Cyngor Abertawe Swansea Council

City and County of Swansea

Notice of Meeting

You are invited to attend a Meeting of the

People Policy Development Committee

At: Committee Room 5 - Guildhall, Swansea

On: Wednesday, 19 September 2018

Time: 4.00 pm

Chair: Councillor Ceri Evans

Membership:

Councillors: C Anderson, S J Gallagher, P R Hood-Williams, E T Kirchner, M B Lewis, S Pritchard, C Richards, M Sykes and G J Tanner

Agenda

Page No.

- 1 Apologies for Absence.
- 2 To receive Disclosures of Personal & Prejudicial Interests from Members.

www.swansea.gov.uk/disclosuresofinterests

3 Minutes: 1 - 6

To approve and sign the Minutes of the previous meeting(s) as a correct record.

- 4 Adverse Childhood Experience (ACE) To what extent is the 7 12 Council already ACE informed?
- 5 Work Plan 2018-2019.

Next Meeting: Wednesday, 17 October 2018 at 4.00 pm

Huw Evans

Huw Em

Head of Democratic Services

Thursday, 13 September 2018

Contact: Democratic Services - (01792) 636923

Agenda Item 3



City and County of Swansea

Minutes of the People Policy Development Committee

Committee Room 3A - Guildhall, Swansea

Wednesday, 25 July 2018 at 4.00 pm

Present: Councillor C R Evans (Chair) Presided

Councillor(s)Councillor(s)Councillor(s)C AndersonP R Hood-WilliamsE T KirchnerM B LewisS PritchardC Richards

Officer(s)

Simon Jones Social Services & Wellbeing Act Strategic Lead

Allison Lowe Democratic Services Officer

Mark Sheridan Head of Vulnerable Learner Service

Jo Veck Senior Solicitor

Apologies for Absence

Councillor(s): M Sykes, G Tanner

10 Disclosures of Personal & Prejudicial Interests.

In accordance with the Code of Conduct adopted by the City & County of Swansea no interests were declared.

11 Minutes:

Resolved that the Minutes of the People Policy Development Committee held on 20 June 2018 be approved and signed as a correct record.

12 Adverse Childhood Experiences (ACE) - Understanding the Implications of ACE's for Citizens.

The Head of Vulnerable Learner Services provided a presentation on Well-being – A Strategy Framework regarding the strategic approach to Well-being for children and young people which included acknowledgement of the impact of Adverse Childhood Experiences (ACEs).

He outlined the background, definition of Well-being, the Vision, Principles and Graduated Model of Promotion, Nurture and Support, the Well-being Framework.

He suggested that the Committee take a more overarching approach in terms of Wellbeing, rather than focusing solely on an ACE's approach.

Minutes of the People Policy Development Committee (25.07.2018)

The Committee made the following points:

- Concern expressed that we seem to be focusing solely on children when traumatic experiences can affect children through into adulthood;
- The Swansea Public Services Board had published their Wellbeing Plan we need to link in with our partners eg Police, Health, 3rd Sector;
- Already good work ongoing with 'Rights Respecting' in our schools;
- An example of training on children's mental health was highlighted which depicted slides on the brain of well stimulated child compared to that of one that was not stimulated;
- All teachers, governors and staff all need to be aware of the basic training.
 Most schools are doing it but it is not consistent;
- Need a multi-agency approach most of these children can be identified by the schools so those with ACE's should be identified early;
- 2 types of ACE's those that could be anticipated and those that could not be anticipated;
- The most appropriate services to identify early cases would be via colleagues in maternity services and health eg health visitors;
- Also a big issue with Young Adult Carers they don't see being a Young Adult Carer as an ACE;
- Would like to be able to prevent children who suffer from ACE's from revisiting them when they progress into adulthood.

Simon Jones, the Social Services Strategy and Performance Improvement Officer stated that there was an ACE Support Hub with broad representation from Health, Police and 3rd Sector that could be utilised if required.

