

Community Impact Assessment

Name of Proposal: Intensive Support for Staffordshire Children with Disabilities

Project Sponsor: Martyn Baggaley Senior Commissioning Manager Families and Communities Commissioning Team

Project Managers: Kaye Dixon and Paris Wood Commissioning Officers Families and Communities Commissioning Team

Date Completed: 28th April 2021

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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 <u>planning stage</u>, therefore supporting the council's approach of <u>Achieving</u> <u>Commissioning Excellence</u>.
- 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'
 will be uploaded as part of the Cabinet Papers. The full CIA document will be
 uploaded as a Background Paper.

Completing the CIA Template

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

| Which groups | Benefits | Risks | Mitigations / |
|---------------------|------------------------------------|--|---------------------------|
| will be affected | | | Recommendations |
| Which groups of | Think about the | Think about the impact the | Set out any |
| people will be | impact the | proposal may have on each of | recommendations as to |
| impacted by the | proposal may | the different category areas, | how the benefits will be |
| proposed policy, | have on each of | and identify the risks | maximised and the risks |
| service or project? | the different | associated with the proposal. | minimised. |
| This could be | category areas | | |
| people in a | and identify the | | Also highlight any trade- |
| particular area, a | benefits of each | | offs that may occur. |
| street, or a group | decision. | | |
| of people with | | | |
| similar | | | |
| characteristics | Please note: | | |
| e.g. older people, | Potential impa | acts should not be included if it | |
| young people or | is considered | highly unlikely that they would | |
| people with care | occur. | | |
| needs. | Where no ma | ajor impacts have been | |
| Also consider | identified, ple | ase state N/A. | |
| staff, residents | Due to the pu | blication of CIAs, it is advisable | |
| and other external | not to record | d personal details of members | |
| stakeholders. | of the public | , such as names or addresses. | |
| | | | |

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.

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

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 |
|-------------------------------|---|---|--|---|
| Race | | Multi-cultural and inclusion bringing together different experiences and an understanding of the different approaches to respect cultural differences | Integration and language barriers if not fully resourced | Careful matching of available staff, staff training, range of information formats Every effort will be made to ensure a breadth of provision is commissioned to meet the needs of families form different ethnic and cultural backgrounds |
| Disability | Specifically, around 150 Children and young people with Special Educational Needs and Disabilities accessing support in and around the home environment | Statutory responsibility met. Duty of care and best practice demonstrated. Opportunity for early support via 1-1 lifeskills and links with early intervention/preventative support to avoid escalation for more services or input from SCC. The proposed option clearly offers a range of support to meet needs at the right time and place and efficiently It is expected that by merging the enabling levels of the two | can offer support for required times in a stressed care market | Panel to agree allocation of resources. Clear pathways of step up and step down of provider input + Market Engagement activity to encourage new entrants from adult social care + Partnering with neighbouring authorities to increase commercial attractiveness to providers |

| Protected | Which | Benefits | Risks | Mitigations / |
|------------------------|--|---|---|---|
| Characteristics: | groups will be affected? | | | Recommendations |
| | be an ected: | contracts, more providers will enter the care market for Childrens disability support as they will have greater opportunities to offer appropriate levels of care in the step up /step down arrangements. | | + Support will be provided with appropriate registrations (CQC, Ofsted) + Market engagement to understand barriers to new entrants, in order to remove them |
| Sex | M / F /transgender | Provision to meet needs regardless of gender | Risk of having sufficient and appropriate staffing and facilities | Centralised resource directory to ensure demands met |
| Age | 0-18 | Integration with other commissioned Children's Services. Clearly understood pathways and flexibility to meet escalating or reduced need quickly. Providers who are dual registered with CQC may be able to continue care across Childrens and Adults services | Ensuring age appropriate support and whole family consideration Changes when needing adult services, new assessments and continuation of support | Working with providers and families to offer a range of suitable family support alternatives Ensure Preparing for Adulthood pathway is understood, embedded and supported by providers. Links to Adult Social Care Young Adults team and MPFT teams clearly established |
| Religion or Belief | All | Multi faith awareness and understanding from everyone involved in delivery | Awareness of individuals needs and choices | Trained staff from a diverse range of backgrounds to deliver support. Information available in many formats. Expectations of providers set out in contracts |
| Gender Reassignment | Individuals who express requests | Personal choice respected. Opportunities to develop support from | Available resources i.e. Male and | Recruitment campaigns to |

