / take action as necessary to promote prevention, earliest help and Early Help. • Continued commitment, communication and support by SCC to working with partners
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		<p>tailored to localities needs could promote positive outcomes for CYP&F.</p> <ul style="list-style-type: none"> • Access to specialist support within the Child and Family Hub could promote integrated working and positive outcomes in relation to volunteering opportunities. • Potential for volunteers to support families in the longer term through slide down support from the Child and Family Hub. 		<p>locally to support the partnership-led PBA, to promote effective prevention and earliest help together.</p>
<p>Best Start Will the proposal impact on parental support (pre or postnatally), which helps to ensure that children are school-ready and have high aspirations, utilising a positive parenting approach?</p>	<p>YP and adults expecting a baby, pregnant and following birth during the early years (0-5 years)</p> <p>Children aged 0-5</p> <p>Groups and organisations that represent, support or work with the</p>	<ul style="list-style-type: none"> • The proposals are intended to improve the outcomes of CYP and their family members, including children during the early years, people that are pregnant, expecting a baby and following birth, such as teenage parents, pregnant women that have previously had a child taken into care, women at risk of domestic abuse whilst pregnant or following the birth of their child. • Locally based commissioning, through effective use of 	<ul style="list-style-type: none"> • Front doors and support may not be sensitive and adaptable to the needs of people that are pregnant, expecting a baby or following birth during early years, therefore risking barriers to access and effective support. • Limited engagement with groups and organisations that work with and support people that are pregnant, expecting a baby or following birth during the early years may limit the success of the partnership-led PBA to meet the needs of local populations; 	<ul style="list-style-type: none"> • As part of the development of local front doors, a central front door and support consideration to be given locally and centrally to any adaptations required to promote access and effective support for people who are pregnant, expecting a baby or following birth during the early years. • Engagement with people who are pregnant, expecting a baby or following birth during early years and relevant groups that work with, represent and/or support them on the design and implementation of digital solutions, access and support, as appropriate; • As part of local asset mapping,

	<p>above groups.</p>	<p>intelligence, could promote prevention and earliest help provision which is more sensitive to and effectively meets the needs of people that are pregnant, expecting a baby and during early years;</p> <ul style="list-style-type: none"> • Taking a whole family, key worker approach to EH and CiN interventions could provide IAG and support people that are pregnant, expecting a baby or following birth during the early years that are also in the household, thereby improving outcomes and reducing the escalation of needs; • Community capacity building and through the partnership-led PBA, the sustainability of local groups and organisations that work with and support people that are pregnant, expecting a baby and following birth during the early years could be promoted, for example parenting support, peer to peer support and supporting 	<ul style="list-style-type: none"> • There is a risk that all volunteers and staff members do not have the necessary skills and awareness to identify and take appropriate action in relation to meeting the needs of people who are pregnant, expecting a baby or following birth during the early years to prevent needs escalating, deliver earliest help and EH. • The successful implementation of the proposal is closely linked to the success of the partnership-led PBA, therefore issues in relation to PBA may reduce the positive impact of the proposals. 	<p>gather an understanding and strengthen links with and between any relevant community groups and organisations (such as in relation to children’s centres and parent groups);</p> <ul style="list-style-type: none"> • Engagement with any local groups to promote effective prevention and early help for people who are pregnant, expecting a baby or following birth during early years to understand potential additional capacity building needs; • An intelligence function includes insight (including trends) relevant to those who are pregnant, expecting a baby or following birth during early years to enable effective partnership-led PBA, commissioning and delivery; • Monitor the impact of the proposals on the access and outcomes for people who are pregnant, expecting a baby or following birth during early years and adapt plans as necessary based on findings, to address any identified disadvantage or under / over-representation (as relevant). • Appropriate learning, development and resources available for volunteers and

		<p>children to be ready for school.</p> <ul style="list-style-type: none"> • The voice of people that are pregnant, expecting a baby and following birth of their child could be promoted throughout the partnership-led PBA, local and county-wide commissioning and local system delivery. • Positive parenting could be promoted through the restorative intervention and cusp of statutory services in order to prevent issues escalating to statutory services. 		<p>staff members to identify the needs of people who are pregnant, expecting a baby or following birth during early years and take appropriate action (e.g. signpost to relevant services or provide EH);</p> <ul style="list-style-type: none"> • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA, to promote effective prevention and earliest help together.
<p>Rural Communities Will the proposal specifically impact on rural communities?</p>	<p>All CYP&F within rural communities</p> <p>Voluntary, community and social enterprise organisations and other partners working with CYP&F in rural communities</p>	<ul style="list-style-type: none"> • Potentially through community capacity building, the partnership-led PBA and promoting greater access to support within local communities there may be a reduced requirement to travel further distances to access support. 	<ul style="list-style-type: none"> • Risk that community capacity is not sufficient in rural communities to have a positive impact on CYP&F in the locality, therefore not reducing the risk of needs escalating, for example due to transport issues.. 	<ul style="list-style-type: none"> • Further engagement and evidence gathering is required to understand and consider this potential impact further. • Consideration could be recommended to local partnership groups leading the PBA in localities on the potential impact of the PBA on this category and local action plans are adapted accordingly. • Link with the SCC Rural Development Team on potential opportunities to support the community capacity building and partnership-led PBA within rural communities.

				<ul style="list-style-type: none"> • Consideration given to CYP&F and groups in rural settings when developing community capacity (such as by the Community Capacity Workers) and share learning between areas. • Continued commitment, communication and support by SCC to working with partners locally to support the partnership-led PBA and community capacity building, to promote collaboration. • As part of local asset mapping, gather an understanding and strengthen links with and between any relevant community groups and organisations.
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Evidence Base: (Evidence used/ likelihood/ size of impact)

Key evidence to support the above impact assessment (in addition to evidence previously cited in the PSED section) is available online via:

- Motivations and Barriers to Volunteering, UK Civil Society Almanac
<https://data.ncvo.org.uk/a/almanac17/motivations-and-barriers-to-volunteering-3/>
- Staffordshire County Council Education Annual Report, 2016 (Draft)
<http://moderngov.staffordshire.gov.uk/documents/s90358/Appendix%20A%20for%20School%20Attainment.pdf>
- Staffordshire County Council, Perceptions of Domestic Abuse Amongst Young People in Staffordshire: Consultation Report, January 2014
<https://extranet.staffordshire.gov.uk/projects/cfc/Shared%20Documents/Insight/Insight%20-%20surveys/Young%20People%20s%20Domestic%20Abuse%20Consultation%20Findings%20Final%20report.pdf>
- Staffordshire Rural Economy Evidence Base, July 2015
<https://www.staffordshire.gov.uk/environment/eLand/rural-development-team/Staffordshire-Rural-Economy-Evidence-Base.pdf>
- Strategic Community Safety Assessments by District, 2015
<https://www.staffordshireobservatory.org.uk/publications/families-and-communities/Communities/Communities.aspx#.WRxNDWwzX5o>

- Variety of online resources highlighting local community assets are available, such as from District and Borough Council websites (such as: <http://www.staffordbc.gov.uk/leisure>) and other online resources (such as: <http://southstaffordshire.thegoodlife.uk.net/>)
- Evidence continues to be gathered for ongoing district multi-agency pilot projects which explore and test different aspects of the CYP&F transformation approach, which informs the above impact assessment. Further details on local district pilot projects can be requested via the Staffordshire County Council District Commissioning Leads (districtcl@staffordshire.gov.uk). For example, a Staffordshire Moorlands early intervention pilot has found very encouraging feedback to date, in terms of families engaging at an early stage and not being referred elsewhere. A social action project is under development in the East Staffordshire district, with a particular focus on strengthening community capacity to self-help and utilising an asset based approach. An early intervention service has been developed in Cannock, which has helped to develop stronger partnerships and casework with families is ongoing.

The overall likelihood of the benefits being achieved is high, subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

The overall potential size of the impact is positive for CYP&F in Staffordshire, this again is subject to the necessary mitigations being undertaken in partnership with all relevant stakeholders, monitored and actions adapted as necessary to minimise or resolve potential risks.

Please note, additional CIAs may be required for detailed analysis of the above potential impacts for specific projects which form part of the wider transformation programme, as deemed necessary at a local and/or county footprint. The mitigations and recommendations to be turned into SMART actions forming part of future delivery plans, as appropriate.

Local Members' Interest
N/A

Safe and Strong Communities Select Committee – 13th July 2017

Children and Families System Transformation Programme

Recommendation

1. That the Committee reviews the progress and endorses the approach to the Pilots as part of the Model Implementation within the Children and Families System Transformation Programme.

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

Summary

What is the Select Committee being asked to do and why?

2. The Select Committee is asked to review the further progress of the Pilots and note the impact.
3. Comments from the Select Committee will be reported to the Programme Board and will inform the planning and management of the Pilots and the Place Based Approach to the transformation going forward.

Report

Background

4. The Children's and Families System Transformation Programme continues to address the challenges identified within the children's social care system and the broader children's system.
5. The 8 pilots were initiated at the beginning of the Children's and Families System Transformation with the purpose of testing different approaches to dealing with families and children who are presenting with low level issues.
6. Each of the pilots is being measured to test whether the different approach does mean that issues can be dealt with at a community level and therefore reduce demand into higher tiers of the system.
7. As part of the Children and Families system Transformation Programme, the pilots in eight districts have progressed to different extents.
8. In January 2017 the Committee was updated on the progress of each pilot project. A copy of this report is attached for reference.

9. Following the Select Committee, Members requested that a further progress report be provided in six months time and that this included more quantitative data where this is available.

Review of the pilot projects

Cannock

10. The Cannock pilot project has commissioned two providers, West Chadsmoor Family Centre (WCFC) and Community Engagement Support Services (CESS), to deliver a coordinated volunteer led universal and tier 2 family intervention service.
11. WCFC and CESS are now working with 23 families, of which four cases which were 'stepped down' from the Local Support Team (LST).
12. Data from WCFCs outcome stars (12 available out of 15) evidence that families outcomes are improving as a result of the intervention (see Appendix A).
13. In addition to this, the pilot has continued to work closely with the local schools in the area to develop a pathway for referrals and a seamless approach towards family interventions.
14. During this reporting period, there have been twenty three EHAs completed by other agencies and supported by CESS and WCFC. In October 2017 the contract to these providers is due for renewal. At this point we will have evidence of whether their interventions have reduced demand and improved outcomes.
15. During the last reporting period, the computer software package (UPSHOT) had been purchased to enable the providers to upload and record their data. All EHAs are now input onto UPSHOT and saved to Staffordshire County Council's (SCC) computer systems. This is improving the available data sets for Building Resilient Families and Communities (BRFC) and also information sharing between agencies, preventing duplication in assessments and providing more comprehensive background information on the family.
16. The Voluntary Community and Social Enterprise (VCSE) providers, S3, continue to support the Cannock pilot in the recruitment and retention of volunteers to help build a sustainable community.
17. Both providers have continued to promote their service offer and are currently working with Staffordshire University Academy, who have created a new Multi-Agency Centre (MAC) within this community.
18. The next period of activity will see;
 - a. Both providers continuing to support families who require universal or tier 2 level support.

- b. Networking meetings to increase awareness and referrals from providers including police, health visitors, housing and LST and this will continue with the support of S3.
- c. Work with S3 to identify and access appropriate funding opportunities.
- d. Work to evidence outcomes achieved for families and any reduction in demand into high tier services.

East Staffordshire

19. The East Staffordshire pilot is focused upon strengthening community assets and bringing together statutory, community and voluntary sector organisations to provide an effective and accessible 'touch point' for families.
20. During this reporting period, work has focused on those areas within Shobnall that are most in need and where the impact will be greatest.
21. The project steering group has set the following provisional priorities:
 - a. **Community safety and environmental improvement;** To include use of local parks and their development, supporting more non-commissioned groups in the area, improving children's play areas, and developing a programme of family events,
 - b. **Skills and Employment** – creating more adult learning opportunities within the area, and supporting adults to gain employment
 - c. **Improved community information**
22. Within this reporting period activity has focused on working closely with the local PCSO to improve the use of the park and reduce the number of ASB calls to police.
23. During this reporting period a data cleanse has taken place and the number of BRFC families out of work has increased from 12 to 33. These families will become a priority for adult learning and skills development opportunities within the next reporting period.
24. The pilot project team is working closely with the VCSE provider, SCVYS, and are currently mapping the non statutory provision available for children, young people and their families. This will form a sound basis for improved information, advice and guidance (IAG) within the community of Shobnall.
25. SCVYS/Support Staffordshire will also be working with ninety potential volunteers who have shown a willingness to become community champions and peer link workers.
26. Through the community workshops the pilot has raised awareness and promoted the Children's Centre Think2 offer. This has supported the increase in the Children's Centre reach which has increased to 69% (previously 43%) and the number of 'none take up families' accessing the Think 2 offer to 9 (previously 3). This has meant more families are now accessing universal support and this should prevent the need to access higher tier services in the future.