The Head of Vulnerable Learner Services stated that the preferred option was for ACE's to become part of the Wellbeing Strategy with a work stream around ACE's in order to develop skills such as train the trainer. There could then be an action plan to develop ACE awareness across Social Services & Education to encompass actions as part of the work stream that would contribute to the broader Wellbeing Strategy. It would also identify whether progress was being made.

The Committee considered whether they should continue with the Work Plan as previously agreed or change it slightly to support the 'Behaving Well Sub Group' in order to develop the wider Well-being Strategy.

The Committee agreed that they should concentrate on an achievable outcome such as focussing on ensuring a consistent approach for all staff, Governors, Teachers and Councillors in relation to training associated with ACE's.

The Committee could also be updated on the progress of the Wellbeing Strategy as and when necessary.

The Chair thanked the Health of Vulnerable Learner Services for his presentation.

Minutes of the People Policy Development Committee (25.07.2018) Cont'd

Resolved that:

- 1) The presentation be noted;
- 2) Simon Jones, the Social Services Strategy and Performance Improvement Officer attend the next meeting to further consider the Implications of ACE's for Citizens.

13 Work Plan 2018-2019.

The Chair outlined the Work Plan for 2018-2019.

Resolved that the Work Plan be noted.

The meeting ended at 5.20 pm

Chair



City and County of Swansea

Minutes of the People Policy Development Committee

Committee Room 5 - Guildhall, Swansea

Wednesday, 15 August 2018 at 4.00 pm

Present: Councillor C R Evans (Chair) Presided

Councillor(s)Councillor(s)Councillor(s)C AndersonS J GallagherP R Hood-Williams

E T Kirchner M B Lewis G J Tanner

Officer(s)

Simon Jones Social Services Strategy and Performance Improvement

Officer

Allison Lowe Democratic Services Officer

Lisa Thomas Senior Lawyer

Apologies for Absence

Councillor(s): S Pritchard and C Richards

14 Disclosures of Personal & Prejudicial Interests.

In accordance with the Code of Conduct adopted by the City & County of Swansea, no interests were declared.

15 Adverse Childhood Experience (ACE) - Understanding the Implications of ACE's for citizens.

Simon Jones, Social Services Strategy and Performance Improvement Officer provided a powerpoint presentation in order to understand the implications of Adverse Childhood Experiences (ACE's) for citizens.

The presentation outlined the background and definition of what constitutes an ACE. It detailed how many adults in Wales had been exposed to each ACE, the prevalence of how many citizens were affected, the risk to citizens, its impact on citizen well-being and how we could consider dealing with this differently for our citizens via:

- Different way of looking at journey into services / needs / pathways / support roles:
- Supporting whole system thinking about public services currently services are commissioned to deal with a single problem, eg tenancy support, pupil referral, family support;
- Potential for network of ACE informed / aware organisations in Swansea:

Minutes of the People Policy Development Committee (15.08.2018) Cont'd

- Potential for identifying safe places;
- Promoting 'kindness' / ACE awareness at all front door / public-facing access points:
- Just having the ACE's conversation can make a difference to citizens.

An ACE support hub had been established in 2017 by Cymru Well Wales to address ACE's and their impact in Wales through a whole system approach and to drive the achievement of the collective vision for Wales as a world leader in ACE-free childhoods.

Discussions centred around the following: -

- Acknowledgement that the Government are now highlighting ACE's;
- Health & Safety training for Teachers on how to handle children with mental health issues was highlighted;
- The need to be able to identify and quantify the factors in an attempt to 'break the cycle';
- Bullying in schools could also be seen as an ACE schools require consistency of how to identify and deal with cases;
- Various stages to consider:
 - o Pre-birth;
 - The First 1000 days;
 - Transition to senior / comprehensive school;
 - Transition into adulthood;
- This has been ongoing for many years, it is not a new concept;
- A partnership approach with Police, Health, etc. is required;
- Consider focusing on parents who were due to become first time parents again in a bid to break the cycle;
- Work already ongoing in Flying Start, Child Protection, Team around the Family:
- Consider having a 'Statement of Purpose', such as a kindness statement so it can be instilled into our culture;
- Perhaps there could be an 'add on' to the Safeguarding Strategy / training which is mandatory for all staff – everyone's responsibility to include information on ACEs;
- Reiterated that maternity services and health visitors were the key people who could identify cases at an early stage;
- Need to raise awareness of ACEs to everyone;
- Public Health Wales already undertaking much work on ACEs there is an ACEs framework in existence:
- Swansea Public Services Board has recently signed up to First 1000 days collaborative;
- The extremely high cost to public services throughout the life of someone with ACE's, which again highlighted the need for early intervention.