| Protected Characteristics: | Which groups will be affected? | Benefits | Risks | Mitigations / Recommendations |
|--|---|--|---|---|
| | | similar or different aspects | Female and transgender support workers | develop provider market Providers agree to support all aspects of Equality and Choice |
| Sexual Orientation | who express requests | Personal choice respected. Opportunities to develop support from similar or different aspects | Available staff | Providers agree to support all aspects of Equality and Choice |
| Pregnancy and Maternity | All Providers | Staff ensured of employment opportunities and continuation of work | Providers recording risk assessments | To be include in Terms and conditions of any contracts and monitoring and Compliance documentation |
| 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. | | Provision of service without discrimination. Staff ensured of employment opportunities and continuation of work | Any discrimination claims not resolved could affect personal and professional integrity | Providers agree to support anti-discriminatory practice. Evidence in compliance documentation |
| Impact on SCC | impact for SCC Social Care staff offering more choice of providers Any staff whose children access the | Additional support for the families of Children and Young People with Send to reduce the impact on demand for more Social Care Support. No TUPE or SCC staff changes as not affecting any in house services. Clear pathways of support enabling more choice for families | Understanding of eligibility and criteria for support | Clear pathways for accessing services. Engagement and discussions with staff members. Support from commissioning team staff to embed processes and monitoring |

| Protected | Which | Benefits | Risks | Mitigations / |
|-------------------------|--------------|----------|-------|-----------------|
| Characteristics: | groups will | | | Recommendations |
| | be affected? | | | |

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

Existing contracts offer different services to families which are currently recorded and used separately. Short breaks for SEND are recorded on Capita, assessed needs are recorded on

CareDirector and there is no principal recording of different Tiered support for the family. The option to combine elements of two services will ensure that families will have access to varying levels of support and the recording of the impact and outcomes will be more straightforward.

Resources will be directed when and where needed and step-up and step-down arrangements between levels of support will offer cost effective input at the right time reducing or delaying the need for higher levels of care.

Service overlap will be avoided and more providers can join the Childrens Services Care Market through dual (Adults and Childrens) CQC registration. SCC Commissioners are working with adult care providers to increase their offer and apply for dual registration, which will also assist the adult brokerage team and the delivery of the preparing for adulthood pathway with the continuum of support for those with eligible needs beyond the age of 18.

Families will have a greater input into their own personal care planning through choice of service and support as highlighted by SCIE report SEND LAR (November 2018) reported positive feedback of short breaks service which offers families choices and the flexibility afforded by the preferred option will add to the resources available for families. Finance reports show that the current Aiming high life skills budget is underutilised and the approach advocated will make full use of this lower cost option in order to prevent, reduce or delay additional needs, and associated higher costs of support.

Parent/carer survey undertaken as part of this exercise in March 2021 indicated that some families were not aware of the two support options and there were difficulties accessing different schemes. They were also not aware of the support that could be accessed *without* a Social Care Assessment, and were therefore missing out on earlier help and presenting at a later point when they had reached a crisis point.

The outcomes of the <u>finance and engagement survey</u> are included in the options appraisal for this proposal

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 | Which groups | Benefits | Risks | Mitigations / |
|---|--|---|--|--|
| (Areas highlighted are suggestions only and there may be other impacts in these categories) | will be affected? | | | 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 issues? | This provision is targeted at meeting and addressing the needs of around 150 families with complex children to enable their parent/carers to sustain their caring roles and help the C/Yp learn new skills | Meeting Statutory responsibilities. Support for the individuals and their families though short breaks and community- based support. Opportunities for families to link into other services and support. | Shortfalls in provision Gaps whilst packages are mobilised Ability of the market to manage needs flexibly | Vacancies and availability of providers to be monitored and reported to the Disability Resource Panel. Additional services utilised i.e. Childrens tier 2 Emotional Wellbeing service and Tier 2 Family Support Provision, and also HAF funded activities Contracts and monitoring to focus on stability and sustainability of varying requests. mitigation plan including issues log to be developed |
| 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? | Approximately 150 Staffordshire Children and young people with SEN and Disability and their families | Meeting statutory responsibilities and offering choices of short breaks and support in the home. Support for C/YP to develop lifeskills and promote independence and access to universal services. More effective linking | Enough care providers in children's services to support different levels of need including challenging behaviour and complex needs | Developing a dynamic cohort of providers including dual registered providers for adults and under 18's, and linking into other services e.g sitting services, foster carers, personal assistants. Providers will be required to evidence their effectiveness in encouraging individuals to take |

