



## Report of the Chair of People Policy Development Committee

Cabinet – 17 January 2019

### Adverse Childhood Experiences

<b>Purpose:</b>	This report is a summary of the work on Adverse Childhood Experiences (ACEs) as undertaken by the People Policy Development Committee, as part of the work programme agreed for 2018/19.
<b>Policy Framework:</b>	Well-being of Future Generations (Wales) Act 2015 Social Services & Well-being (Wales) Act 2014
<b>Consultation:</b>	This report was prepared after work undertaken by elected members and officers attending the People Policy Development Committee.
<b>Recommendation(s):</b>	It is recommended that: <ol style="list-style-type: none"><li>1. The report is received by Cabinet;</li><li>2. The way forward as set out in paragraphs 6.1 &amp; 6.2 is agreed.</li></ol>
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#### 1. Introduction and background

- 1.1 Adverse Childhood Experiences (ACE's) is a new national framework aimed at helping all public services in Wales address the present and future well-being and safety needs of Children, Young People and Adults. Adverse Childhood Experiences (ACEs) are traumatic events occurring before the age of 18. In Wales, citizens who were abused (verbally, physically or sexually) as children or brought up in households where there was domestic violence, parental separation (with conflict), alcohol or drug abuse or parental

incarceration are more likely to adopt health-harming and anti-social behaviours in adult life.

- 1.2 ‘Adverse Childhood Experiences (ACEs) are traumatic events occurring before the age of 18. There are **ten types of ACEs**, five of which relate directly to the child and five of which relate to the parents / household. These are highly stressful experiences occurring during childhood that directly harm a child (e.g. sexual or physical abuse) or affect the environment in which they live (e.g. growing up in a house with domestic violence).

<b>Ten Adverse Childhood Experiences (ACEs)</b>	
<b>Child</b>	<b>Parents / household</b>
<ul style="list-style-type: none"> <li>• Physical abuse</li> <li>• Sexual abuse</li> <li>• Emotional abuse</li> <li>• Physical neglect</li> <li>• Emotional neglect</li> </ul>	<ul style="list-style-type: none"> <li>• Mother treated violently</li> <li>• Household substance misuse</li> <li>• Household mental illness</li> <li>• Parental separation or divorce</li> <li>• Incarcerated household member</li> </ul>

*Table 1 Types of ACEs (Bellis et al 2016.)*

- 1.3 Adults in Wales who were abused (verbally, physically or sexually) as children or brought up in households where there was domestic violence, parental separation (with conflict), alcohol or drug abuse or parental incarceration are more likely to adopt health-harming and anti-social behaviours in adult life.
- 1.4 Whilst the Welsh ACEs Study focuses on household abuse (sexual, physical and verbal), domestic violence, parental conflict (parental separation), mental illness, alcohol abuse, drug abuse and incarceration, the Framework acknowledges other trauma and adversity including challenging/difficult life experiences that have long-lasting impact. Similarly, the language of ACEs will resonate less across some sectors. ACEs is interchangeable with other terms such as psychologically informed or trauma-informed.

## **2. ACEs Language**

- 2.1 There is a distinct and common language used within the Adverse Childhood Experiences (ACEs) framework. Some examples include: ACEs, as shown in Table 1, these are traumatic events occurring in childhood including:

- domestic violence
- parental abandonment through separation or divorce
- a parent with a mental health condition
- being the victim of abuse (physical, sexual and/or emotional)
- being the victim of neglect (physical and emotional)
- a member of the household being in prison
- growing up in a household in which there are adults experiencing alcohol and drug use problems.

- 2.2 Adverse Childhood Experience (ACE) Questionnaire – this is a 10-item self-report measure developed for the ACE study to identify childhood experiences of abuse and neglect.
- 2.3 ACE score – number of ACEs you have assessed for yourself using questionnaire. This is a tally of different types of abuse, neglect, and other hallmarks of a difficult childhood. According to the Adverse Childhood Experiences study, so the more challenging your childhood, the higher your score is likely to be, and therefore the higher your risk for later health problems.
- 2.4 Toxic Stress - a toxic stress response can occur when a child experiences strong, frequent, and/or prolonged adversity—such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate adult support.
- 2.5 Resilience – within the ACEs framework, this is seen as the person’s ability to return to being healthy and hopeful after bad things happen.
- 2.6 ACEs Informed Organisations- an ACEs informed framework has been developed by the ACES support Hub to build the skills, knowledge and awareness needed to help prevent the impact of ACEs, as well as showing ‘kindness’ towards mitigating their effects. An ‘ACEs Informed Approach’ would not necessarily require the development of new strategies or interventions, but rather consideration of how existing services can be fine-tuned, and how agencies can work together to utilise an improved understanding of the impact of adversity and how this can be prevented or ameliorated.

### **3. Policy Context**

- 3.1 ACEs are highly relevant for a wide range of organisations working to improve the lives of people across Swansea. Two key pieces of legislation highlighting Welsh Government’s commitment to prioritising collaborative working and early action to improve the well-being of people who need care and support:
  - Well-being of Future Generations (Wales) 2015 Act
  - Social Services and Well-being (Wales) Act
- 3.2 ACEs is one of the Future Generation’s Commissioners six policy priorities, and Public Health Wales are linking with their office, through Cymru Well Wales, to support public services to embed the seven goals and five ways of working in this area. This has further implications for our criminal justice system, as over 80% of all criminal activity in Britain is attributed to people who had behavioural problems in childhood or adolescence. A previous study showed that late intervention services aimed at children and young people in Wales end up costing £16.6 billion. The push is for strong approach to promote well-being, prevention and resilience across all stages of life, throughout public services, the criminal justice system, and in all aspects of health and social care.

3.3 The ACEs framework links closely to the following local policy developments:

- Well-being Plan / Needs Assessment
- Swansea Public Services Board -work programme
- Cymru Well Wales: The First 1000 Days
- Draft Integrated Wellbeing strategy for Children and Young People
- Corporate Safeguarding policy
- Corporate Prevention strategy
- Sustainable Swansea programme

#### 4. Current Research

4.1 Latest research quantifies that impact of ACEs on individuals and on society and demonstrates the significance of ACEs to every professional working with people and to the public universally. Within the public sector (including criminal justice, health, social services and education, local government and policy making) and wider, the research offers a real opportunity to build on the work that aims to reduce the impact that ACEs have on citizens.