27. The pilot is also supporting the development of a Reaching Communities Fund bid. This has provided additional funding to enable third sector capacity to facilitate social action projects with residents. The third sector bid team are focussing on creating a Multi-Agency Centre (MAC). Work will begin with Anglesey Academy (primary) School and if successful it will extend to include all inner Burton schools including the four primaries in Shobnall.
28. There has also been successful implementation of the Arts Council England funded (ACE) Ready, Steady, Library project. This aims to increase the percentage of children accessing universal education provision, reduce referral rates to services and improve school readiness.
29. The project is co-creating resources to support the Early Years Foundation Stage Curriculum (EYFS), developing workshops for families to support use of the resources, training for library and early years staff to use the resources in libraries and early years settings and signposting parents to other education provision.
30. During the next phase, the pilot will;
 - a. Embed the Ready, Steady, Library project into the current work plan.
 - b. Establish links with the Parish Council to provide a key access point for local residents.
 - c. Support SCYVS to continue mapping the current provision, focusing upon potential gaps in service provision.
 - d. Work to evidence outcomes achieved for families and any reduction in demand into high tier services.

Lichfield

31. The Lichfield pilot is developing community based solutions to support families with children aged 0-5 years. These families have known low level risks factors and the pilot aims to reduce the number of families needing specialist services. The pilot is working in collaboration with SPARK Community Interest Company (CIC) and the Burntwood Childcare Hub.
32. The UPSHOT computer software has now been fully implemented and SPARK CIC has inputted two terms of family data. This has evidenced that more families are now accessing the SPARK centre and the reach of this pilot has extended to Cannock Chase. There has been a request to modify the software to enable information and data to be collated on lower super output areas (LSOAs). This will enable detailed needs analysis of 'hot spot' areas within LSOAs and for this data to complement the BRFC demand data- therefore providing a richer picture of predicted demand.
33. In addition to this, SCC have reimbursed SPARK CIC an incentive of £1,839.00 from the pilot fund for the summer/autumn term for the 613 session attendances by children who are potentially vulnerable and have not accessed the centre previously. The number of "Free Passes" has risen from 2 to 106 in this reporting period. The SPARK Card scheme which all families attending the centre now

have has been developed to prevent people feeling stigmatised by a 'free pass' which had been identified as a barrier to accessing the service.

34. 95 (37%) of the 260 unique children attending activities at the centre were "Free Pass" attendances and are therefore potentially vulnerable. They are accessing low level services and are therefore in a position to be supported earlier if necessary.
35. The early years reach has increased from 42.3% to 43.2%. Early years reach in the 0-30% wards has increased from 302 to 316 (number of families).
36. The children centre registrations have also increased from 983 to 1126 and EHA's are now being completed with a current figure of 165.
37. The pilot can evidence that more families are now accessing low level services than previously, and these families will be able to access support at much earlier stage to prevent any issues escalating into higher level services.
38. In the next reporting period the pilot will;
 - a. Continue to promote the SPARKs centre.
 - b. Explore additional funding bids via the Big Lottery.
 - c. Complete a detailed assessment of the full 2016/17 attendance data, by LSOA.

Newcastle

39. The pilot in Newcastle was focussed around the development of locally based intelligence function, the creation of a Tenshi Challenge to identify a solution and support for the Girl Power group, which supports young girls at risk of Child sexual Exploitation (CSE).
40. Work on the locally based intelligence function has now ceased. This is because it had become difficult to resolve issues relating to information sharing at a local level and the Tenshi Challenge did not provide an innovative solution. Therefore these issues are being progressed at a strategic level across the partnership.
41. The locality partnership within Newcastle have made the decision to focus on expanding and developing the Girl Power project which will now be jointly funded via the Borough Council and SCC as a more sustainable solution.
42. The Select Committee are asked to note that the Newcastle pilot has therefore ceased as part of the Children's Transformation Programme.
43. The contract to ARCH will be monitored through the contract monitoring process.

South Staffordshire

44. The South Staffordshire pilot has commissioned a tier two early help service to bridge the gap between school and community support to tackle root causes. This pilot has been supported by SCVYS.

45. This Early Help Service (EHS) is now operating at full capacity, engaging with 37 families with only 4 cases stepping up to LST. The available data from the outcome star evidences that at this point at least 50% of these families are showing good progress as a result of the intervention. 91% of families have rated their experience of the service as good or excellent and all four schools are satisfied with service provided. This indicates that the pilot is providing positive support and improving outcomes for families in need of early help. (See Appendix B).
46. The pilot will continue to work closely with schools around exclusion outcomes. Data will be submitted in the next reporting period to demonstrate impact.
47. The EHS has continued to promote its work and has engaged with eighteen additional organisations. The pilot is also supporting the Safer Schools Initiative, working with PCSOs to deliver junior cadets. The District Council have also provided additional support by ensuring transport links are available, village agents are part of the pilot and environmental issues are being addressed.
48. The pilot has reflected throughout its implementation and in the next reporting period will;
 - a. Training will be provided to upskill their staff and other partner organisations on working with low level neglect.
 - b. Work will focus upon evidencing the impact and effectively coordinating partners data.

Stafford

49. The Stafford pilot has implemented a MAC based in Stafford Manor and a community hub within Doxey Primary. The aim was to provide tier 2 support for children, young people and their families where no formal intervention was taking place.
50. The Stafford tier 2 provider has been supporting families who are currently open to the LST from Stafford Manor High School providing a step down service and seamless transition out of this higher tier service.
51. The evidence has demonstrated that since the MAC within Stafford Manor High became fully operational there have been 37 referrals into the service from February 2017. 16 of these referrals were reported as Earliest Help (tier 2 level), however 21 were reported as Early Help (Tier 3 level) being jointly worked with the LST and therefore there is duplication of resource.
52. We ask the Select Committee to note that it is therefore our recommendation moving forward that this pilot is either re-focussed or ceased.

Staffordshire Moorlands

53. The Staffordshire Moorlands pilot is working with Health Visitors, Nurseries and Schools in the Leek North area to identify families who are not in receipt of services, however, there are concerns that the families need may escalate.
54. The intention is to improve the outcomes and resilience of children, young people and their families and support their engagement with their local community. Visyon has been commissioned at £15,000 per annum for a two year period to work with a rolling programme of 20 families.
55. To ensure sufficient families engage with the pilot it has expanded to cover those families living in the Leek North ward and in nursery or school placements outside of the ward. The provider is, producing case study reports and ensuring that cases are closed and that where appropriate there is clear referral into other activity in the community.
56. Additionally to improve local referrals and to provide capacity to the aligned BRFC programme, a new worker has been recruited from Visyon who is co- located within the Family Intervention Project (FIP) team. This worker makes a direct link between the pilot and the BRFC programme and will be undertaking a detailed analysis of the pilot as part of the contractual arrangements.
57. Four schools are involved in the pilot from the Leek North area. As the pilot has now extended its reach the Visyon worker is also promoting it to other schools in Leek who have children with them from Leek North. Health Visitors are also now actively engaged.
58. Going forward this pilot needs to further evidence its need/impact within this community.
59. We recognise the success of the Food Cooperative Scheme in its own right and will suggest that is removed from the children's transformation pilot programme and the Partnership People Helping People Programme Board note the success of this model.

Tamworth

60. The Tamworth pilot has built on the existing foundations of the established MAC provision, commissioning a tier 2 family support service (Malachi). The service provides a dedicated worker who works with families from two high schools (Rawlett and Tamworth Enterprise College).
61. To date, there has been a reduction in the number of referrals to the LST from 61 to 42 as well as a decrease in the number of children that require statutory social care intervention from 71 to 49 for these two local areas.
62. Whilst the reduction in referrals cannot be attributed directly to the pilot as it is known other seasonal factors can affect referrals numbers, it is likely that these numbers would have been higher without the pilot in place. The number of

agencies accessing the MAC is 43 with the increased use of the MACs by young people rising to 228 from 215.

63. This pilot is currently working with 34 families. Outcome star data shows (8 who have had a review out of 18 families) that 75% have made good progress as a result of the intervention received from Malachi. (See appendix C).
64. Over the next reporting period Malachi will;
 - a. Continue to deliver a range of parenting programmes.
 - b. Work with families referred by the two schools, to address their needs at an earlier stage and prevent escalation into higher tier services.
 - c. Work on evidencing outcomes achieved by families and any reductions in the demand to higher tier services.

Next Steps

65. Work with the Strategic Delivery Managers and District Commissioning Officers and Partners to;
 - a. Obtain appropriate baseline data.
 - b. Create meaningful measures.
 - c. Refocus activity where appropriate.
 - d. Continue to draw lessons learned from the pilots.
66. Based on the evidence of this reporting period we are recommending to;
 - a. Cease pilot activity in Newcastle. Ensure the “Girl Power” activity is embedded within the wider Place Based Approach within Newcastle.
 - b. Work with the Stafford Partnership to either refocus or cease the pilot activity in Stafford.
 - c. Embed the learning from the Moorlands Food Cooperative Scheme into the People Helping People Board. Work with the Moorlands Partnership to determine the need/impact of the commissioned tier 2 service in the community.
 - d. Work with South Staffs, Cannock, Tamworth & East Staffs Partnerships to evidence outcomes achieved for families and impact of the pilots through the use of appropriate measures.
 - e. Work with Lichfield and Tamworth partnerships to scope the potential to roll out these ways of working, and scope which localities would most benefit from the approach.
 - f. Embed the meaning and understanding of ‘Earliest Help’ and ‘Early Help’ to empower partners to support families at the earliest opportunity without the need for a service led intervention.

67. Whilst it is recognised that there has been a clear progression in community understanding and support for the pilots we recognise the need to further develop the strength of the partnerships so that families' needs can be confidently met within the community, therefore reducing the need for service intervention.

Link to Other Overview and Scrutiny Activity

- a. Children, Young People and Families Transformation Programme – Safe and Strong Communities Select Committee – 8th June 2016
- b. C,Y,P&Fs Transformation Programme – Overview of Programmes Including the Vision Pilot – Safe and Strong Communities Select Committee – 8th July 2016
- c. Progress with the Children and Families Transformation Programme – Safe and Strong Select Committee – 12th December 2016
- d. Children and Families System Transformation Programme – 16th January 2017

Contact Officer

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Appendices/Background papers

Appendix A – Cannock Outcome Star Results.

Appendix B – South Staffs Outcome Star Results.

Appendix C – Tamworth Outcome Star Results.

Appendix D – Previous Pilot Report.

Cannock Pilot - WCFC

No. Service Users	7	
No. 1st Stars Completed	7	100%
No. with at least 1 reviewed Star	3	43%
No. with at least 2 reviewed Stars	2	29%
No. Stars Completed in Total	12	

How many first Stars were completed collaboratively?