| Which groups | Benefits | Risks | Mitigations / |
|--|---|---|---|
| will be affected? | | | Recommendations |
| | to other commissioned services including 0-19 Healthy Child service, Childhood Weight Management Service etc. Positive goal setting and personalised outcomes. providers required to work with Voluntary organisations to enhance SEND support an upskill other providers | | their own responsibility for the development and maintenance of healthy lifestyles through monitoring and KPl's The expectation that providers will work to upskills an agreed number of community volunteers and clubs to enhance their ability to be inclusive for CYP with SEND will be made a condition of contract |
| Around 150 Staffordshire Children and Young people | Involvement and early intervention by providers who | feedback may delay any remedial | Contract monitoring to include "near miss" incidents, "no shows" for planned |
| with SEN and Disability and their families | their own risk assessments and monitor and feedback to SCC offer an additional level of involvement to ensure families stay safe. Providers committed contractually to SSCB safeguarding arrangements. Any concerns raised through monitoring and feedback + Support will | actions | support and rigorous incident reporting. Sharing of vital information and training with providers to highlight accident avoidance +Links to made with Occupational Therapy service where appropriate |
| | Around 150 Staffordshire Children and Young people with SEN and Disability and | to other commissioned services including 0-19 Healthy Child service, Childhood Weight Management Service etc. Positive goal setting and personalised outcomes. providers required to work with Voluntary organisations to enhance SEND support an upskill other providers Around 150 Staffordshire Children and Young people with SEN and Disability and their families Involvement and early intervention by providers who will undertake their own risk assessments and monitor and feedback to SCC offer an additional level of involvement to ensure families stay safe. Providers committed contractually to SSCB safeguarding arrangements. Any concerns raised through monitoring and feedback | to other commissioned services including 0-19 Healthy Child service (Childhood Weight Management Service etc. Positive goal setting and personalised outcomes. providers required to work with Voluntary organisations to enhance SEND support an upskill other providers Around 150 Involvement and early intervention by young people with SEN and Disability and their families and monitor and feedback to SCC offer an additional level of involvement to ensure families stay safe. Providers committed contractually to SSCB safeguarding arrangements. Any concerns raised through monitoring and feedback + Support will |

| Category Area | Which groups | Benefits | Risks | Mitigations / |
|--|---|---|---|---|
| (Areas highlighted are suggestions only and there may be other impacts in these categories) | will be affected? | | | Recommendations |
| | | understand the risks with community-based activities & support and develop the skills to manage their care independently as far as is possible | | |
| Access to | Staffordshire | Step up and | Having | 1) Developing clear |
| Will the proposal enable people to access appropriate interventions at the right time? | Children and Young people with SEND and their families whose needs can be met by an effective 1:1 support service by earlier intervention and therefore reduce the reliance on the need for Social Care Support & more costly interventions | step down within services and support will enable the right support at the most appropriate and beneficial time. Different service providers will be able to work together to offer combined support | resources 1) Dedicated finances 2) Dedicated social care staff 3) Resilient Market. Growth of 1-1 | pathways of support offer 2) Engage with providers to build market provision |
| 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? | 150 Staffordshire Children and Young people with SEND and complex needs and their families | C/YP will be supported to access opportunities independently at home and in the community. Providers will be expected to offer their skills to other groups and develop more inclusive community-based activities | Family and community hesitancy, and knowledge of possibilities | Working with agencies, providers and families to challenge barriers to inclusion for C/YP with SEND |

| Category Area | Which groups | Benefits | Risks | Mitigations / |
|---|--|----------|---|---|
| (Areas highlighted are suggestions only and there may be other impacts in these categories) | will be affected? | | | Recommendations |
| Safeguarding | | | | |
| Will the proposal ensure effective safeguarding for the most vulnerable in our communities? | All Staffordshire Children and young people with SEND and their families who are in receipt of support | • • | "No shows" or concerns not recorded or followed up | Requirement of contract to undertake agreed safeguarding training and recording, processes & procedures, in line with SSCB policies |

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

The C/YP accessing 1:1 Aiming High Lifeskills often request more hours from providers to enable achievement and sustainability of more independent outcomes, which result in less reliance on formal Social Care involvement in the future. However the life skills offer is currently underutilised with many providers able to offer more support to more families.