4.2 Results from the first Welsh Adverse Childhood Experience (ACE) study (Public Health Wales, 2015) show that around one in every seven adults aged 18-69 years in Wales have experienced four or more ACEs during their childhood and just under half have experienced at least one. With regard to health-harming behaviours, in comparison to those who had not had these childhood experiences, those with four or more ACEs were:

- 4 times more likely to be high risk drinkers
- 6 times more likely to have had or have caused unintended teenage pregnancy
- 6 times more likely to smoke cigarettes or e-cigarettes
- 11 times more likely to smoke cannabis
- 14 times more likely to have been the victim of violence over the last 12 months
- 15 times more likely to have committed violence against others over the last 12 months
- 20 times more likely to have been incarcerated

There is an association between ACEs and mental health and wellbeing. In comparison to those who reported no ACEs, those with four or more ACEs were:

- 3 times more likely to have never or rarely felt relaxed
- 3 times more likely to have never or rarely felt close to other people
- 4 times more likely to have never or rarely been thinking clearly
- 5 times more likely to have never or rarely to have dealt with problems well
- 5 times more likely to have never or rarely been able to make up their own mind about things
- 6 times more likely to have never or rarely felt optimistic about the future
- 6 times more likely to have never or rarely felt useful

Living through traumatic events also increases the risk of a range of physical health conditions. Up to the age of 69 years, those with four or more ACEs were twice as likely as those with no ACEs to be diagnosed with a chronic disease, specifically:

- 4 times more likely to develop type 2 diabetes
- 3 times more likely to develop heart disease
- 3 times more likely to develop a respiratory disease

The Public Health Wales (2018) research report looks into sources of resilience and their moderating relationships with harms from ACEs demonstrates that building resilience across the life course can help avoid and overcome the harmful outcomes of ACEs. ACEs are everyone's business; everyone has a role to play in eliminating ACEs and improving the health, wellbeing and life outcomes for those who do experience ACEs.

#### 4.3 Links to Public Health Wales / ACEs resources / research findings / ACEs Support Hub:

<http://www.wales.nhs.uk/cymruwellwales>

<http://www.wales.nhs.uk/sitesplus/888/page/88524>

#### 4.4 There is a growing body of evidence that factors that affect a person's well-being can influence their behaviour and life chances. Research around adverse childhood experiences (ACEs) shows children who experience stressful and poor quality childhoods are more likely to develop health-harming and anti-social behaviours, more likely to perform poorly in school, more likely to be involved in crime and ultimately less likely to be a productive member of society (Bellis et al, 2015).

#### 4.5 On the other hand, there is an extensive body of research around resilience that suggests the provision of appropriate support at a community level can mitigate the effects of ACEs (Hughes et al, 2018). Action to promote well-being across a population can have a range of positive outcomes including higher educational achievement, reduced unemployment, reduced reliance on welfare and disability benefits, higher productivity in the workplace, reduced crime and anti-social behaviour, better social relationships and community involvement and reduced costs to health and social services (Joint Commissioning Panel for Mental Health, 2015).

#### 4.6 An ACE Public Services Board (PSB) support hub was 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.

### 5. **Work undertaken by the People Policy Development Committee**

Within the work programme 2018/19, the People Policy Development Committee (People PDC) looked at whether and how the Council could develop

a policy to become an ACE informed Council. In undertaking this work, People PDC considered ACEs within the following three policy questions:

- Understanding the implication of ACEs for citizens
- Benefits of being ACE informed Council and what this would entail doing.
- To what extent is the Council already ACE informed?

## **5.1 Understanding the implications of ACE's for citizens.**

5.1.1 In addressing this question, Mark Sheridan, Head of Vulnerable Learner Services, Swansea Council gave a presentation to the People PDC on the Councils current approach to well-being, including the draft Integrated Well-being Strategy for children and young people, which includes addresses the impact of Adverse Childhood Experiences (ACEs).

Also Swansea Public Services Board has developed a draft Local Well-being Plan 2018 following their assessment of well-being in 2017. The plan has four main objectives:

- To ensure children have the best start in life to be the best they can be.
- To make Swansea a great place to live and age well.
- To improve health, enhance biodiversity and reduce our carbon footprint.
- To empower communities promoting pride and belonging

5.1.2 Supporting Wellbeing and Safety for Children Young People and Families in Swansea 2017 sets out Swansea's vision and models of service delivery for Family Support Services across the Continuum of Need.

Swansea's Family Support Services aim to provide the right support at the right time through early identification of need and early intervention, targeted services working with a whole family approach to empower families to problem solve, build resilience and sustain change.

Swansea Child & Family services are committed to using a Signs of Safety model. This is an innovative strengths based, safety-organised approach to child protection casework, which is grounded in partnership and collaboration. It explores strengths and risks in families in order to stabilise and strengthen a child's and family's situation.

5.1.3 The Family Support Continuum Steering Group was set up to manage the work streams related to the various reviews linked to Family Support Services. The Behaviour and Well-being subgroup was tasked with:

- Developing an Integrated Wellbeing Strategy that includes an agreed definition of Well-being.
- Developing a Well-being Framework for assessment and self-evaluation.
- Developing a graduated continuum of response to map and provide services that improve behaviour and well-being.

The Behaviour and Well-being subgroup has made progress in the development of a strategy including describing the multi-faceted nature of well-being, setting out a broad vision statement, and agreeing a well-being framework for assessment, self-evaluation and mapping services and provision.

- 5.1.4 Swansea Council's draft Integrated Well-being Strategy for children and young people 2018-22, sets out the following definition of well-being, which is user friendly whilst capturing the multi-faceted and developmental aspects of well-being:

*Our well-being is made up of different factors at any one time and changes during our lifespan. It is affected by our experiences and background, how we think and feel, our ability to communicate and problem solve as well as our physical and mental health, relationships and sense of belonging in our communities.*

The strategy sets out the following vision:

*Swansea will promote, support and nurture every child and young person's wellbeing.*

Among the key objectives set within the strategy are:

- *To establish a lead strategic group to deliver the strategy*
- *To promote Swansea's definition of well-being and raise awareness of the impact of adverse childhood experiences across all key stakeholders*
- *To promote strengths-based approaches that develop resilience to support and nurture children and young people's well-being*

**See Appendix 1. A draft Integrated Well-being Strategy for children and young people 2018-22 v1.4.**

- 5.1.5 Whilst there was concern that Swansea's approach to well-being could seem to be focusing solely on children and young people, and that traumatic experiences can affect children through into adulthood, it was also acknowledged that there has to be a starting point for taking ACEs framework forward.