The Chair thanked the Social Services Strategy and Performance Improvement Officer for his presentation.

Minutes of the People Policy Development Committee (15.08.2018) Cont'd

Resolved that:

- 1) The presentation be noted;
- 2) At its next meeting on 19 September 2018 the Committee consider:
 - a. The ACE's framework;
 - b. The concept of a 'Statement of Purpose'.

16 Work Plan 2018-2019.

The Chair presented the Work Plan for 2018-2019.

Resolved that:

- 1) The Work Plan be noted;
- 2) The meeting scheduled for 19 September 2018 consider:

ACE's – To what extent is the Council already ACE informed to;

- Receive information regarding the ACE's framework;
- Consider a 'Statement of Purpose'.

The meeting ended at 5.05 pm

Chair



PROFIADAU NIWEIDIOL MEWN PLENTYNDOD ADVERSE CHILDHOOD EXPERIENCES

ACE Informed Environments Framework for Service Delivery and Design

Congruence with Future Generations Act Five Ways of Working











What this means for service design and how it operates

Reflective Questions to consider

Congruence with Future Generations Act

1. Psychological Framework:



ACE Informed organisations have purpose can adapt

1.1. There an explicit understanding of a ACE informed approach to work that can be described by all staff (staff understand how their work prevents, tackles and/ or mitigates ACEs)

1.2. There is an explicit commitment to Growth and Change (because ACE informed organisations are learning organisations that change and adapt according to feedback)

1.3. The service/organisation includes ACE informed a part of its responsibility

1.4. There is a policy which outlines ACE informed principles and practice

1.5. Policies outline the relationship between ACEs and resilience and considers the implications for service access and design

1.6. ACE informed practice, culture, and awareness of ACEs is endorsed by leadership

1.7. Service design, development, and evaluation are informed by an evidence based psychologically informed model

1.8. Relationships and work with commissioners is underpinned by a focus on ACE informed services

Organisational Commitment

Is there an explicit psychologically informed model or approach and can all staff describe and understand the approach or model they are working to?

 (i.e. what are the evidence based models used and understood by staff and how do these incorporate an understanding of ACEs?)

<u>Is there a sense of organisational</u> <u>mission and purpose?</u>

Does this matter and contribute something to the greater good?

 Do that staff feel that they are part of something bigger than themselves?

Is there a vision?

A clear understanding about what the organisation does and who it serves?

 Is there also a sense of what it can become?

 Is there a future orientation and a drive to learn, change and grow?

Reflective Practice

 Are leaders willing to change if the strategies they are using are not yielding the desired results?

 Is there an understanding that change requires a level of risk, which is accepted and tolerated? Long term: the importance of balancing short-term needs with the need to safeguard the ability to also meet long term needs.

People can access the service they need, when they need it and only for as long as they need it.

Always learning, positively challenging and aiming to improve

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What this means for service design and how it operates

Reflective Questions to consider

Congruence with Future Generations Act

2. Evidence Generating Practice:



ACE Informed organisations are inclusive

- 2.1. Leadership is collaborative and includes people who use services in the development and evaluation of ACE informed approaches
- 2.2. There is a structured process to obtain feedback and ideas from people who use the service and staff
- 2.3. There is a steering or clinical reference group and/or champions who drive implementation of ACE informed work and includes people who use the service
- 2.4. Information on the experiences of people who receive services is regularly gathered and is used to inform service planning
- 2.5. Evaluation of ACE-informed policies and practices is regularly conducted as part of the review and planning process to implement change where relevant

Reflective Practice

- Can organisations be open and transparent about mistakes, poor performance or limited efficacy (so as to foster a culture of safety and learning?)
- Are leaders willing to share power, listen deeply and incorporate feedback into the planning process?
- Is there a willingness and a mechanism to continually hold what we do up against what we believe and to work to close gaps between the two?
- Is there a willingness and openness to learn from others outside the organisation and integrate best practice into the organisations/service/team's repertoire?