The enablement element of the community support framework supports C/YP to gain additional skills but partly replicates the outcomes of the Aiming High lifeskills intended outcomes. Some providers are registered on both schemes and are currently contractually restricted by the limitations of what hours of support they could offer – the proposed approach will remove this inflexibility from April 2022.

Current arrangements do not readily allow support to be flexed to meet rapid changes in need or allow for tapered support and input as outcomes are achieved.

Social care assessments take 45 days and up to 25% of these requests (i.e. those not progressed) are more appropriately supported by IAG and lower level intervention e.g. Tier 2 support. Costs are aligned to the step/level of need and enabling socialisation and independence; currently £15.66 per hour [current rates for community care support)

Between 25% -40% of people with LD also have Mental Health problems. Early intervention and support can help to identify any additional needs and potentially avoid escalation. MH org research paper

| Category Area | • • | Benefits | Mitigations / |
|---------------------|-------------------|----------|-----------------|
| (Areas highlighted | will be affected? | | Recommendations |
| are suggestions | | | |
| only and there may | | | |
| be other impacts in | | | |
| these categories) | | | |

However, Staffs &Stoke JSNA for Children & Young People Emotional Health 2018 indicates that the estimated MH for vulnerable groups is Children with Special Educational needs =44% and Children with LD =36%

https://www.staffordshireobservatory.org.uk/documents/Health-and-Wellbeing/Emotional-wellbeing-JSNA-July-2018-FINAL.pdf

The new support arrangements will be more quickly responsive to changes. The need to be able to offer a more flexible support was highlight lighted during the current pandemic. https://learning.nspcc.org.uk/media/2521/impact-of-coronavirus-pandemic-on-child-welfare-deaf-disabled-children.pdf

Economy

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

| Category Area | Which groups | Benefits | Risks | Mitigations / |
|--|---|---|---|---|
| (Areas highlighted are suggestions only and there may be other impacts in these categories) | will be affected? | | | 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? | Care market providers, agencies, voluntary sector | New entrants to the Childrens Care market could develop their business & market share Current Adult Social Care providers could diversify and offer a greater range of age support. local economy would grow due to more local employment opportunities | Recruiting staff challenging in a stressed (post Covid) care market. Care sector pay rates make other employment more attractive | Benchmarking rates across neighbouring geographical areas. To ensure optimal value for money not merely cheapest options. Joint working with care sector to make care giving an attractive option for suitably motivated individuals |

| 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 |
|---|--------------------------------|--|---|---|
| Poverty and Income Will the proposal have an impact on income? Will it reduce the gap between high and low earners? | Provider staff Families | Employees will have job opportunities to improve their income Parent/carers will have opportunity to pursue work options whilst C/YP has support from | Rates paid for care staff need to be realistic and attractive to maintain workforce Suitable opportunities for parent/carers to access employment or training during | SCC assessments to include whole family needs Agency rates benchmarked against other West Midlands Authorities |
| | | SCC and their wider community | care hours | |
| Workplace Health and Environments Will the proposal impact on working conditions and the health of Staffordshire's | Provider staff | Improved understanding of SEND and working together with other agencies and SCC | None | Feedback from service delivery |
| workforce? | Social care staff | SCC staff have opportunities to help shape the market and include providers in SEND knowledge | SCC time and commitment | |
| | Families | Families will be able to inform delivery through experience & choice | Ensuring mechanisms in place to capture parent/carer feedback | |
| Access to jobs/ Good quality jobs Will the proposal create the right conditions for increased | Providers | Opportunity for dual registration for adults and children giving employees additional scope | Limited market resources and high demand for adults packages of care. | Commissioned services to identify any gaps and maximise use of available staffing resource |