## **5.2 How could ACEs framework improve services to citizens?**

- 5.2a In considering this question, the People PDC looked further into the ACEs framework, and how it could support new ways of working. Making use of materials from a recent workshop arranged by the ACEs PSB Support Hub, Simon Jones, Social Services Strategy and Performance Improvement Officer presented on understanding the implications of Adverse Childhood Experiences (ACE's) for citizens.
- 5.2b This 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, e.g. tenancy support, pupil referral, family support;
- Potential for network of ACE informed / aware organisations in Swansea
- 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.

5.2c The People PDC discussed the new ways of thinking the ACEs framework can offer, and also recognised that:

- There is a strong case for raising awareness of ACEs to everyone, as everybody's business;
- Public Health Wales have already undertaking much research work on ACEs – and there is an ACEs framework for public organisations in existence, via PSBs;
- 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, highlights the need for early intervention, building resilience and strengths based approaches.

### **5.3 To what extent is the Council Already ACES informed**

5.3.1 In considering the third and final question, the People PDC had the opportunity to consider and discuss the Adverse Childhood Experiences (ACE) Informed Environments Framework for Service Delivery and Design, which outlined:

- I. Psychological Framework – ACE informed organisations have purpose and can adapt;
- II. Evidence Generating Practice – ACE Informed organisations are inclusive;
- III. Environment – ACE informed organisations are safe place to work or access;
- IV. Staff Training – Staff support;
- V. Relationships – ACE informed organisations recognise relationships as a key tool for wellbeing, support and change.

The Committee discussed the content of the ACEs framework and the aspects that could be utilised in order to accompany our current processes. They acknowledged that the Council already had certain plans and processes in place in order to be inclusive by having a wellbeing and safeguarding focus. However, there were concerns as to whether all staff had the correct level of ACEs awareness and whether the adequate level of support was provided to



our staff in order support citizens and to address the well-being needs of future generations.

- 5.3.2 The People PDC agreed that a resilience-based approach would be more productive than focusing solely on an ACE approach. We need to create the services and environment so that when service users experience ACEs, we can recognise these early and provide appropriate support to mitigate the risks to well-being as well as use evidence based interventions to improve resilience.
- 5.3.3 Through the Integrated Wellbeing Strategy for Children and Young People (2018-2021), Swansea Council has already recognised the effect of ACEs and importance of building resilience. Also by developing a Family Support Continuum via a Steering Group, the strategy could lead on an integrated approach to promoting and supporting children and young people's well-being. The Strategy (Appendix 1) offers a definition of wellbeing as well as setting out a framework for assessing a person's wellbeing at any time including potential risks to well-being. It also provided a model to promote and support well-being as well as guide interventions so they were preventative, timely and focused. This new strategy sits within the broader well-being priorities set out in the authority's Corporate Plan and Public Services Board's Local Well-being Plan.

## 6. Way Forward

- 6.1 In undertaking its work on ACES, the People PDC formed the view that Swansea Council was generally 'ACE informed' and working towards a shared strengths based, resilience building approach under an integrated strategic approach to well-being.

The Committee acknowledged that there may be need for further development of these approaches to support ACEs awareness in supports of Adults, and that there is a need for corporate staff ACE awareness as 'everybody's responsibility. This would require a more focused approach to future learning, training and development.

- 6.2 The following initial actions are proposed as a way forward:

- For the Council to develop and agree a 'Statement of Purpose' on ACEs, and to incorporate ACE awareness into future plans and policies.
- Taking forward awareness of impact of Adverse Childhood Experiences across all key stakeholders, through Swansea's **Integrated Wellbeing Strategy for children and young people 2018-22**.
- Strengthen links to ACEs framework within Council's Corporate Safeguarding policy and training, mandatory for all staff – as everyone's responsibility;
- Incorporate ACEs awareness when working with Adults and through Adult Services incorporating strengths based approaches
- Undertake a gap analysis based on the ACEs framework in order to map out current level of ACEs knowledge across Children & young people services

## **7. Equality and Engagement Implications**

7.1 The Council is subject to the Public Sector Equality Duty (Wales) and must, in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

Our Equality Impact Assessment process ensures that we have paid due regard to the above.

7.2 Adverse Childhood Experiences (ACEs) framework aims to improve social inclusion and to reduce impact that of adverse childhood experiences have when citizens engage with public organisations. Some citizens with protected characteristic may have had adverse childhood experiences. The intention is that Swansea's Integrated Wellbeing strategy for children and young people (Appendix 1) will incorporate work to promote ACEs awareness within Council's work in this area, and that a full Equalities Impact Assessment will be carried out before the strategy gets Council approval.

7.3 In order to comply with the relevant equality regulations, EIA Screening forms have been completed on both this report, and the Integrated Wellbeing strategy(see Appendices 3a & 3b), reaching a conclusion that a full Equalities Impact Assessment report is to be completed on the Integrated Wellbeing strategy for children and young people. The strategy is due to be discussed at the Getting It Right for Children steering group on 20 December 2018, and it is anticipated a full EIA would be produced at this time.

## **8. Financial Implications**

8.1 There are no financial implications associated with this report at this stage.

## **9. Legal Implications**

9.1 There are no legal implications in addition to those already set out in the body of the report.

**Background Papers:** None

### **Appendices:**

Appendix 1 - Draft Integrated Wellbeing strategy for Children and Young People 2018-2021 v1.4

Appendix 2 - Framework for ACEs Informed Organisation

Appendix 3 - Equalities Impact Screening forms:  
(a) this report; (b) draft strategy



**Draft**  
**Integrated Well-being Strategy**  
**For Children and Young People**  
**2018 – 2021**

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## Introduction

There is a growing body of evidence that factors that affect a person's well-being can influence their behaviour and life chances. Research around adverse childhood experiences (ACEs) shows children who experience stressful and poor quality childhoods are more likely to develop health-harming and anti-social behaviours, more likely to perform poorly in school, more likely to be involved in crime and ultimately less likely to be a productive member of society (Bellis et al, 2015).