Worker & Service User	7	100%
Worker Only	0	0%
Service User Only	0	0%

Overall change across all Star areas

Change Type	No.	%age
Negative	0	0.0%
No change (-0.25 or +0.25)	0	0.0%
Positive	3	100.0%
Total	3	100.0%

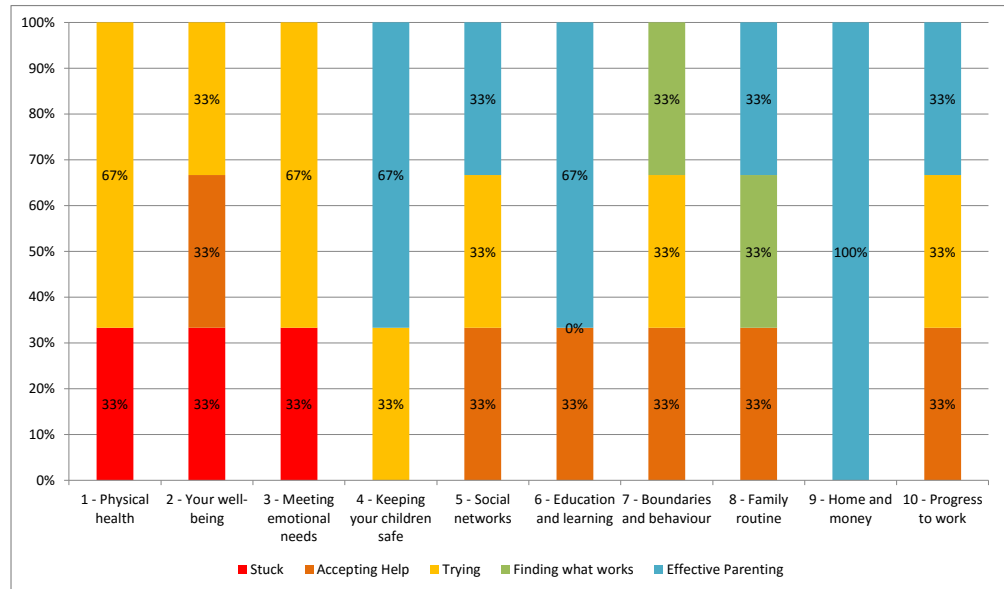
How were service users distributed across journey of changes stages on their first stars.

This is the number/percentage of service users at each journey of change stage for each area, based on initial star readings. Note - only families with at least one reviewed star included

Star Area	Stuck		Accepting Help		Trying		Finding what works		Effective Parenting	
	1	2	3	4	5	6	7	8	9	10
1 - Physical health	0	1	0	0	1	1	0	0	0	0
2 - Your well-being	0	1	0	1	1	0	0	0	0	0
3 - Meeting emotional needs	0	1	0	0	0	2	0	0	0	0
4 - Keeping your children safe	0	0	0	0	0	1	0	0	1	1
5 - Social networks	0	0	1	0	0	1	0	0	1	0
6 - Education and learning	0	0	0	1	0	0	0	0	1	1
7 - Boundaries and behaviour	0	0	1	0	1	0	1	0	0	0
8 - Family routine	0	0	1	0	0	0	0	1	1	0
9 - Home and money	0	0	0	0	0	0	0	0	1	2
10 - Progress to work	0	0	0	1	0	1	0	0	0	1

Star Area	Number of families				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	1	0	2	0	0
2 - Your well-being	1	1	1	0	0
3 - Meeting emotional needs	1	0	2	0	0
4 - Keeping your children safe	0	0	1	0	2
5 - Social networks	0	1	1	0	1
6 - Education and learning	0	1	0	0	2
7 - Boundaries and behaviour	0	1	1	1	0
8 - Family routine	0	1	0	1	1
9 - Home and money	0	0	0	0	3
10 - Progress to work	0	1	1	0	1

Star Area	Percentages				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	33%	0%	67%	0%	0%
2 - Your well-being	33%	33%	33%	0%	0%
3 - Meeting emotional needs	33%	0%	67%	0%	0%
4 - Keeping your children safe	0%	0%	33%	0%	67%
5 - Social networks	0%	33%	33%	0%	33%
6 - Education and learning	0%	33%	0%	0%	67%
7 - Boundaries and behaviour	0%	33%	33%	33%	0%
8 - Family routine	0%	33%	0%	33%	33%
9 - Home and money	0%	0%	0%	0%	100%
10 - Progress to work	0%	33%	33%	0%	33%



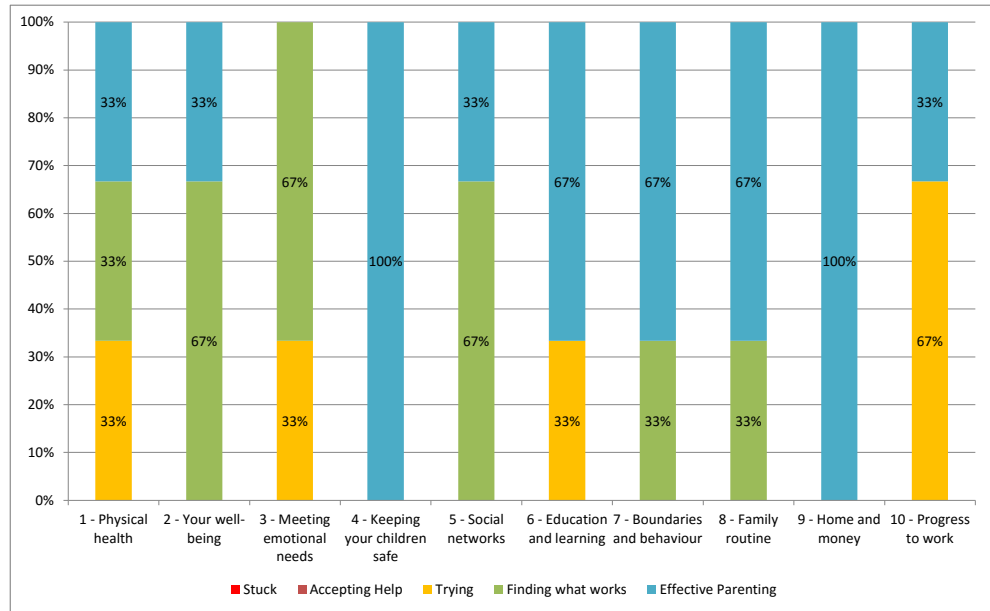
How were service users distributed across journey of changes stages on their most recent stars.

This is the number/percentage of service users at each journey of change stage for each area, based on the most recent star readings.

Star Area	Stuck		Accepting Help		Trying		Finding what works		Effective Parenting	
	1	2	3	4	5	6	7	8	9	10
1 - Physical health	0	0	0	0	1	0	0	1	1	0
2 - Your well-being	0	0	0	0	0	0	0	2	0	1
3 - Meeting emotional needs	0	0	0	0	1	0	0	2	0	0
4 - Keeping your children safe	0	0	0	0	0	0	0	0	2	1
5 - Social networks	0	0	0	0	0	0	1	1	0	1
6 - Education and learning	0	0	0	0	0	1	0	0	0	2
7 - Boundaries and behaviour	0	0	0	0	0	0	0	1	1	1
8 - Family routine	0	0	0	0	0	0	0	1	1	1
9 - Home and money	0	0	0	0	0	0	0	0	0	3
10 - Progress to work	0	0	0	0	1	1	0	0	0	1

Star Area	Number of families				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	0	0	1	1	1
2 - Your well-being	0	0	0	2	1
3 - Meeting emotional needs	0	0	1	2	0
4 - Keeping your children safe	0	0	0	0	3
5 - Social networks	0	0	0	2	1
6 - Education and learning	0	0	1	0	2
7 - Boundaries and behaviour	0	0	0	1	2
8 - Family routine	0	0	0	1	2
9 - Home and money	0	0	0	0	3
10 - Progress to work	0	0	2	0	1

Star Area	Percentages				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	0%	0%	33%	33%	33%
2 - Your well-being	0%	0%	0%	67%	33%
3 - Meeting emotional needs	0%	0%	33%	67%	0%
4 - Keeping your children safe	0%	0%	0%	0%	100%
5 - Social networks	0%	0%	0%	67%	33%
6 - Education and learning	0%	0%	33%	0%	67%
7 - Boundaries and behaviour	0%	0%	0%	33%	67%
8 - Family routine	0%	0%	0%	33%	67%
9 - Home and money	0%	0%	0%	0%	100%
10 - Progress to work	0%	0%	67%	0%	33%

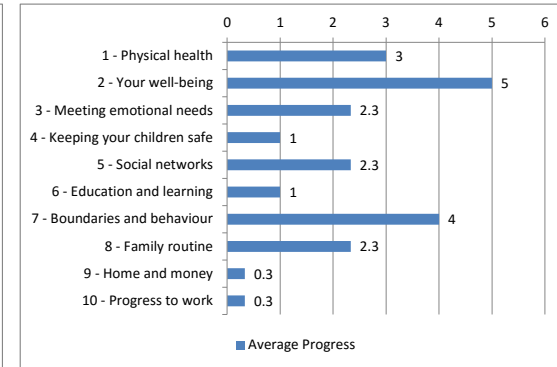
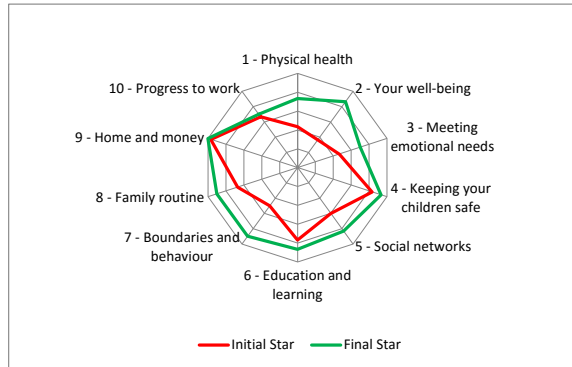


Star Charts showing mean first and second Star readings for all families with a first and second star

This shows the mean for the first and most recent Star.

It may only indicate small amounts of change as it may include service users who start at 10 and therefore cannot improve

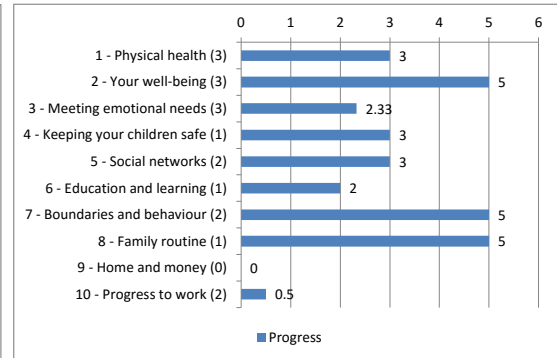
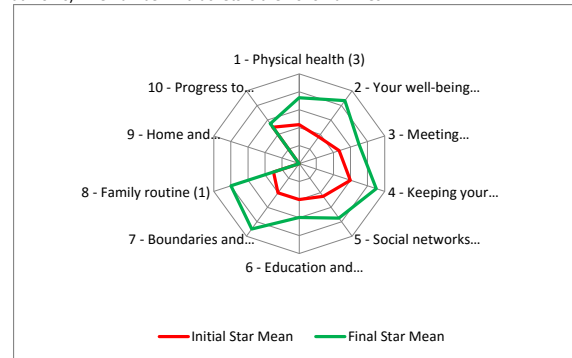
Star Area	Initial Star	Final Star	Average Progress
1 - Physical health	4.33	7.33	3
2 - Your well-being	3.67	8.67	5
3 - Meeting emotional needs	4.67	7.00	2.3
4 - Keeping your children safe	8.33	9.33	1
5 - Social networks	6.00	8.33	2.3
6 - Education and learning	7.67	8.67	1
7 - Boundaries and behaviour	5.00	9.00	4
8 - Family routine	6.67	9.00	2.3
9 - Home and money	9.67	10.00	0.3
10 - Progress to work	6.67	7.00	0.3



Star Charts showing mean first and second Star readings for those beginning at less than 7 (i.e.1-6)

This shows the means at the first and most recent Star for those beginning at 1-6 (i.e. not yet learning what works). The number in brackets is the no. of families.

Star Area	No. less than 7	Initial Star Mean	Final Star Mean	Progress
1 - Physical health (3)	3	4.33	7.33	3
2 - Your well-being (3)	3	3.67	8.67	5
3 - Meeting emotional needs (3)	3	4.67	7	2.33
4 - Keeping your children safe (1)	1	6	9	3
5 - Social networks (2)	2	4.5	7.5	3
6 - Education and learning (1)	1	4	6	2
7 - Boundaries and behaviour (2)	2	4	9	5
8 - Family routine (1)	1	3	8	5
9 - Home and money (0)	0	0	0	0
10 - Progress to work (2)	2	5	5.5	0.5



Data Source: Outcomes Star Online Reports (20/6/17)

Stephen Morgan
 BRFC Data Analyst
Stephen.Morgan@staffordshire.gov.uk
 01785 854147

South Staffs Pilot - SCTSP

No. Service Users	34	
No. 1st Stars Completed	34	100%
No. with at least 1 reviewed Star	24	71%
No. with at least 2 reviewed Stars	6	18%
No. Stars Completed in Total	81	

How many first Stars were completed collaboratively?