| Category Area | Which groups | Benefits | Risks | Mitigations / |
|---|-------------------|---|--|---|
| (Areas highlighted are suggestions only and there may be other impacts in these categories) | will be affected? | | | Recommendations |
| employment in more and better jobs? | | of employment and to enhance their skills | Contracts of minimum hours may be requested by providers. | |
| | Families | Parent carers may have opportunity to seek their own employment | All CYP typically require support at the same time (6- 9.00am, 18.00- 21.00) Parent/carer work patterns | SCC assessment to include whole family needs. Further investigation into parent carer needs |

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

Prior to framework arrangements some providers demanded minimum hours contracts of 4 hours when 1 hour support was required. As the opportunity to combine Children's Community Support was not included in the Adults Domiciliary Care framework social care Children Social Care staff have been reliant on what support they could broker from a limited number of agencies. Since the establishment of the current framework contract in 2018 more realistic hourly rates have been agreed which are comparable with other authority arrangements (see West Mids benchmarking spreadsheet) However there are still only 4 main providers for Childrens community care and efforts are ongoing to encourage more care providers to dual register with CQC as both Childrens and Adults providers.

There are also only 4 Aiming High lifeskills providers 2 of which also provide community care but at different (lower) rates, and its this which presents us with an opportunity to both meet need earlier, but also more cost effectively.

Parent and Carers have fed back (March 2021) that do not know of, or find information on how to access the current schemes and support opportunities difficult (<u>parent carer survey</u>) and find navigating systems overwhelming at times of stress.

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 | Which groups will be affected? | Benefits | Risks | Mitigations / Recommendations |
|---|---------------------------------|--|---|---|
| are suggestions only and there may be other impacts in these categories) | | | | |
| Built Environment/ Land Use Will the proposal impact on the built environment and land use? | Premises/facilities and users | utilise available premises and work with businesses to ensure compliant for C/YP with SEND needs Could make better use of School and especially Special School premises for delivery of | Costs to small businesses to make DDA compliant | Grants for updating accesses and use, e.g. Disability Facilities Grant Joint working with District and Brough Strategic Housing Leads Joint working with OT teams Joint work with schools and other community venues to maximise use of facilities |
| Rural | Not applicable to | support | | lacilities |
| Environment | Not applicable to this proposal | | | |
| Will the proposal impact on the rural natural environment or on access to open spaces? | ина ргорозаг | | | |
| Air, Water and | Not applicable to | | | |
| Will the proposal affect air quality (e.g. vehicle, industrial or domestic emissions), drinking water quality or land quality (e.g. contamination)? | this proposal | | | |
| Waste and | Providers | Providers will | Provider fined if | Ensure compliance |
| Recycling | | need to | not compliant | documentation and |
| Will the proposal affect waste (e.g. disposal) and recycling? | | evidence safe and appropriate disposal of any waste | and could affect reputation of SCC | insurances cover responsibility of Providers |

| Agriculture and Food Production Will the proposal affect the production of healthy, affordable and culturally acceptable food? | Providers | Providers expected to adhere to SCC expectations to promote healthy eating and prepare culturally/faith appropriate food where required | Working with families to promote best choices | Include in specification, tender process and monitoring of service delivery |
|---|-------------------|---|---|---|
| Transport Will the proposal affect the ability of people/ communities/ business to travel? Will the proposal impact on walking/ cycling opportunities? | Support providers | Opportunity to include independent travel training as part of service delivery | Lack of suitable affordable transport and carer/companion. Existing transport policies inflexible to fulfil family's needs Difficulty of access in rural locations such as Moorlands & South Staffs | Providers will be required to offer support at accessible venues (where not home-based support) and encourage sustainable transport options wherever safe and possible to do so |
| Will the proposal cause disruptive noise? | None noted | | | |
| Climate Change Does this proposal have any Climate Change implications? | None noted | | | |

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

Families have commented (March 2021) on time used for travel makes some support options unrealistic. More provision is needed closer to families or providers include transport to other localities.