Co-production and collaboration

Do all members of the team and the people it is serving or supporting feel that their opinions matter and that their participation in decision making, monitoring and evaluating progress is important and useful?

Are efforts made to hear the voices of marginalised groups?

Involvement: the importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves.

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Collaboration: acting in collaboration with any other person (or different parts of the body itself) that could help the body meet its well-being objectives.

Delivering an integrated service with partners in the best interest of the people accessing the service

Starting from what people can do, not what they can't and involving them in decision making as an equal partner

What this means for service design and how it operates

Reflective Questions to consider

Congruence with Future Generations Act

3. Environment:



ACE Informed organisations are safe place to work or access

3.1. Existing screening and assessment activity is informed by evidence based practice (and is therefore relational and compassionate)

- 3.2. People being assesses are informed about choice and control about what is shared (and will be informed where there is a legal obligation to share)
- 3.3. The potential for re-traumatisation during screening/assessment is recognised and strategies are in place to minimise this risk
- 3.4. Where risk assessments and safety plans exist they include: triggers/stressors; helpful/non-helpful strategies; people who are able to provide support as determined by people who use services
- 3.5. Policy is in place to inform how safety plans are utilised in crisis with regular review
- 3.6. Assessment and support environments are safe and welcoming, with staff applying ACE informed approaches regardless of whether ACEs are known
- 3.7. Work environments for staff are safe and welcoming

Organisational Culture:

- Are efforts made to align policies, procedures, practices and systems to ensure the well-being of all stakeholders?
- Are leaders aware of their own vulnerabilities and challenges?
 Do they use power to advance the organisations/service/team's mission or their own personal agenda?
- Do organisational leaders
 make efforts to build trusting
 relationships with staff by
 supporting staff's best efforts,
 helping them acquire new skills
 and competencies, being honest
 and direct, and cultivating a
 sense of mission and community?

A safe and innovative culture:

- Is the focus of safety inclusive of physical, psychological, social and moral safety? i.e. do people feel safe to make mistakes? Say what's on their mind? Be who they are? To trust others?
- Is it safe to take reasonable risks?
- Is innovation abundant?
- Is change viewed as an opportunity or threat?
- How is the impact of work on staff recognised as important?

Collaboration: acting in collaboration with any other person (or different parts of the body itself) that could help the body meet its well-being objectives:

- Starting from what people can do, not what they can't and involving them in decision making as an equal partner
- Always learning, positively challenging and aiming to improve
- People can access the service they need, when they need it and only for as long as they need it.



What this means for service design and how it operates

Reflective Questions to consider

Congruence with Future Generations Act

4. Staff Training



Staff Support

4.1. Senior leaders consider the service provision required for people who have experienced ACEs or who find accessing services difficult or problematic

4.2. Leadership allows for the resourcing of implementing ACE informed services

- 4.3. All staff (at all levels) receive basic awareness training of ACEs that furthers understanding of ACEs and trauma related issues and how this may impact on people's engagement and relationship with services.
- 4.4. Training includes the development of collaborative working with people who have experienced ACES and trauma.
- 4.5. Training includes awareness of trauma-specific and specialised services locally
- 4.6. More advanced PIE/ACEs training is provided for relevant staff
- 4.7. All staff who are working with people who have experienced trauma receive structured strength-based supervision from someone who is trained in understanding trauma to include: impact on well-being and stress responses; self-care; safety
- 4.8. Staff have access to forums that include opportunities for sharing of trauma related practice knowledge and skills (a community of practice)
- 4.9. Opportunities for informal reflection, peer support and consultation are regularly provided
- 4.10. The organisation/service/team regularly evaluates and gets input from staff in relation to safety and the wellbeing of staff
- 4.11. The organisation/service/team provides appropriate support for staff who have experienced vicarious trauma.