Worker & Service User	24	100%
Worker Only	0	0%
Service User Only	0	0%

Overall change across all Star areas

Change Type	No.	%age
Negative	5	20.8%
No change (-0.25 or +0.25)	7	29.2%
Positive	12	50.0%
Total	24	100.0%

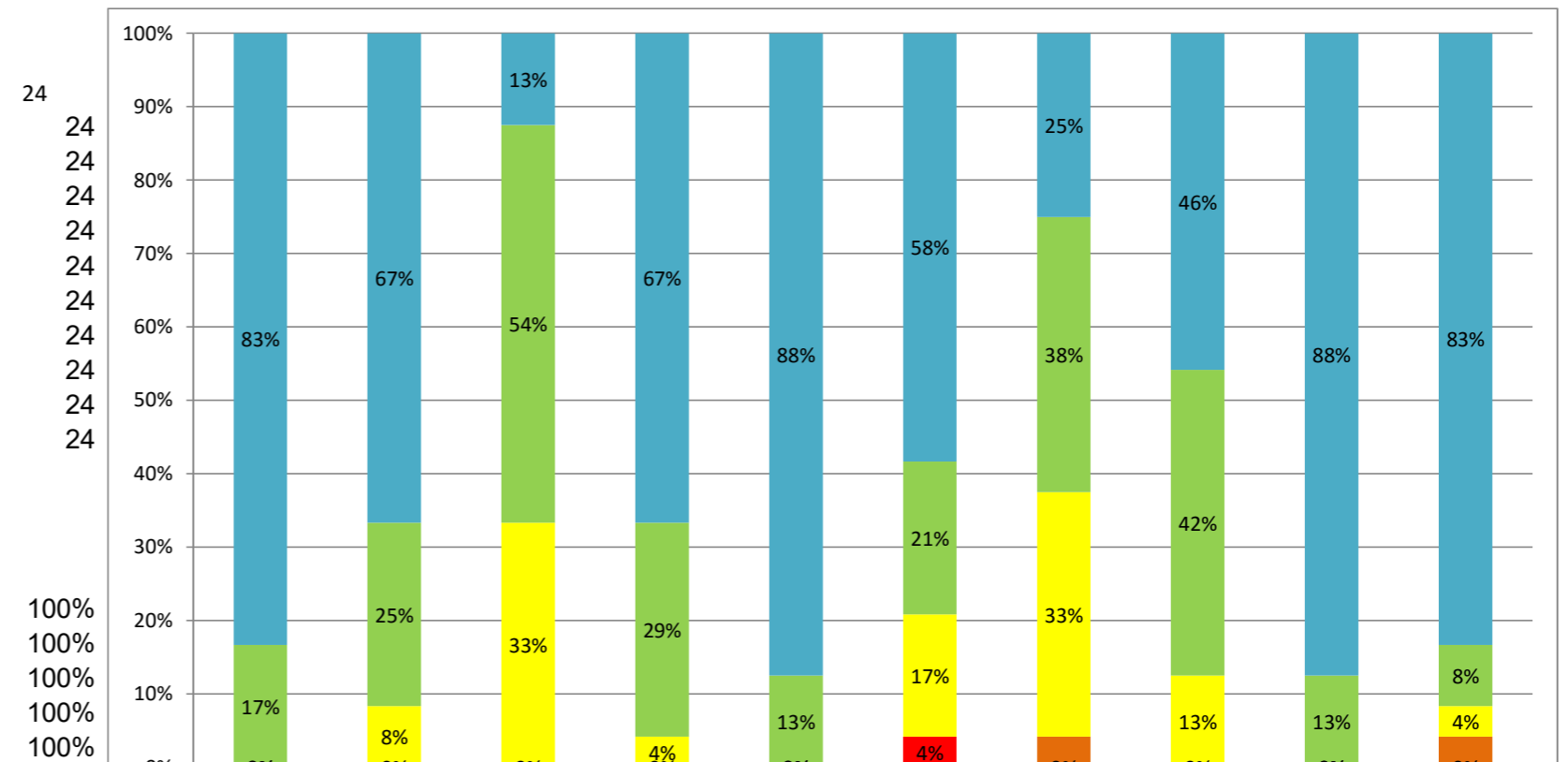
How were service users distributed across journey of changes stages on their first stars.

Star Area	Stuck		Accepting Help		Trying		Finding what works		Effective Parenting		
	1	2	3	4	5	6	7	8	9	10	
1 - Physical health							1	3	5	15	24
2 - Your well-being						2	3	3	2	14	24
3 - Meeting emotional needs					2	6	8	5	2	1	24
4 - Keeping your children safe						1	3	4	8	8	24
5 - Social networks							1	2	4	17	24
6 - Education and learning		1			3	1	2	3	3	11	24
7 - Boundaries and behaviour				1	1	7	7	2	2	4	24
8 - Family routine					1	2	3	7	1	10	24
9 - Home and money							1	2	4	17	24
10 - Progress to work				1		1	1	1	20		24

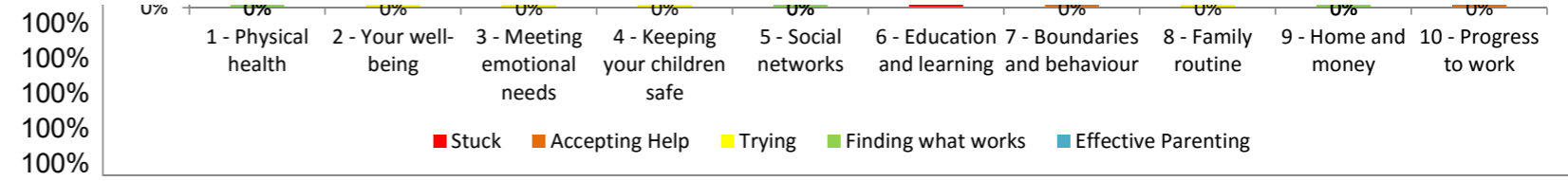
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Star Area	Number of families				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	0	0	0	4	20
2 - Your well-being	0	0	2	6	16
3 - Meeting emotional needs	0	0	8	13	3
4 - Keeping your children safe	0	0	1	7	16
5 - Social networks	0	0	0	3	21
6 - Education and learning	1	0	4	5	14
7 - Boundaries and behaviour	0	1	8	9	6
8 - Family routine	0	0	3	10	11
9 - Home and money	0	0	0	3	21
10 - Progress to work	0	1	1	2	20

Star Area	Percentages				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	0%	0%	0%	17%	83%
2 - Your well-being	0%	0%	8%	25%	67%
3 - Meeting emotional needs	0%	0%	33%	54%	13%
4 - Keeping your children safe	0%	0%	4%	29%	67%
5 - Social networks	0%	0%	0%	13%	88%



6 - Education and learning	4%	0%	17%	21%	58%
7 - Boundaries and behaviour	0%	4%	33%	38%	25%
8 - Family routine	0%	0%	13%	42%	46%
9 - Home and money	0%	0%	0%	13%	88%
10 - Progress to work	0%	4%	4%	8%	83%

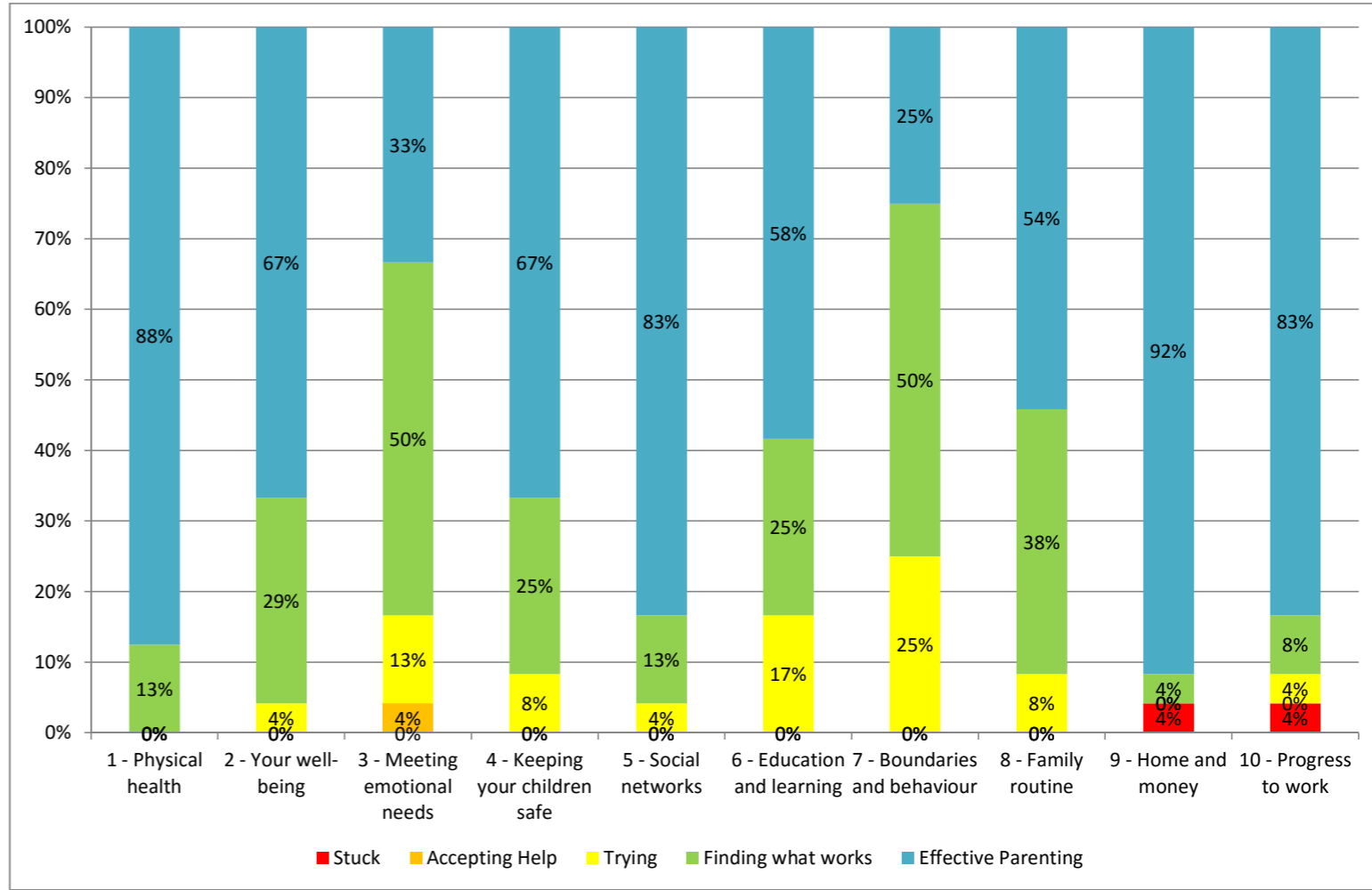


How were service users distributed across journey of changes stages on their most recent stars.