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. Strategic Delivery Managers (SDMs) 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? | Providers Voluntary sector Universal services | Increased employment opportunities and SEND knowledge and training across all sectors within the community Commissioned providers will be required to "upskill" and involve community workers and voluntary sector in service delivery | Shortage of available workers or access to universal services. Changes in staffing and process costs of DBS's | Local community involvement and local delivery Investigate the possibility of SCC as DBS organiser Make this a clause within each contract |
| Crime/ Community Safety Will the proposal support a joint approach to responding to crime and addressing the causes of crime? | C/YP with SEND and their families General public Agencies | Additional support for vulnerable families Greater understanding of public responsibility for safer communities multiagency support for families | Ensuring SEND on everyone's agenda, and raising the profile of Disability hate crime | Multiagency support on SEND groups Involvement of BRFC and local leads Develop links with SPACE programme and the Office of the Staffordshire Commissioner (for Police/Fire) |

| 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 | C/YP with SEND SCC Staff | C/YP and their families supported to enable positive outcomes and have short breaks involving learning experiences | Coordination of effective support and maximising resources without duplication | Recording all input and outcomes in accessible formats and C/YP "file" eg capita – EHCP Ensuring information included as part of Preparation for Adulthood pathway and shared with Adult Services |
|---|--------------------------|--|--|--|
| employability of residents? | | SCC staff to support delivery of EHCP needs and outcomes | | |
| | Commissioned providers | Providers can develop support to include e.g ASDAN, | | |
| | Other agencies/providers | Building relationships with other associations e.g. Princes Trust | | |
| Leisure and | Commissioned | Specific use of | | Training for L&C |
| Culture | providers | L& C | | providers |
| Will the proposal encourage people | | opportunities to be included in | | Investigate carer |
| to participate in | | delivery of | | options and work |
| social and leisure activities that they | | support | Restrictions on | |
| enjoy? | | 1.00. | equipment or | organisations |
| | Universal services | availability and | staff | Core focus of |
| | | inclusive | | proposals will be |
| | | activities | | twofold: |
| | Families | Family and | Availability of | Encouraging CYP and their |
| | arrilles | siblings to have | appropriate | families to access |
| | | opportunities to | staff | local community |
| | | be supported to | | facilities & |
| | | enjoy L &C | | resources, independent of |
| | C/YP with SEND | L&C to offer | | SCC paid-for |
| | | support for C/YP | | support |
| | | to access independently | | Upskilling local non-specialist |
| | | | | groups and |
| | | | | community |
| | | | | providers to help them become |

| | | | | more inclusive for CYP with SEN and Disability |
|---|--|---|---|---|
| Will the proposal impact on opportunities for volunteering? | General public and voluntary organisations | Public awareness and understanding of the SEND agenda and needs of C/YP. By providers working within local communities more opportunities may arise for people to volunteer which in turn offers Increased skills for volunteers for future employment | DBS checks and continuity of volunteers. | Planning of resources and DBS support |
| 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? | Families accessing the services | Families are supported by providers and agencies Links to other commissioned support C/YP have enabling opportunities ASDAN and learning opportunities | None | Pathways and clear eligibility for support |
| Rural Communities Will the proposal specificallyimpact on rural communities? | Families across all of Staffordshire | Equitable access to support for families from new providers for all areas | Providers equipped for rural communities including travel time into support without detriment to costs and delivery | Explore community rural resources to match supply and demand for services |

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

The Send Local Offer Task & Finish group have developed <u>Champions</u> within agencies and Services to promote activities and support across Staffordshire. The group was developed in 2020 to scope and promote IAG for families and professionals and providers.

Greater involvement across the community gives more opportunities to providers to utilise facilities and engage with universal services to upskill staff and deliver care and support within the community. More organisations have the SEND and Inclusion agenda embedded into their everyday business and promote the support for families within their local community via the Staffordshire Connects webpages and Enjoy Staffordshire has been updated with SEND information

A <u>briefing paper</u> has also been prepared for Members to highlight the efforts to support families of C/YP with SEND

Submitting a CIA

Now transfer the main findings of this assessment to the 'Checklist and Executive Summary' template. Then both documents need to be approved/signed off by the appropriate people. For CIAs that are going to Cabinet, only the 'Checklist and Executive Summary' will be submitted as part of the Cabinet Papers. The Full CIA document will be submitted as a Background Paper.