On the other hand, there is an extensive body of research around resilience that suggests the provision of appropriate support at a community level can mitigate the effects of ACEs (Hughes et al, 2018). Action to promote well-being across a population can have a range of positive outcomes including higher educational achievement, reduced unemployment, reduced reliance on welfare and disability benefits, higher productivity in the workplace, reduced crime and anti-social behaviour, better social relationships and community involvement and reduced costs to health and social services (Joint Commissioning Panel for Mental Health, 2015).

In schools it has been shown that an integrated whole school approach to promoting social and emotional learning has positive impacts on attainments, social experiences and absence (Banerjee et al, 2016).

However, reviews also highlight difficulties in defining well-being and measuring the impact of any initiatives or interventions designed to improve children and young people's well-being.

This strategy sets out how Swansea Council will promote an integrated approach to promoting and supporting children and young people's well-being which is monitored through the 'Getting it Right for Every Child' steering group. It offers a definition of well-being as well as setting out a framework for assessing a person's well-being at any time including potential risks to well-being. It also provides a model to promote and support well-being as well as guide interventions so that they are preventative, timely and focused.

The strategy sits within the broader well-being priorities set out in the authority's Corporate Plan and Public Services Board's Local Well-being Plan. In particular, it relates to the Education Department's priorities and contributes to the authority's response to the Social Services and Well-being Act 2014.

The strategy includes children, young people and young adults from -9 months to 19 years and Social Services Child and Family teams including both statutory and non-statutory services, the Education department, commissioned services such as Exchange and other Families First funded projects as well as relevant Health teams such as Health Visitors, Community Paediatrics, Community Care and CAMHS. It is also relevant to parents / carers, children, young people, young adults and their families.

## Background

### *National vision and legislation*

#### United Nations Conventions on the Rights of the Child (UNCRC)

The Welsh Government formally adopted the UNCRC as the basis for policy making for children and young people in Wales in 2004. The Programme for children and Young People 2015 sets out the seven core aims which summarize the UNCRC and how they relate to the government's well-being goals:

We want all our children and young people to:

1. have a flying start in life (**the early years**)
2. have a comprehensive range of **education and learning opportunities**
3. enjoy the best possible **health and are free from abuse, victimisation and exploitation**
4. have access to **play, leisure, sporting and cultural activities**
5. be listened to, treated with respect, and have their race and cultural identity recognised (**participation in decision making**)
6. have a **safe home and a community** which supports physical and emotional wellbeing
7. **not be disadvantaged by poverty.**

#### Well-being and Future Generations Act 2015

The Well-being and Future Generations Act sets out a duty on all public bodies to promote the seven well-being goals that aim to improve social, economic, cultural and environmental well-being:

- A prosperous Wales
- A resilient Wales
- A healthier Wales
- A more equal Wales
- A Wales of more cohesive communities
- A Wales of vibrant culture and thriving Welsh language
- A globally responsible Wales

Public bodies must publish a well-being statement which includes a set of well-being objectives and a coherent joined up (integrated) strategy for meeting them. Public bodies must apply the sustainable working principles when setting their objectives and ways of meeting them: Long-term, preventative, integrated, collaborative and engaging/involving.

## Social Services and Well-being Act 2014

The Act imposes a duty on local authorities, health boards and Welsh Ministers to promote the well-being of those who need care and support or carers who need support.

The Act supports people who have care and support needs to achieve **well-being**. **People** are at the heart of the new system by giving them an equal say in the support they receive. **Partnership** and co-operation drives service delivery and services will promote the **prevention** of escalating need and the right help is available at the right time.

The Act states that well-being means a person is happy, healthy and is comfortable with their life and what they do.

It says well-being is made up of eight main parts:

- Making sure you have your rights
- Being physically, mentally and emotionally happy
- You are protected from abuse, harm and neglect
- Having education, training, sports and play
- Positive relationships with family and friends
- Being part of the community
- Having a social life and enough money to live a healthy life
- Having a good home

## Education in Wales – Our National Mission 2017 - 2021

The aim of the national mission is ‘to raise standards, reduce the attainment gap and deliver an education system that is a source of national pride and confidence’.

The innovative curriculum design which will underpin this mission, is based upon four key enabling objectives:

- Developing a high-quality education profession.
- Inspirational leaders working collaboratively to raise standards.
- Strong and inclusive schools committed to excellence, equity and well-being.
- Robust assessment, evaluation and accountability arrangements supporting a self-improving system.

The aim is that all children will be well-educated, safe and happy, to be treated fairly and benefit from high levels of well-being. For many of our young people, achieving those ambitions will require a renewed, collaborative focus across all of our public services, and a bold commitment to effective collaboration along with integration of services where appropriate.

## ALNET (Wales) Act 2018

The Additional Learning Needs and Education Tribunal (Wales) Act 2018 will replace the current Special Educational Needs (SEN) framework with a reformed system based on Additional Learning Needs (ALN).

The Act makes provision for universal, statutory Individual Development Plans for all children and young people with ALN. This will bring an end to the current distinction between school led interventions and local authority issued statements and integrate the separate legislative arrangements that exist for pupils in schools and post-16 students in colleges. The Act also seeks to improve collaboration between local authorities and health boards, as well as establishing a fairer and more transparent system with greater emphasis on disagreement avoidance and dispute resolution.

### **Swansea Context**

Swansea published its well-being objectives in March 2017 and incorporated these into its Corporate Plan 2017 - 2022:

- **Safeguarding people from harm** - so that our citizens are free from harm and exploitation.
- **Improving Education and Skills** - so that every child and young person in Swansea gains the skills and qualifications they need to succeed in life.
- **Transforming our Economy and Infrastructure** - so that Swansea has a thriving mixed use City Centre and a local economy that will support the prosperity of our citizens.
- **Tackling Poverty** - so that every person in Swansea can achieve his or her potential.
- **Transformation and Future Council development**- so that we and the services that we provide are sustainable and fit for the future.

This discharges the Council's duties under the Well-Being of Future Generations (Wales) Act 2015 and Local Government Measure (Wales) 2009 to set Well-being Objectives and Improvement Objectives.