Star Area	Stuck		Accepting Help		Trying		Finding what works		Effective Parenting		
	1	2	3	4	5	6	7	8	9	10	
1 - Physical health							2	1	9	12	24
2 - Your well-being					1		2	5	6	10	24
3 - Meeting emotional needs				1		3	3	9	5	3	24
4 - Keeping your children safe						2	1	5	8	8	24
5 - Social networks						1	1	2	4	16	24
6 - Education and learning					3	1	4	2	6	8	24
7 - Boundaries and behaviour					2	4	2	10	1	5	24
8 - Family routine					1	1	3	6	5	8	24
9 - Home and money		1						1	5	17	24
10 - Progress to work		1				1	1	1	1	19	24

Star Area	Number of families				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	0	0	0	3	21
2 - Your well-being	0	0	1	7	16
3 - Meeting emotional needs	0	1	3	12	8
4 - Keeping your children safe	0	0	2	6	16
5 - Social networks	0	0	1	3	20
6 - Education and learning	0	0	4	6	14
7 - Boundaries and behaviour	0	0	6	12	6
8 - Family routine	0	0	2	9	13
9 - Home and money	1	0	0	1	22
10 - Progress to work	1	0	1	2	20

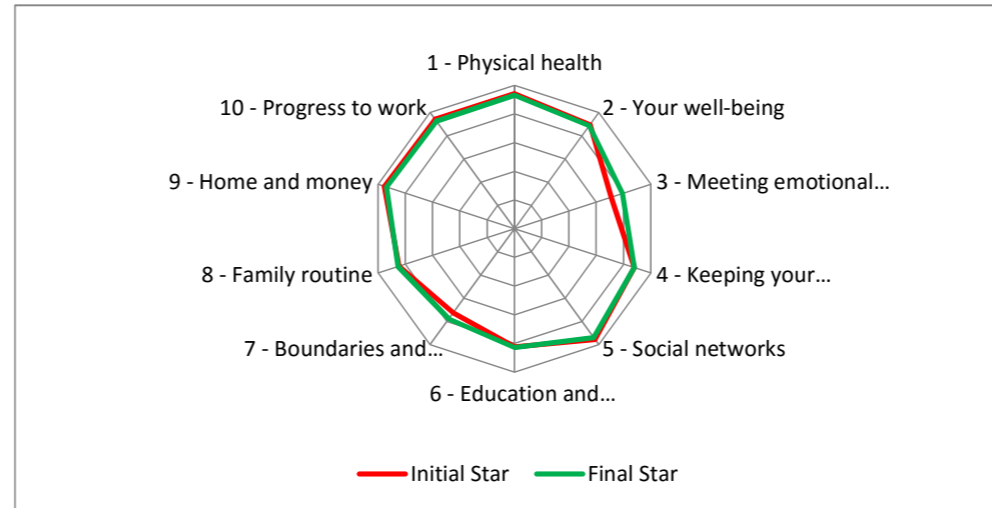
Star Area	Percentages				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	0%	0%	0%	13%	88%
2 - Your well-being	0%	0%	4%	29%	67%
3 - Meeting emotional needs	0%	4%	13%	50%	33%
4 - Keeping your children safe	0%	0%	8%	25%	67%
5 - Social networks	0%	0%	4%	13%	83%
6 - Education and learning	0%	0%	17%	25%	58%
7 - Boundaries and behaviour	0%	0%	25%	50%	25%
8 - Family routine	0%	0%	8%	38%	54%
9 - Home and money	4%	0%	0%	4%	92%
10 - Progress to work	4%	0%	4%	8%	83%



Star Charts showing mean first and second Star readings for all families with a first and second star

May only indicate small amounts of change as includes service users who start at 10 and cannot improve

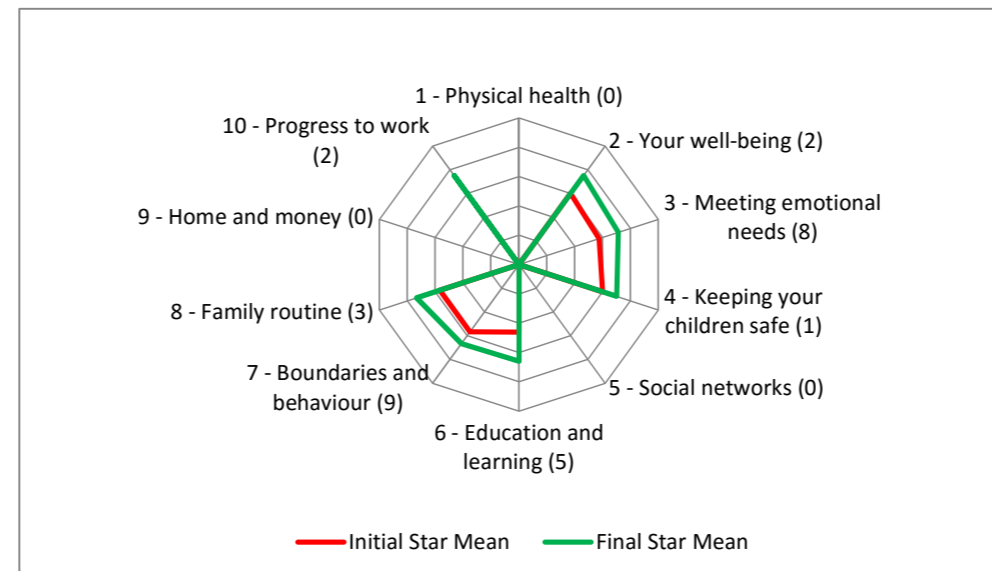
Star Area	Initial Star	Final Star	Average Progress
1 - Physical health	9.42	9.29	-0.1
2 - Your well-being	8.96	8.88	-0.1
3 - Meeting emotional needs	7.08	7.92	0.8
4 - Keeping your children safe	8.79	8.79	0.0
5 - Social networks	9.54	9.38	-0.2
6 - Education and learning	8.25	8.29	0.0
7 - Boundaries and behaviour	7.25	7.79	0.5
8 - Family routine	8.46	8.54	0.1
9 - Home and money	9.54	9.38	-0.2
10 - Progress to work	9.42	9.25	-0.2



Star Charts showing mean first and second Star readings for those beginning at less than 7 (i.e.1-6)

This shows the means at the first and final Star for those beginning (at 1-6). Number in brackets is the no. of families.

Star Area	No. less than 7	Initial Star Mean	Final Star Mean	Progress
1 - Physical health (0)	0	0.00	0.00	0
2 - Your well-being (2)	2	6.00	7.50	1.50
3 - Meeting emotional needs (8)	8	5.75	7.13	1.38
4 - Keeping your children safe (1)	1	6.00	7.00	1.00
5 - Social networks (0)	0	0.00	0.00	0.00
6 - Education and learning (5)	5	4.60	6.60	2.00
7 - Boundaries and behaviour (9)	9	5.67	6.67	1.00
8 - Family routine (3)	3	5.67	7.33	1.66
9 - Home and money (0)	0	0.00	0.00	0.00
10 - Progress to work (2)	2	5.00	7.50	2.50



Data Source: Outcomes Star Online Reports (21/6/17)

Stephen Morgan
 BRFC Data Analyst
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Tamworth Pilot - Malachi

No. Service Users	23				
No. 1st Stars Completed	18	78%			
No. with at least 1 reviewed Star	8	35%	or	44%	of those with a 1st Star Completed
No. with at least 2 reviewed Stars	1	4%	or	6%	of those with a 1st Star Completed
No. Stars Completed in Total	27				

How many first Stars were completed collaboratively?

Worker & Service User	15	83%
Worker Only	2	11%
Service User Only	1	6%

Overall change across all Star areas

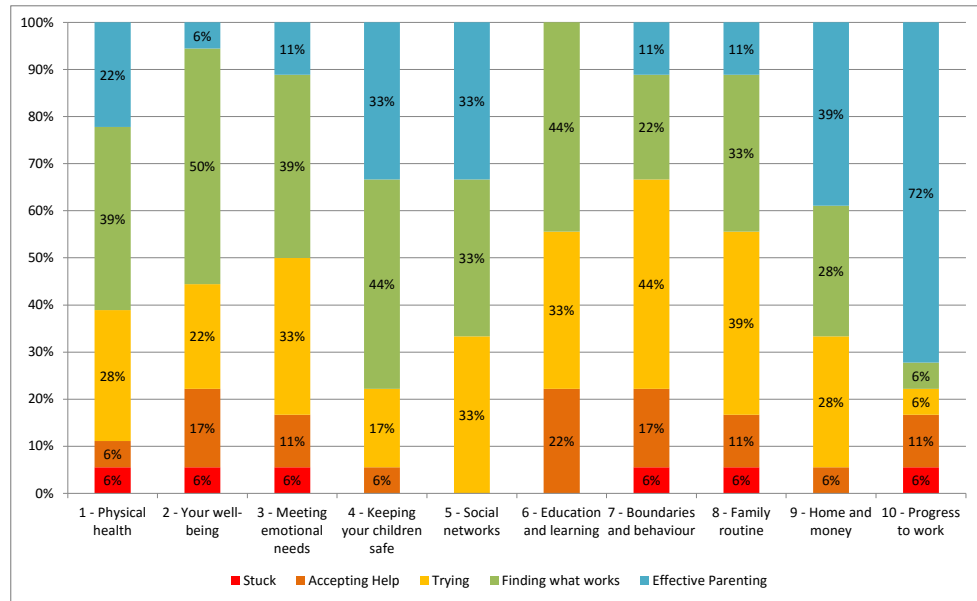
Change Type	No.	%age
Negative	2	25.0%
No change (-0.25 or +0.25)	0	0.0%
Positive	6	75.0%
Total	8	100.0%

How were service users distributed across journey of changes stages on their first stars.

Star Area	Stuck		Accepting Help		Trying		Finding what works		Effective Parenting	
	1	2	3	4	5	6	7	8	9	10
1 - Physical health	1	0	0	1	3	2	2	5	3	1
2 - Your well-being	1	0	0	3	2	2	6	3	1	0
3 - Meeting emotional needs	1	0	0	2	4	2	2	5	2	0
4 - Keeping your children safe	0	0	0	1	1	2	1	7	3	3
5 - Social networks	0	0	0	0	4	2	3	3	3	3
6 - Education and learning	0	0	0	4	4	2	6	2	0	0
7 - Boundaries and behaviour	1	0	1	2	6	2	2	2	1	1
8 - Family routine	1	0	0	2	3	4	2	4	2	0
9 - Home and money	0	0	0	1	3	2	4	1	1	6
10 - Progress to work	1	0	0	2	1	0	1	0	0	13

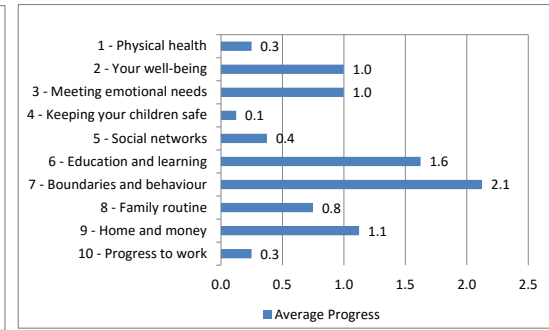
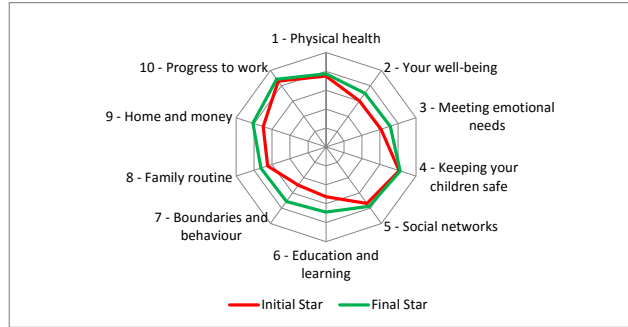
Star Area	Number of families				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	1	1	5	7	4
2 - Your well-being	1	3	4	9	1
3 - Meeting emotional needs	1	2	6	7	2
4 - Keeping your children safe	0	1	3	8	6
5 - Social networks	0	0	6	6	6
6 - Education and learning	0	4	6	8	0
7 - Boundaries and behaviour	1	3	8	4	2
8 - Family routine	1	2	7	6	2
9 - Home and money	0	1	5	5	7
10 - Progress to work	1	2	1	1	13

Star Area	Percentages				
	Stuck	Accepting Help	Trying	Finding what works	Effective Parenting
1 - Physical health	6%	6%	28%	39%	22%
2 - Your well-being	6%	17%	22%	50%	6%
3 - Meeting emotional needs	6%	11%	33%	39%	11%
4 - Keeping your children safe	0%	6%	17%	44%	33%
5 - Social networks	0%	0%	33%	33%	33%
6 - Education and learning	0%	22%	33%	44%	0%
7 - Boundaries and behaviour	6%	17%	44%	22%	11%
8 - Family routine	6%	11%	39%	33%	11%
9 - Home and money	0%	6%	28%	28%	39%
10 - Progress to work	6%	11%	6%	6%	72%