Culture:

Do leaders in the organisation consistently model emotional intelligence/self-awareness and encourage healthy expression of emotions?

Reflective Practice and Culture:

- Does your organisations/ service/team accept that distressing emotions can be inevitable and normal and therefore it creates the space and time to talk about and recover from the challenges ofwork?
- Does your organisation/ team/service recognise that stress and unmanaged conflict can easily dominate a work environment unless there are adequate conflict management resources (that are ACE and trauma informed)
- How intrinsic is reflective practice in the fabric of your organisation?
- Is it recognised as a key tool for effective working and achieving the organisations outcomes?

Long term: the importance of balancing short-term needs with the need to safeguard the ability to also meet long term needs.

Prevention: how acting to prevent problems occurring or getting worse may help public bodies meet their objectives.

Involvement: the importance of involving people with an interest in achieving the well-being goals, and ensuring that those people reflect the diversity of the area which the body serves.

Always learning, positively challenging and aiming to improve
Starting from what people can do, not what they can't and involving them in decision making as an equal partner

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What this means for service design and how it operates

Reflective Questions to consider

Congruence with Future Generations Act

5. Relationships:



ACE informed organisations recognise relationships as a key tool for wellbeing, support and change



5.1. Asset based, creative working is

5.2. Relational approaches are nurtured and understood by leaders and staffal

5.3. Communication flows throughout the organisation/service/ team and information exchange is abundant

5.4. Leaders model good communication skills and encourage efforts to embed good communication practices in the structure of the organisation

5.5. The organisation/service/team creates opportunities for people to talk to each other, resolve conflicts, share ideas, solve problems and set goals

5.6. Information is shared in a timely and useful way

5.7. Initial contact with all people who use services is respectful, welcoming and engaging

5.8. People who receive services are supported through transition between services (as far as possible)

How relational approaches are understood:

 Are relationships recognised as a principal tool in service delivery and effectiveness?

 Are staff always curious about what behaviour is communicating? (colleague or service user)

 Is 'non-engagement' understood as communication?

How is this reflected and acted upon?

 How is 'challenging' engagement understood, reflected on and acted upon?

Flow of Information:

 Does information sharing occur up, down, and sideways within and without the organisation?

 Are people able to seek answers when they are confused or unclear by a communication?

 Are boundaries used as an excuse for not sharing information or communicating?

Whole system approach:

 Is there an awareness of the organisation/service/team as a living system?

 And that this is dependent on the maintenance of feedback loops? **Collaboration:** acting in collaboration with any other person (or different parts of the body itself) that could help the body meet its well-being objectives:

 Starting from what people can do, not what they can't and involving them in decision making as an equal partner

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 People can access the service they need, when they need it and only for as long as they need it.

Integration: considering how public bodies' well-being objectives may impact upon each of the well-being goals, on their other objectives, or on the objectives of other public bodies.

Long term: the importance of balancing short-term needs with the need to safeguard the ability to also meet long term needs.

Prevention: how acting to prevent problems occurring or getting worse may help public bodies meet their objectives.

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Agenda Item 5



Report of the Chair

People Policy Development Committee

Workplan 2018-2019

Date of meeting	Agenda items and Format
20 June 2018	Work Plan Discussion
25 July 2018	Adverse Childhood Experiences (ACE) – Understanding the implications of ACE's for citizens.
15 August 2018	Adverse Childhood Experiences (ACE) – Understanding the implications of ACE's for citizens.
19 September 2018	Adverse Childhood Experiences (ACE) – To what extent is the Council already ACE informed?
17 October 2018	Adverse Childhood Experiences (ACE)
7 November 2018	Transition – How does transition currently work across the Health, Social Care and Education system, particularly focussing on citizen experience.
12 December 2018	Transition – Current plans to improve transition.
16 January 2019	Transition – Proposals to improve particularly focussing on voice and choice of citizens.
20 February 2019	Supported Living – What is Supported Living and how are new arrangements developed.
29 March 2019	Supported Living – Current arrangements to engage community including Ward Members.
17 April 2019	Supported Living – Current proposals to improve community engagement and Ward Members.