The Education Department published its vision in 2018 that every child and young person will be able to develop to their potential and set out its five key priorities:

- **Curriculum** – We will deliver a curriculum fit for the 21<sup>st</sup> century which meets the needs in Swansea and those of our learners
- **Support for Learners** – We will support all learners to meet their varying need and remove barriers to allow them to reach their full potential
- **Leaders** – We will support leadership to ensure our current leaders and future leaders at all levels are developed to build resilience and sustainability into the Education system in Swansea
- **Workforce** – We will focus on quality teaching in every classroom every day to drive up outcomes and accelerate progress
- **Environments** – We will continue to support sustainable schools fit for the 21<sup>st</sup> century



Swansea Public Services Board has developed a draft Local Well-being Plan 2018 following their assessment of well-being in 2017. The plan has four main objectives:

- To ensure children have the best start in life to be the best they can be.
- To make Swansea a great place to live and age well.
- To improve health, enhance biodiversity and reduce our carbon footprint.
- To empower communities promoting pride and belonging

Supporting Wellbeing and Safety for Children Young People and Families in Swansea 2017 sets out Swansea's vision and models of service delivery for Family Support Services across the Continuum of Need.

Swansea's Family Support Services aim to provide the right support at the right time through early identification of need and early intervention, targeted services working with a whole family approach to empower families to problem solve, build resilience and sustain change.

Swansea Child & Family services are committed to using a Signs of Safety model. This is an innovative strengths based, safety-organised approach to child protection casework, which is grounded in partnership and collaboration. It explores strengths and risks in families in order to stabilise and strengthen a child's and family's situation.

In order to get this right for every child a steering group has been set up to manage the work streams related to the various reviews and commissioning reviews linked to Family Support Services. The Well-being subgroup is tasked with:

- Developing and implementing an Integrated Well-being Strategy for children and young people that includes an agreed definition of Well-being.
- Developing and implementing a Well-being Framework for assessment and self-evaluation.
- Developing and implementing a graduated continuum of response to map and provide services that improve behaviour and Well-being.

This strategy sets out the subgroup's response to the terms of reference above providing an agreed definition and framework for assessing well-being in line with policy and practice across Swansea and Welsh Government guidance.

## **Vision and Aims**

**Swansea will promote, support and nurture every child and young person's well-being.**

This strategy aims to offer an integrated approach to promote, support and nurture the development of children and young people's well-being through building the skills and capabilities for resilience. It recognises that an integral part of this aim is the promotion and support of the wellbeing of parents and carers, wider family members and the well-being of practitioners who work with children, young people and their families.

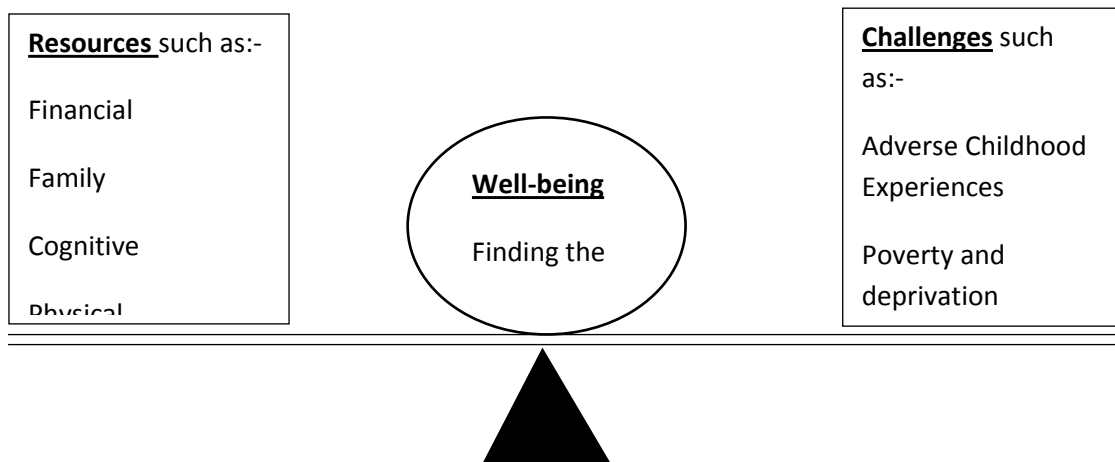
## What is well-being?

Following a review of research, this strategy promotes the following description of well-being;

**Our well-being is made up of different factors at any one time and changes during our lifespan. It is affected by our experiences and background, how we think and feel, our ability to communicate and problem solve as well as our physical and mental health, relationships and sense of belonging in our communities.**

Particularly for children and young people, their well-being is affected by the key people involved in their lives as well as the physical and social conditions in which they live. Therefore, promoting, supporting and nurturing children and young people's well-being involves not only developing the skills and capabilities of the child but also the awareness, knowledge and skills of the people in a child's life. This means taking an integrated approach to well-being based on an assessment of an individual's well-being needs.

To help with an understanding of well-being, the strategy uses a balance model.



To best support the children, young people and young adults that we work with it is important to assess the challenges faced balanced against the resource available to support, promote and nurture their well-being. This can be done by reducing challenges where possible and improving resources.

This requires an integrated and holistic approach to promoting, supporting and nurturing children, young people and young adult's well-being that enables them to build resilience over their lifetime.

## Principles

The definition above suggests the following key principles to guide the delivery of services aimed at promoting, nurturing and supporting children and young people's well-being.

- **Well-being is everybody's business and therefore there should be active promotion of well-being for all children, young people and their families.**
- **Services should provide early, timely and preventative interventions, based on a proportionate assessment of need.**
- **Interventions should be evidence-based and have specific outcomes.**
- **Assessment and intervention should include the voice of children, young people and their families and encourage genuine engagement and participation.**
- **Approaches should be person centred and should take a strength based/resiliency approach whilst recognising risks such as adverse experiences.**

## **Priorities**

### **1. Awareness Raising**

- a. To promote Swansea's description of well-being
- b. Raise awareness of the impact of adverse childhood experiences across all key stakeholders
- c. To raise awareness of Swansea's Continuum of Need and Signs of Well-being framework
- d. Develop training packages for schools to support the emotional and mental well-being of children, young people and young adults

### **2. Provision Mapping and Gap Analysis**

- a. To map needs and provision across the authority using the Signs of Well-being approach and Continuum of Need
- b. To develop a self-evaluation of well-being tool using the Swansea definition and Signs of Well-being approach
- c. Map good practice and resource currently available that has an evidence based impact on children, young peoples and young adults well-being