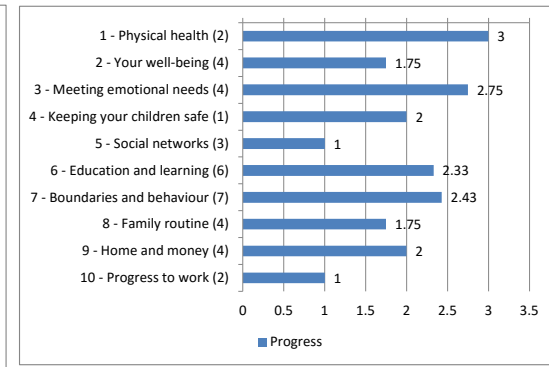
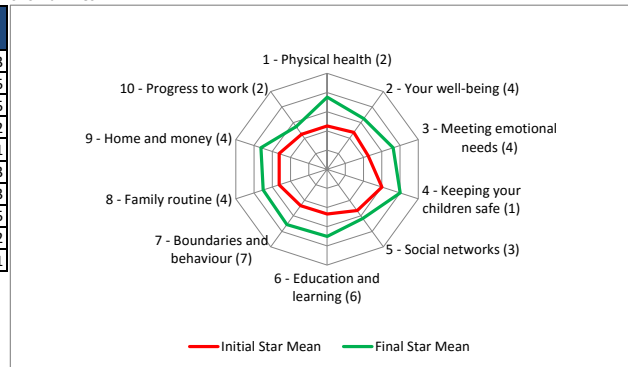
Star Charts showing mean first and second Star readings for all families with a first and second star
 May only indicate small amounts of change as includes service users who start at 10 and cannot improve

Star Area	Initial Star	Final Star	Average Progress
1 - Physical health	7.5	7.8	0.3
2 - Your well-being	6.0	7.0	1.0
3 - Meeting emotional needs	6.1	7.1	1.0
4 - Keeping your children safe	8.1	8.3	0.1
5 - Social networks	7.4	7.8	0.4
6 - Education and learning	5.3	6.9	1.6
7 - Boundaries and behaviour	5.0	7.1	2.1
8 - Family routine	6.5	7.3	0.8
9 - Home and money	7.0	8.1	1.1
10 - Progress to work	8.6	8.9	0.3



Star Charts showing mean first and second Star readings for those beginning at less than 7 (i.e.1-6)
 This shows the means at the first and final Star for those beginning (at 1-6). Number in brackets is the no. of families.

Star Area	No. less than 7	Initial Star Mean	Final Star Mean	Progress
1 - Physical health (2)	2	4.5	7.5	3
2 - Your well-being (4)	4	4.75	6.5	1.75
3 - Meeting emotional needs (4)	4	4.5	7.25	2.75
4 - Keeping your children safe (1)	1	6	8	2
5 - Social networks (3)	3	5.33	6.33	1
6 - Education and learning (6)	6	4.67	7	2.33
7 - Boundaries and behaviour (7)	7	4.71	7.14	2.43
8 - Family routine (4)	4	5.25	7	1.75
9 - Home and money (4)	4	5.25	7.25	2
10 - Progress to work (2)	2	4.5	5.5	1



Data Source: Outcomes Star Online Reports (12/6/17)

Local Members' Interest
N/A

Safe and Strong Communities Select Committee – Monday 16th January 2016

Children and Families System Transformation Programme

Recommendation

1. That the Committee reviews progress and endorses the approach to the Pilots which are part of the Model Implementation within the Children and Families System Transformation Programme.

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

Summary

What is the Select Committee being asked to do and why?

2. The Select Committee is asked to review the progress of the Pilots, and where appropriate, to note the impact and agree the next steps.
3. Comments of the Select Committee will be reported to the Programme Board and will inform the planning and management of the Pilots going forward.

Report

Background

4. The Children and Families System Transformation Programme continues to address the challenges identified within the children's social care system and the broader children's system. To achieve the benefits of demand reduction, improved outcomes for children and families, increased personal resilience and all available resources are fully utilised, a way forward has been agreed through the Families Strategic Partnership to implement the system transformation through a place-based approach, which is referred to later in the report.
5. Our goal is to create a new relationship between Staffordshire families and the organisations which support them. The aim is to create a balanced partnership where organisations help families and communities to build skills and confidence so that they can effectively support themselves and one another within their own community.
6. To help us achieve this goal, a number of pilots were initiated by the District Commissioning Leads, working locally with partners across Staffordshire to explore and test the delivery of different aspects of the Children's Transformation Model. Pilot activity has intentionally been developed on a small scale with the potential to expand providing there is sufficient evidence that the approach is delivering the intended aims and represents an effective use of resource.

7. Whilst not prescriptive the following criteria were provided as a framework for pilot design:

- a. Reduce demand in the system
- b. Adopt a family focused approach
- c. Tackle root causes
- d. Be built on intelligence of local need
- e. Build on existing community assets and capacity
- f. Be sustainable beyond initial funding
- g. Be co-designed and co-produced with partners in the district
- h. Create consistency in terms of how and where families access services
- i. Encourages the community to support the community
- j. Promote self-help and independence
- k. Involves the community/parents/children
- l. Support services and community working together at a local level

Place Based Approach

8. We have now started to model the next phase of the transformation, which will consider the future design of the children and families system from tier one through to tier four services within a given location, which will consider the existing pilot activity in an area. The place based approach has been described in detail in the paper to this committee in December 2016.

Review of the Pilot Projects

9. In July 2016 the Committee was updated on the current position of the pilots. The purpose of this report is to update on the progress since July 2016. Appendix A summarises the aims, activity and outcomes of each of the pilots to date.

Cannock

10. The Cannock pilot has been designed to deliver a coordinated community led family intervention service for children and families who require universal or Tier 2 interventions. The aim of the pilot is to facilitate the identification of children and families with low level needs and support them to utilise universal services and build resilience as a means of addressing 'root cause'. In turn this supports children and families when issues are arising to prevent escalation to Tier 3 services. The scope for the project has been developed through a collaborative approach with partners and subsequently there has been agreement to utilise Building Resilient Families and Communities (BRFC) district payment by results funding to extend contracts by a further 12 months, should the pilot prove successful.

11. Implementation of the Cannock pilot began in October 2016 when the providers were appointed their key workers. West Chadsmoor Family Centre (WCFC), based in Chadsmoor, has been commissioned to support 75 families in the Chadsmoor ward and Community Engagement Support Services (CESS) a Community Interest Company (CIC) has been commissioned to support 50 families in the Western Springs ward of Rugeley. The key workers have attended 'outcome star' training and one key worker has attended the key worker training. Both training courses are provided by Staffordshire County Council and enable the organisations to work within the BRFC model. The

outcome star training enables the key worker to visually capture the strengths and weaknesses of a family in their own words at the time of working and then after the intervention, to capture the progress made.

12. The computer software UPSHOT has been purchased enabling the providers to record their work. This system provides accurate data that can be shared with providers where appropriate and used to inform local need or support future funding bids as an evidence base.
13. Since October 2016, WCFC has been working with five families and CESS with two families. All of the families have been selected from areas where the local support team receive the highest demand in referrals. Whilst the families are still being supported by the providers, there are already signs of success. Most notably two families which were particularly isolated and were not utilising any services, including the universal service offer, are now engaged with the pilot. This engagement has given them the confidence to access appropriate services and to begin volunteering by setting up her own weekly group at the family centre.
14. In addition to case work support, WCFC has created a pathway into a local school to enhance the school pastoral care offer. This is leading to more timely and appropriate interventions. Two referrals have been accepted since this process started. The referrals have also been made via the Early Help Assessment (EHA) which has meant the number of EHA's held by partners is also increasing.
15. The pilot is on track to support the 125 families within the next twelve months.
16. To date the pilot funding has been committed on the two key workers, one from WCFC and one from CESS, and the computer software UPSHOT at a cost of £4,900.

East Staffordshire

17. The concept for the East Staffordshire pilot has been developed through a collaborative approach with partners including statutory service providers within the public sector and community and voluntary sector.
18. Three well attended partnership events were held in July 2015, November 2015 and March 2016 through which it was agreed that the pilot will focus upon building resilient and self-supported communities and families and developing skilled and supportive communities within the Shobnall Ward.
19. It is doing this through a 'grass roots' approach by identifying and building on existing assets to strengthen community capacity. A multi-agency Steering Group has been established to oversee local planning and delivery and includes representation from partners such as Police, YMCA, Harvey Girls, CAB, Burton Albion Community Trust, VAST, East Staffordshire Borough Council and a local GP practice. The pilot is focused on the development of a sustainable approach to bringing statutory, community and voluntary sector services together to provide an effective and accessible 'touch point' for families. This may be a physical or virtual approach, or a combination of the two.
20. The report in July highlighted that the East Staffordshire pilot would need an extended period of mobilisation. This is important learning for the programme as it evidences that

if we are to co-design effectively we do need to ensure that we build in time to support this approach.

21. The pilot will also increase the number of volunteers in the area and following a recent engagement event there is now potentially 90 people who may offer their time to volunteer. The next steps for the pilot are to build on the volunteer offer and provide training. The East Staffordshire pilot aims to have an on line support service once the needs for the area have been identified. The relationship with the local parish council is being developed to provide a pathway to support and drive the pilot over the next two to five years.
22. The pilot will also work with the out of work families to support them into education, employment or volunteering. To date, £4,000 has been spent on marketing and engagement. Additional support for this engagement process is also being provided through the VCSE contract, with providers helping to complete a long term delivery plan.

Lichfield

23. The Lichfield pilot is focused on the development of community-based solutions to support families with babies and pre-school-age children. The emphasis is on identifying and working with families where there are known lower level risk factors and where earlier and less formalised intervention has the potential to have a significant longer term impact; and subsequently reduce demand for specialist services. The pilot is targeting the Burntwood area and through a collaborative approach is building on the innovative practice that has developed through SPARK CIC and the Burntwood (virtual) Childcare Hub.
24. Since the Select Committee paper in July activity has included:
 - a. Developing data sharing protocols to identify 'at risk families'
 - b. Ethnographic research with families who do and do not access local services to understand motivations, barriers, benefits etc.
 - c. Using existing volunteer capacity to identify 'seeking' families who require support and 'sharing families' who can mentor and support them to find their own solutions through positive networks in the community
 - d. Exploring options to develop the knowledge of the local early year's workforce around support networks that exist within the community.
25. The UPSHOT computer software has been purchased at a cost of £4,900 and is being used to collate output and outcome data. This will be used to monitor and evaluate activity on a regular basis and will form part of the Early Help Offer evidence for Ofsted reporting.
26. Significant progress has been made since the July report, early indications evidence that the pilot has engaged (reached) 170 families with under 5 year olds in the household from the Burntwood area. This has also included families from out of the reach area, in Norton Canes, Cannock Chase and also families that would not have travelled to the Children's Centre in Lichfield.
27. Research highlighted that some families did not like or wish to use a 'free pass' as they felt stigmatised so this was identified as a barrier to accessing the service. Therefore

SPARK CIC has created their own membership form which will also be a registration form for the children's centre. SPARK will be given £3 per family, per session from the pilot fund to cover the costs of funding the 'free pass' this is an incentive to support vulnerable families whilst not 'stigmatising' families. To date 78 vulnerable families have attended the centre, £1,100 will be paid to SPARK for evidence based engagement with these families at the SPARK Centre.

28. The current spend of the Lichfield pilot is minimal and reflects only the cost of the computer software and reimbursement of the SPARK card. There are no paid functions or posts, as the pilot relies heavily on volunteer time and support. Notice has been served on the Boney Hay Centre due to rental costs and the pilot team will support SPARK's exit from the school. Future funding will be generated via funding bids which will also be supported via the pilot team.

Newcastle

29. The vision underpinning the Newcastle pilot is to enable early action through access to the right information at the right time to help children and families, and those who support them, to make decisions about their lives.

30. The original remit of the pilot was to focus on the creation of an 'Intelligence Function' which has the necessary capability to collect, analyse, store, share and update information with a variety of partners, enabling early targeted action for children and families in Tiers 1 and 2 of the children and families system. Through this early and targeted action, families will become more resilient and develop the capacity and capabilities to effectively manage their needs, thereby reducing the requirement for high cost statutory services.

31. The ability to respond to identified needs will be dependent upon the availability of the right support for families. The development of Community Capacity/Social Action will be a key component of this pilot and the work with the New Economics Foundation has informed how this is progressed.

32. The Project is working with the existing Girl Power Project which is currently delivered in a school setting. Girl Power aims to provide early help and targeted support to young people at risk of Child Sexual Exploitation.

33. The pilot is being delivered through a partnership approach with Staffordshire Police, Newcastle Borough Council and local Schools. A multi-agency Steering Group has been established and is meeting regularly. The focus to date has been on exploring the direct benefits of the pilot to ensure that there is real baseline data and that all outcomes are measurable.