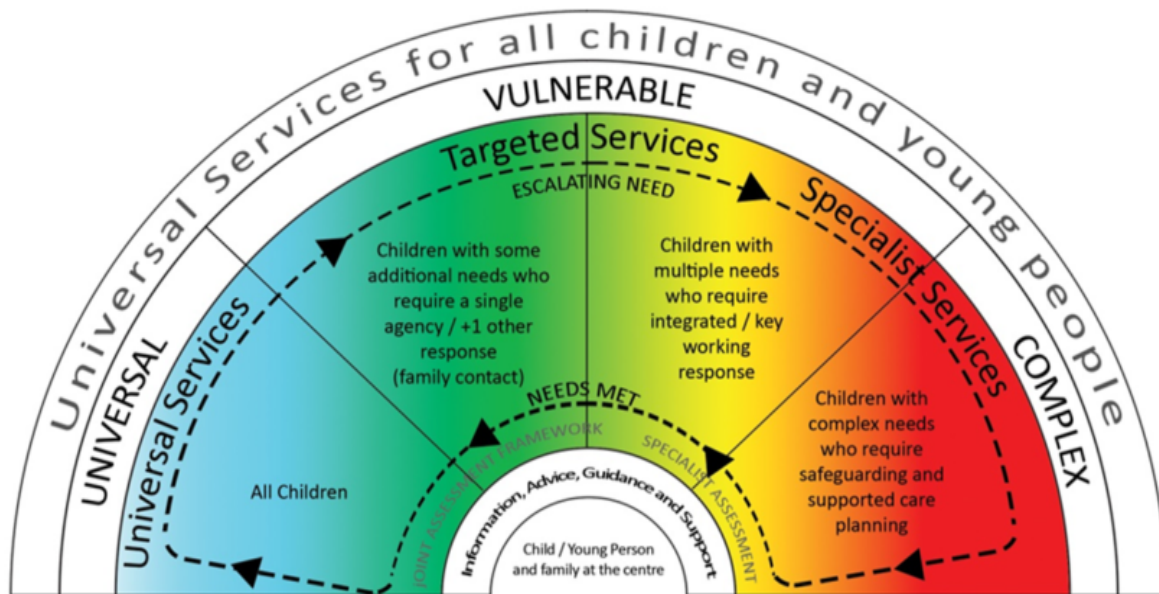
### **3. Implementation**

- a. Embed the Signs of Well-being approach to assess well-being needs and co-ordinate integrated, proportionate responses to identified need
- b. Promote the Named Person/Worker and Team Around the Family approach across the continuum
- c. Identify training gaps across the continuum to ensure intervention, particularly at the statutory and specialist levels, integrates with the Signs of Well-being and Signs of Safety frameworks**

## Graduated Model of Promotion, Nurture and Support

Many services across Swansea including Health, Education and Social Services use a tiered or window screen model of service delivery. The figure below shows the Continuum of Needs adopted by Family Support Services as set out in the Supporting the Wellbeing and Safety of children and Young People 2017.

Figure 1



This approach enables both mapping of current services as well as clarifying roles, responsibilities and expectations for service users and providers. It points to the universal promotion of well-being for all whilst recognising that children and young people with more complex needs and lives may require targeted and/or specialist support.

## Well-being Framework

It is proposed that the authority adopts a Signs of Well-being approach to assessment and intervention aimed at supporting and promoting wellbeing. This is based on the Scottish model, Getting it Right for Children and Young People.

Swansea has operationalised this model as part of the Team Around the Family (TAF) approach to enable practitioners to assess the main factors that may be impacting on a child or young person's well-being. The Signs of Well-being Approach is set out in more detail in Annex 1. It enables different services to contribute to an assessment of well-being using their own unique approaches to assessing need within a broader framework. It links to the Continuum of Need above and supports integrated working and intervention, mapping of provision and self-evaluation.

## Key Roles

The strategy is underpinned by the concept of a **Named Person/Worker**. The broad strategic objective is that every child and young person in Swansea has a named person or worker who is responsible for monitoring the well-being of all the children and young people in their care. It is envisaged that this role would be fulfilled by health visitors for pre-school children and by designated school staff for school age children.

The named worker would work within their own role to support the needs of the child and family without drawing in any intervention from additional services. A named person would carefully consider the situation by asking four questions:

- What is getting in the way of this child or young person's well-being?
- Do I have all the information I need to help this child /young person/family?
- What can I do now to help this child/young person/family?
- What can my agency do to help this child/young person/family?

A **Team Around the Family (TAF)** approach sits at level two and above of the continuum where support is required from more than one agency.

A "TAF approach" refers to cases that meet all of the following criteria:

- Family assessment.
  - *An assessment which addresses the needs of the whole family, not just the referred client.*
- Actions for more than one family member, or actions that impact upon more than one family member e.g. support with housing, debt etc.
- Involvement of two or more services.
  - *The element of 'virtual' co-ordination needs to be present, so the needs of the clients must be greater than what your service alone can deliver. The co-ordination element needs to be evidenced through referrals / conversations / liaison to other services outside of your own.*
- Evidence of an action plan.
  - *A plan that shows what goals the family hopes to achieve, and which agency or family member is taking responsibility for them.*
- A Distance Travelled Tool (e.g. Outcome Wheel/review of family progress).
  - *A tool that captures the movement of the family/client and reflects the assessment and actions within the plan.*

A **TAF lead worker** will be identified from the pool of practitioner's involved in the delivery of the plan. This role might be fulfilled by the previous named worker, but **not** exclusively so. The types of practitioners carrying out the TAF lead worker role could be staff from schools, health, housing etc and would be the person most relevant to the child or young person in terms of quality of relationship and the level of trust built up with the family.

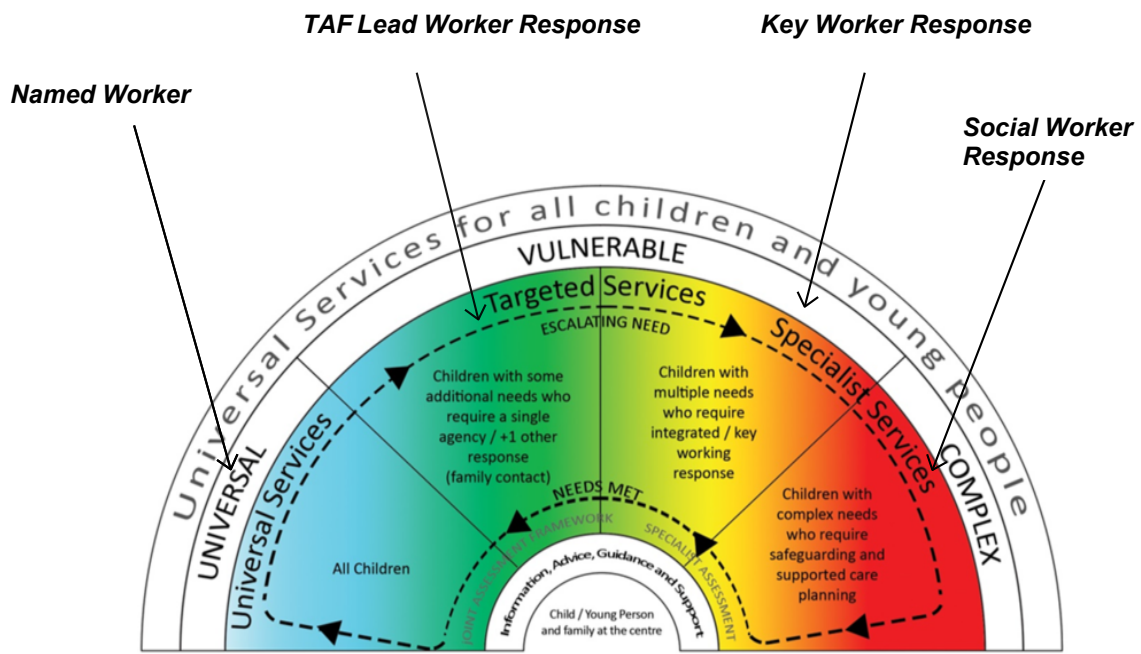
The TAF lead worker would support a light touch intervention to prevent child and family's needs from escalating. This would include co-ordination and delivery of the well-being plan.

The **key worker** role sits at level three of the continuum on the edge of statutory services. The teams performing the key worker role would carry out wellbeing assessments and develop the plan in partnership with other involved professionals, deliver the intervention and be responsible for reviewing the arrangements. They would provide an intervention across the full age range where there are complex needs and there is a risk that statutory intervention may be required if things don't improve.

The **Statutory/Specialist Response** sits at level four of the continuum and is provided to those children, young people and young adults with the most complex needs. This intervention would be delivered by the relevant statutory service or provision.

Key roles are set out in more detail in Annexe 2 and shown in figure 2.

Figure 2



## Appendix 2. Framework for ACEs Informed Organisation

**Note: This is a “live” document and will be reviewed and updated.**

<b>ACE-Informed People</b>	
<p><b>ACE-Informed people understand what Adverse Childhood Experiences (ACEs) are and understand their impact throughout the life course. They understand how to communicate effectively and know when they need to seek advice and support.</b></p>	
<b>Knowledge</b>	<b>Skills/behaviours</b>
<p>Understand what Adverse Childhood Experiences (ACEs) are and what trauma and adversity is.</p> <p>Understand the impact of ACEs and other forms of trauma and adversity; understand the different ways in which ACEs can affect people throughout the life course.</p> <p>Knowledge of the trauma response to ACEs and the impact on brain development.</p> <p>Understand the collective role in mitigating the impact of, and responding to, ACEs and other forms of trauma and adversity.</p> <p>Understand own role in mitigating the impact of ACEs.</p> <p>Understand when and where to access advice and support if needed.</p>	<p>Observe and notice potential signs of ACEs / trauma / re-traumatisation and respond in compassionate and supportive manner.</p> <p>Connect with people through kindness and understanding.</p> <p>Describe own role in responding to ACEs / mitigating the impact of ACEs.</p> <p>Reflect on own role in responding to ACEs / mitigating the impact of ACEs.</p> <p>Identify own support mechanisms and access as necessary.</p>

<b>ACE- Skilled People</b>	
<p><b>ACE-Skilled people are ACE-Informed but also have detailed and comprehensive knowledge and skills around being ACE-Informed. They can critically appraise issues and use skills and knowledge to support people.</b></p>	
<b>Knowledge</b>	<b>Skills/behaviours</b>
<p>Understand the neurological impact of ACEs across the life course and how to respond to individuals demonstrating signs and symptoms of trauma and adversity, including ACEs</p> <p>Understand the types of situations that could be triggers of distressing memories of ACEs / trauma and/or associated feelings.</p>	<p>Demonstrate effective relational skills including compassion and understanding in every interaction.</p> <p>Recognise indicators of ACEs throughout the life course. Look beyond symptoms and behaviours and respond appropriately through consistency and conscious action.</p>

<p>Knowledge of what protects people affected by ACEs from the impact of trauma including:</p> <ul style="list-style-type: none"> <li>• Safe, sustaining and supportive relationships</li> <li>• Supportive and understanding community and social networks</li> <li>• Practical problem-solving skills and ability to regulate emotions</li> <li>• Compassionate, consistent and supportive responses from professionals</li> <li>• Supportive, therapeutic or safeguarding services.</li> </ul> <p>Knowledge of techniques / approaches that support people towards empowerment to build on own strengths, skills and resources to live a personally valued, connected life.</p> <p>Understand own role in preventing, mitigating the impact of, and responding to ACEs including own role working with people to build protective factors and resilience.</p> <p>Knowledge of secondary trauma, the importance of self-care and of the personal support mechanisms available to them within their setting (e.g. supervision within their organisation).</p> <p>Understand the importance of reflective practice to support self-care and continuous improvement in relation to own practice.</p>	<p>Effectively respond to individuals demonstrating signs and symptoms of ACEs / trauma to reduce the potential of re-traumatisation.</p> <p>Apply an appropriate approach / psychological framework to support empowerment (e.g. emotional coaching, ABC technique).</p> <p>Reflect on and demonstrate own role in preventing, mitigating the impact of and responding to ACEs.</p> <p>Identify own support mechanisms and access as necessary.</p> <p>Contribute to continuous improvement in relation to own practice.</p>
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<b>Influencers</b>	
<p><b>Influencers are people with a leadership and/or a strategic role. They are ACE-Informed, enable others to become ACE-Informed and ACE-Skilled and ensure appropriate workforce support is available and accessed. They ensure an ACE-informed approach to managing services and teams. Most importantly, they set a culture that acknowledges ACEs as a public service issue, requiring a quality response.</b></p>	
<b>Knowledge</b>	<b>Skills/behaviours</b>