34. Activity since July 2016 has focused upon the Girl Power project and the development of this group to ensure delivery is sustainable. Work has begun on improving information sharing within the school arena to support the identification of young girls considered most vulnerable. To achieve this, there is on-going dialogue with schools and partners who contribute to the development of the pilot. This work is also closely aligned with the proof of concept Intelligence Function work stream of the Children's Transformation System.

35. Information Sharing was highlighted in July as an area which would be progressed and a national contest (the Tenshi Challenge) has been launched to identify a start up company to provide an innovative digital solution for high level information sharing across partners which will identify a mechanism for engaging families in decisions around their low level needs. The evaluation of this competition (facilitated by the Tenshi organisation) will be completed in late January 2017, with a solution being available in April 2017. This solution aims to enable schools to have informed conversations with families around the earliest help.
36. Girl Power aims to further deliver a service, over twelve months, with groups of 8 young girls in 8 sessions. Early indications have shown that the current cohort of girls have received positive interventions. Case studies have shown that one individual in an abusive relationship is now accessing support and has a safety plan agreed with the school. Another young person who suffered a close family bereavement and was a witness to domestic abuse is also accessing services that previously they were not. In most cases, the key theme suggests young people are less vulnerable by the creation of a pathway of support. To support the girl's group expansion, Kidsgrove High School has commissioned a space within the new school building to accommodate children and family multi-agency conversations
37. There is the potential for the remit of this pilot to change following a review of the proposals around the Place Based Approach.

South Staffordshire

38. This pilot has been designed to bridge the gap between school and community support, embedding BRFC and Early Help principles by tackling root cause through a whole family approach before issues escalate.
39. The pilot is testing and measuring how families seek support within their communities at a very early stage, and initially focuses upon one school cluster. Key partners are the four primary schools Landywood Primary, Glenthorne Primary, Cheslyn Hay Primary, Moat Hall Primary within the cluster and local voluntary and community sector organisations.
40. The primary schools recognised the need to work more closely together to share information and resources and the pilot is supporting closer working, sharing resources and will commission a Tier 2 family support navigation service.
41. Since July the scope of the pilot has now been defined and an outline design is in place. Partners are continuing to work together on the more detailed elements of the approach. The tier 2 service has now been commissioned and training was completed in late September.
42. The anticipated number of referrals from the school had been lower than expected and a new referral form has been developed which is more accessible. Two further engagement sessions have been held at the school and a number of partners attended with the aim of informing families and organisations of their services. This has formed part of a collaborative approach to the early help offer.

43. Initially, due to the lower than expected referrals, it was considered whether the geographical area covered by the pilot's initial remit could expand. The impact of the new referral form and engagement activities has been an increase in referrals; therefore there is no capacity currently for expansion (for example into Huntington and Hatherton). This may be reviewed in the future, dependent on changes in capacity.
44. The pilot will also be engaging VCSE support to complete a sustainability plan over the next quarter to maintain the pilot support if it is successful.

Stafford

45. The Stafford Pilot has continued to develop through a partnership approach building on existing innovations and examples of good practice such as Multi-Agency Centres in Schools in Tamworth (MACs) and Room 21 in Leek. It will continue to embed BRFC principles at a local level and complement the Police 'Safer Schools' initiative.

The pilot aims to establish a systematic programme of Tier 2 support for children, young people and families where no agency is formally intervening. The support will initially operate and be accessed from a centre within the school environment. It will provide capacity to identify and contain issues at an early stage within an environment that feels safe and non-threatening for the child and their family.

46. Since July two schools (Stafford Manor and Doxey Primary) have now been selected to deliver this pilot and are at different stages of progression. The co-ordinator, funded via the pilot, commenced employment on 31st October 2016, and has begun the process of working with families. Progress data will be available at the next reporting period.
47. Stafford Borough Council is continuing to support the pilot via the Safer Communities Partnership, providing financial support for room set up and aligning the priorities with the School Programme.

Staffordshire Moorlands

48. The Staffordshire Moorlands pilot is focused on the Leek North ward and has been developed to complement and enhance existing and planned activity in the District which is being coordinated and governed through the Moorlands Together Partnership. This includes the extension and outreach of Room 21 and the development of a Food Co-operative. The District Pilot is not operating in isolation but as part of a wider programme of activities to improve outcomes for children, young people and families in Leek North.
49. The Food Co-operative has been designed to promote community engagement through sustainable food production whilst also tackling local priorities such as reducing obesity. The Food Co-operative will be formally launched in December 2016; however the initiative is already operational, supported by partners from across the Moorlands and volunteers, including pupils from Leek High School. External funding has been secured via the Moorlands Together Partnership to sustain the project.
50. The third element of activity for which BRFC funding has been utilised is a community early intervention service which will utilise the principles of BRFC to build resilience within families through a key work approach.

51. Visyon, a local organisation, has been commissioned to deliver the Early Intervention element of the District Pilot. Visyon supports the emotional health and well-being of children, young people and their families through the provision of a range of services, including one-to-one therapy, group work, mentoring, therapeutic play and family support work. Visyon have a dedicated District Early Intervention Pilot Worker and are currently recruiting an additional worker.
52. The Family Intervention Worker will work alongside the Visyon Early Intervention Pilot worker and will have two key functions:
 - a. To provide analysis and reports on the Leek North Early Intervention Pilot;
 - b. And the post holder will also carry a BRFC caseload from across Staffordshire Moorlands to improve outcomes for families.
53. The service is working with families who are not yet in receipt of services but are displaying early indicators/root cause factors which suggest their needs may escalate in the future. The provider has also been asked to encourage families that they work with to volunteer and help other groups like the Food Cooperative in Leek.
54. During cohort one, the service received fourteen new referrals, twelve of which were accepted. The provider facilitated ten visits to families, one case was closed, three children were offered a one to one session, and four referrals were made to external agencies. Six cases required liaison with schools and the provider facilitated 120 family support activities.
55. Measurable outcomes based on the Family Outcome Star will be used to measure the impact of the early intervention family support provision. Five families in the first cohort have partially achieved their desired outcomes. And one family has completed one of their desired outcomes
56. To date there has been a slower than expected number of referrals to the service; this has been attributed to the timing of marketing the project to families (due to school holidays) and because only four schools and one nursery were originally in scope. As a result of this, all Leek schools are now eligible to make referrals. Referrals from health colleagues are particularly low and further discussions have been held to try and encourage this.
57. As part of the wider context, the District Pilot is seeking to support families into other community options, including the Food Cooperative Bank. In addition, families accessing the Food Cooperative for a set amount of time are currently provided Free Leisure Access to a local provider as part of the Moorlands Partnership.
58. Appropriate performance measures have been developed that will evidence the outcomes delivered for families and the impacts in terms of reductions in demand for more specialist services.

Tamworth

59. The Tamworth pilot is building upon existing examples of successful partnership working within the Borough and the principles that underpin this, specifically BRFC and Multi Agency Centres (MACs).

60. The Tier 2 Family Support Service, Malachi, has started and one dedicated key worker has been appointed and is taking referrals identified from the two schools. There was a delay between the start of the contract and referrals being received due to processes being developed between the schools and Families First for safe and effective information sharing. Two Academy High Schools are fully engaged and have each agreed to contribute match funding in Years 1 and 2. In year 2, negotiations will begin with a further high school who may wish to join the pilot.
61. As the pilot has been developed through a partnership approach building on BRFC principles additional funding has also been approved through the BRFC district payment by results budget. The current £30k has been committed on commissioning the family support service. Appropriate performance measures have been developed that will evidence the outcomes delivered for families and the impacts in terms of reductions in demand for more specialist services.
62. There are currently 15 families allocated to the provider and progress will be reported at the next reporting point.
63. The Tamworth pilot will develop alongside the place based approach taking into account the critical success factors for all agencies within the district.

Emerging Learning

64. There have been data issues – the correct data is not necessarily currently collected by partner organisations to enable progress to be demonstrated.
65. Anecdotal evidence is proving to be informative in ensuring that the correct families are supported.
66. Community engagement takes time to deliver outcomes and time is required to engage the support of all the stakeholders necessary for a successful partnership approach.
67. The pilots are requiring new/existing organisations to bid for work and also to work in different ways. It is taking time to grow and re-shape the market to meet these new functions.
68. The pilots have evidenced the importance of working collaboratively and the need to recognise the full picture of activity within a locality so that the pilot is not developing its service offer/ delivering activity within a vacuum / silo.
69. The importance of making use of all available communication channels and opportunities; some of the pilots have used large scale engagement activity successfully, others have made effective use of social media
70. The importance of listening to existing service providers and volunteers, and building upon success rather than creating and investing in something new.

Conclusions

71. Since the report in July to this Committee all of the pilots are now active and evidencing varying degrees of progress.

72. They are all demonstrating positive outcomes and where hard data is not yet available to support this, individuals who have benefitted from the pilots have been able to state how their lives have been improved.
73. Five of the pilots (Tamworth, Newcastle, Moorlands, Stafford and South Staffordshire) have indicated that they have incurred delays in the implementation of their work. A further two pilots (Cannock and Lichfield) which have been in place for longer are able to demonstrate positive outcomes at the end of this reporting period. The East Staffordshire pilot is endeavouring to develop from the grass roots a different culture and attitude to addressing the issues which arise within a community and it is recognised that will take time to grow and embed.
74. Working with partners and more closely with communities, families and individuals has meant that the pilots have had to be flexible in their approach to delivery and achieving outcomes. Therefore they have changed and flexed to meet local need and in some instances changed from their original design. In addition to this, the creation of the place based approach may mean that the pilots within two Districts (Tamworth and Newcastle) may evolve further
75. The strong partnership approach has been crucial in terms of the sustainability and 3 pilots (Tamworth, Newcastle and Stafford) have secured either match funding from partners and/or a commitment to consider further support to maintain the approach.

Link to Other Overview and Scrutiny Activity –

Pilot report – July 2016

Children's Transformation System report – December 2016

Contact Officer

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Appendices/Background papers

Appendix A - Chart re progress data/baseline

Local Members' Interest
N/A

Safe and Strong Communities Select Committee – 13th July 2017

Public Analyst and Scientific Services Laboratory

Recommendations

1. The Public Analyst and Scientific Services in-house laboratory is closed to prevent further financial losses to the Council.
2. The County Council appoints a Public Analyst and Agricultural Analyst from any of the five remaining Local Authority laboratories or alternatively it appoints one/more employed by a private sector company.
3. Those departments within the Council that currently use the in-house laboratory facility should use an external laboratory that offers the best value for money to meet any statutory obligations.

Report of Cllr Gill Heath, Cabinet Member for Communities

Summary

What is the Select Committee being asked to do and why?

4. The purpose of this report is to update the Select Committee on a review carried out into the operation of the in-house Public Analyst and Scientific Services laboratory and to make them aware of recommendations to Cabinet regarding its future operation. The comments of the Select Committee will be reported to the Cabinet at their meeting on 19 July 2017 for them to take into account in their consideration of this matter.

Report

Background and Context

5. There is a statutory requirement for the County Council to appoint a Public Analyst under the Food Safety Act 1990, and an Agricultural Analyst under the Agriculture Act 1970.
6. This appointee does not have to be employed by the County Council but appointees should be equipped with the required laboratory facilities to fulfil their obligations under these statutes, namely to analyse and report on samples submitted to them.
7. Scientific Services provides Staffordshire with an in-house statutory and non-statutory testing service, and in addition it provides a service to many other local authorities, private customers and national regulators, e.g. Food Standards

Agency (FSA). Work for the public sector is mainly directed towards Trading Standards departments, Environmental Health Services / Health and Safety.

8. It is not a statutory requirement for the County Council to operate an in-house laboratory and the Council pays for the testing services it uses at the market rate. Trading Standards statutory testing together with testing requirements from other departments within the county council can be procured from a number of other laboratories.
9. Local authority work has been in decline for a number of years and an increasing proportion of work is now carried out for private sector businesses and individuals in Consumer Goods, Food, and Agriculture sectors. Income from these private sector customers has mitigated in part the impact of the reduction in the public sector demand.
10. A number of reviews have been carried out in recent years regarding the future of the in-house laboratory and previously it was agreed that scientific services would continue to trade but that it needed to evolve to become a more commercialised operation. A small number of redundancies were made in 2014/15 and a business manager appointed to establish whether a more commercialised approach would result in Scientific Services being financially sustainable in the medium to long term. It was agreed that a further review would look at the long term future of the Service.
11. The review carried out in 2016 recommended that:
 - a. Unless the trading situation improves radically the labs are closed within 2 years.
 - b. That the labs be kept in operation for 16/17 to provide an opportunity to reverse the current financial problems.
12. When following the horsemeat issue, the Elliott report was published in 2014, it included a recommendation that was to create a robust, sustainable public sector laboratory system that could be considered to be a national asset.
13. The six local authorities who had public analyst and scientific services laboratories, including Staffordshire, discussed options for creating a shared service but these discussions did not come to fruition.
14. In 2016, the laboratories did come together and created the Association of Local Authority Public Analyst Laboratories (ALAPAL) of which Staffordshire Scientific Services is a fully integrated partner. This Association enables collaboration and co-operation between the laboratories, providing capacity to bid for larger contracts and ability to demonstrate resilience to potential customers.
15. This has resulted in some work coming to Staffordshire from a Kent contract, however the opportunity to bid jointly for Food Standards Agency (FSA) work has not yet been forthcoming; the FSA have reduced their budgets for sampling work and have not yet committed to any tendering process for any activities.

16. The Public Analyst and Scientific staff are currently based in the laboratory in 14 Martin Street, Stafford. It employs 16 staff (14.4 fte)

Financial position

17. The service achieved a surplus of funds in the four years up until 2013/14; at this time the accumulated surplus was £265,295. However the service has made losses in each of the three years following; in 2014/15 and 2015/16 losses depleted all the surplus funds, therefore there is no remaining funding held in reserve to invest in replacement/new equipment and to manage income shortfalls.

18. A reduction in staffing numbers was made in January 2016 and this action, together with the efficiencies being driven through by the business manager, did reduce the expenditure forecast for 2016/17 and brought in income from new customers. These actions were not sufficient to return the laboratory to a break even position; however the forecasted loss was reduced and recorded a £40,000 loss for 2016/17.

19. It is anticipated that local authority customers will continue to reduce spending on analytical services again this year and this is compounded by the Food Standards Agency announcing further cuts to budgets that Scientific Service benefit from. Therefore based on the continued levels of staffing in the laboratory the outturn forecast is **£108,000 loss** based on existing staffing numbers.

20. Whilst it may be possible to mitigate the forecasted losses in the short term by further redundancies in staffing numbers, this would not be financially sustainable in the medium term. It is extremely unlikely that any reduction in staffing would deliver sufficient surplus income to allow for the necessary reinvestment in replacement equipment for the laboratory.

21. **Link to Strategic Plan** – Protecting the vulnerable and supporting those residents who need it most to be healthier and more independent means that less funding is available for other areas

Community Impact

SCC's Priority Outcomes & Impact Areas	Impact Assessment	
	Impact: (positive / neutral / negative)	Provide brief detail of impact
Prosperity, knowledge, skills, aspirations	neutral	
Living safely	neutral	The public will be able to access a Scientific Services service (closest lab is i.54 Wolverhampton)
Supporting vulnerable people	neutral	
Supporting healthier living	neutral	The traded service currently provides testing

	Impact Assessment	
SCC's Priority Outcomes & Impact Areas	Impact: (positive / neutral / negative)	Provide brief detail of impact
		facilities for public and private sector business and individuals. There will be no direct implications on healthier living
Highways and transport networks	neutral	
Learning, education and culture	neutral	
Children and young people	neutral	
Citizens and decision making, improved community involvement	neutral	
Physical environment including climate change	neutral	
Maximisation of use of community property portfolio	neutral	The Traded service is charged use of 14 Martin St. Opportunity to use the space in the building for an alternative use
Equalities Impact	Impact: (positive / neutral / negative)	Provide brief detail of impact
Age	neutral	The traded service currently provides testing facilities for public and private sector business and individuals. There will be no direct implications on the listed protected characteristics and any amendments to the service officer will consider the legal obligations detailed in the Equality Act 2010.
Disability	neutral	As above
Ethnicity	neutral	As above
Gender	neutral	As above
Religion / Belief	neutral	As above
Sexuality	neutral	As above
Impact / Implications		
Resource and value for money (in consultation with finance representatives)	Closure of the laboratory will protect the Council from future financial losses.	
Risks identified and mitigation offered (see corporate risk register categorisation)	The Council will be required to appoint a Public Analyst and Agricultural Analyst to meet its statutory responsibility. This can be met by the	

	Impact Assessment	
SCC's Priority Outcomes & Impact Areas	Impact: (positive / neutral / negative)	Provide brief detail of impact
	appointment of alternative PA and AA from another laboratory.	
Legal imperative to change if applicable (in consultation with legal representative)	N/A	

Contact Officer

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WORK PROGRAMME

Safe and Strong Communities Select Committee 2017/18 – July 2017

This document sets out the work programme for the Safe and Strong Communities Select Committee for 2017/18. 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 Tina Gould, Scrutiny and Support Manager on 01785 276148 or by emailing tina.gould@staffordshire.gov.uk

Membership – County Councillors 2017-18

John Francis (Chairman)
Conor Wileman (Vice Chairman)
Syed Hussain
Trevor Johnson
Jason Jones
Natasha Pullen
Kyle Robinson
Paul Snape
Victoria Wilson
Mike Worthington

Calendar of Committee Meetings 2017-2018

13 June 2017 at 2.00 p.m.

13 July 2017 at 10.00 a.m.

26 September 2017 at 2.00 p.m.

9 November 2017 at 10.00 a.m.

11 December 2017 at 2.00 p.m.

15 January 2018 at 10.00 a.m.

5 March 2018 at 10.00 a.m.

Meetings usually take place in the Oak Room in County Buildings.

Work Programme 2017-18

Date of meeting	Item	Link to Council's Commissioning Plans	Details	Action/Outcome
Tues 13 June 2017	Introduction to S&SC SC	Ensure effective safeguarding for the most vulnerable in our communities Enable people to access the appropriate intervention at the right time.	The Committee received a presentation which gave an overview of the remit of the Select Committee and highlighted some of the key issues going forward.	As a result of the presentation and subsequent discussion on developing the work programme Members requested the following items be included on their work programme: <ul style="list-style-type: none"> • The West Midlands Peer Review of Adult Safeguarding • How to engage with hard to reach communities • Modern day slavery and domestic violence • CSE
Thurs 13 July 2017	Children's & Families System Transformation Cabinet Member: Mark Sutton Officer: Mick Harrison/Helen Riley	Ensure effective safeguarding for the most vulnerable in our communities Enable people to access the appropriate intervention at the right time.	The Transformation programme for Children and Family Services has previously been considered by this Select Committee on 8 June, 8 July & 12 December 2016.	
	Children, Young People & Families Pilots Cabinet Member: Mark Sutton Officer: Mick Harrison/Janene Cox	Ensure effective safeguarding for the most vulnerable in our communities Enable people to access the appropriate intervention at the right time.	The Pilots support the work of the Transformation Programme and were last considered by this Committee on 16 January 2017.	
	Public Analyst & Scientific Services Laboratory Cabinet Member: Gill Heath Officer: Trish Caldwell	Well Run Council Making the most of our Assets, Managing Change Well, Transforming Ourselves, Innovation in ICT, Continued Modernisation of HR, Outcome Based Performance Management	To inform the Select Committee of a review carried out into the operation of the in-house Public Analyst and Scientific Services laboratory.	

Mon 26 Sept 2017	Child Sexual Exploitation (CSE) in Staffordshire, to include progress against the CSAF Action Plan and information regarding Revenge Porn & Sexting Cabinet Member: Gill Heath Officer: Mick Harrison	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities Enable people to access the appropriate intervention at the right time.	The Committee has requested a six monthly update on this issue. The Chair of the Children and Young People's Overview and Scrutiny Committee at Stoke City Council has been invited to attend this meeting and this arrangement is reciprocated.	
	Cabinet Response: Preventing Low Level Neglect of Children in Staffordshire Cabinet Member: Mark Sutton	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities	The Committee received an initial response to the recommendations contained within its Working Group report on Low Level Neglect on 6 March 2017. It was agreed to follow up outstanding actions in 6 months' time.	
	Community Safety Agreement Cabinet Member: Gill Heath Officer: Mick Harrison	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities.	Select Committee response to the SCC Stronger Communities Strategy Group Draft Agreement and results of the Strategy Group's 13 September meeting.	
Thurs 9 Nov 2017	Staffordshire & Stoke-on-Trent Adult Safeguarding Partnership Board Cabinet Member: Alan White Independent Chair: John Wood	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities	This report is presented to the Select Committee on an annual basis.	
	West Midlands Peer Review of Adult Safeguarding Cabinet Member: Alan White Officer: Andrew Sharp	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities	This review took place in February 2017. Councillors Francis and Olszewski participated in this review. At the June meeting Members requested feedback on the review to a future meeting.	
	Deprivation of Liberty Safeguards Cabinet Member: Alan White Officer: Peter Hampton	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities.	At its meeting on 9 November 2016 Members were told that the anticipated backlog of referrals should be cleared by June/July 2017. The Committee should monitor and review this matter.	
Mon 11 Dec 2017	Customer Feedback & Complaints, Adult Social Care Annual Report 16/17	Well run Council	Adult's Services have a statutory obligation to submit an Annual Report on complaints and representations to the relevant County Council Committee.	

	Cabinet Member: Alan White Officer: Kate Bullivant			
	Customer Feedback & Complaints, Children's Social Care Annual Report 16/17 Cabinet Member: Mark Sutton Officer: Kate Bullivant	Well run Council	Children's Services have a statutory obligation to submit an Annual Report on complaints and representations to the relevant County Council Committee.	
	Domestic Abuse Cabinet Member: Gill Heath Officer: Mick Harrison	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities Enable people to access the appropriate intervention at the right time.	Select Committee Members requested an item on this issue at their meeting of 13 June.	
Mon 15 Jan 2018	Modern Slavery Cabinet Member: Gill Heath Officer: Mick Harrison and Becky Murphy	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities Enable people to access the appropriate intervention at the right time.	At the 12 December meeting Members requested a further report giving progress on the Task and Finish action plan following their January meeting. Following this meeting there was no significant developments to report and this item has therefore been deferred for consideration in the new municipal year.	
Mon 5 March 2018				
tbc	Staffs Safeguarding Children's Board (SSCB) Annual Report 2016/17 Cabinet Member: Mark Sutton Independent Chair: John Wood	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities	This report is presented to the Select Committee on an annual basis.	

Briefing Notes/Updates/Visits 2017-18				
Date	Item	Link to Council's Commissioning Plans	Details	Action/Outcome
tbc	Visit to the MASH (Multi Agency Safeguarding Hub)	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities	Select Committee Members requested a visit to the MASH to see first hand the multi agency partnership working and the rationale for creating this facility.	

Working Group and/or Inquiry Days 2017-18

Date	Item	Link to Council's Commissioning Plans	Details	Action/Outcome
tbc Monday 24 July 1.00 – 3.00pm (NB after the Level 1 Child Protection training in the morning) Friday 28 July 9.00 – 11.00 am Monday 31 July 9.30 – 11.00 am	Community Safety Agreement – shared priorities Cabinet Member: Gill Heath Officer: Mick Harrison	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities.	The SCC Stronger Communities Strategy Group (chaired by Gill Heath and including representation from District and Borough Councils) has produced a draft Community Safety Agreement Safe which sets out shared priorities. This will be agreed at their meeting of 13 September. The Select Committee will consider the Draft Agreement at an informal review session, reporting their findings to both the Strategy Group on 13 September and the Select Committee on 26 September.	
tbc	How to engage hard to reach communities Cabinet Member: Gill Heath Officer: Mick Harrison	Resilient Communities Ensure effective safeguarding for the most vulnerable in our communities Enable people to access the appropriate intervention at the right time.	Possible Review to identify hard to reach communities within Staffordshire and the most effective way of addressing the issues identified.	

Current & Related Work of Select Committees and/or All Party Member Groups 2017-18

Timescale	Area of Work	Link to Council's Commissioning Plans	Details	Action/Outcome