<p>Understand what it means to be ACE-informed, as an individual, a manager, a leader, a team and an organisation.</p> <p>Understand the management and leadership qualities required of those who are ACE-informed.</p> <p>Understand the coordinated response required to mitigate the impact of ACEs and the importance of having ACE-informed organisational culture and systems.</p> <p>Understand how to have an ACE-informed approach underpinning the strategic direction of the service/team/organisation etc.</p> <p>Understand how to apply an ACE-informed approach to service design, development, monitoring and evaluation.</p> <p>Understand how to support the workforce.</p>	<p>Model ACE-informed principles of safety, trustworthiness, choice, collaboration and empowerment in the day-to-day work setting.</p> <p>Demonstrate open, transparent and collaborative leadership.</p> <p>Adopt an ACE-informed approach to setting the organisational culture that values safety, trustworthiness, choice, collaboration and empowerment.</p> <p>Apply an ACE-informed approach to developing and implementing policies and processes and in designing, developing, monitoring and evaluating services.</p> <p>Develop and implement ACE-informed policies and processes that lead and support staff in taking an ACE-informed approach.</p> <p>Demonstrate an ability to plan an ACE-informed strategic direction for the service/ team/ organisation.</p> <p>Prioritises an ACE-informed approach, recognising the needs of people who maybe have been affected by ACEs (trauma and adversity)</p> <p>Demonstrates a commitment to effective monitoring and evaluation; ensuring evidence generating practice and quality assurance of ACE-informed approach.</p> <p>Provides adequate resources and appropriate support for staff including access to coaching or supervision and protected reflective practice time.</p>
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**Appendix 3a. EQUALITIES IMPACT SCREENING FORM v2017-18 (THIS REPORT)**

Please ensure that you refer to the Screening Form Guidance while completing this form. If you would like further guidance please contact the Access to Services team (see guidance for details).

Section 1	
Which service area and directorate are you from?	
Service Area:	Social Services and Education
Directorate:	People

**Q1(a) WHAT ARE YOU SCREENING FOR RELEVANCE?**

Service/ Function	Policy/ Procedure	Project	Strategy	Plan	Proposal
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**(b) Please name and describe here:**

Report of the People Policy Development Committee to Cabinet - Adverse Childhood Experiences.

Adverse Childhood Experiences (ACE's) is a new national framework aimed at helping all public services in Wales address the present and future well-being and safety needs of Children, Young People and Adults. This report by the Chair of the People Policy Development Committee as product of the workplan - 2018/19, and as a summary of the work undertaken on Adverse Childhood Experiences (ACEs).

**Q2(a) WHAT DOES Q1a RELATE TO?**

Direct front line service delivery	Indirect front line service delivery	Indirect back room service delivery
<input type="checkbox"/> (H)	<input checked="" type="checkbox"/> (M)	<input type="checkbox"/> (L)

**(b) DO YOUR CUSTOMERS/CLIENTS ACCESS THIS...?**

Because they need to	Because they want to	Because it is automatically provided to everyone in Swansea	On an internal basis i.e. Staff
<input type="checkbox"/> (H)	<input checked="" type="checkbox"/> (M)	<input type="checkbox"/> (M)	<input type="checkbox"/> (L)

**Q3 WHAT IS THE POTENTIAL IMPACT ON THE FOLLOWING...**

	High Impact (H)	Medium Impact (M)	Low Impact (L)	Don't know (H)
Children/young people (0-18)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Older people (50+)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Any other age group	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Race (including refugees)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Asylum seekers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gypsies & travellers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Religion or (non-)belief	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sex	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Welsh Language	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Poverty/social exclusion	→	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carers (inc. young carers)	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Community cohesion	→	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage & civil partnership	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	→	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Q4 WHAT ENGAGEMENT / CONSULTATION / CO-PRODUCTIVE APPROACHES WILL YOU UNDERTAKE?**

Please provide details below – either of your planned activities or your reasons for not undertaking engagement

Swansea Council was generally ‘ACE informed’ and working towards a shared strengths based, resilience building approach to be informed by an integrated well-being strategy for children and young people (in draft).

**Q5(a) HOW VISIBLE IS THIS INITIATIVE TO THE GENERAL PUBLIC?**

High visibility <input type="checkbox"/> (H)	Medium visibility <input checked="" type="checkbox"/> (M)	Low visibility <input type="checkbox"/> (L)
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**(b) WHAT IS THE POTENTIAL RISK TO THE COUNCIL’S REPUTATION?**  
*(Consider the following impacts – legal, financial, political, media, public perception etc...)*

High risk <input type="checkbox"/> (H)	Medium risk <input type="checkbox"/> (M)	Low risk <input checked="" type="checkbox"/> (L)
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**Q6 Will this initiative have an impact (however minor) on any other Council service?**

Yes       No      If yes, please provide details below

**Q7 HOW DID YOU SCORE?**  
*Please tick the relevant box*

**MOSTLY H and/or M → HIGH PRIORITY →  EIA to be completed  
Please go to Section 2**

**MOSTLY L → LOW PRIORITY / NOT RELEVANT →  Do not complete EIA  
Please go to Q8 followed by Section 2**

**Q8 If you determine that this initiative is not relevant for an EIA report, you must provide a full explanation here. Please ensure that you cover all of the relevant protected groups.**

Adverse Childhood Experiences (ACEs) framework aims to improve social inclusion and to reduce impact that of adverse childhood experiences have when citizens engage with public organisations. Some citizens with protected characteristic may have had adverse childhood experiences. In order to incorporate ACE awareness, an Equalities Impact Assessment would have to be carried out on the Integrated Wellbeing strategy for children and young people (Appendix 1), when approved, and on any significant changes to current policy to incorporate ACEs awareness.

**Section 2**

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email – no electronic signatures or paper copies are needed.

<b>Screening completed by:</b>	
Name:	Simon Jones
Job title:	Social Services Strategy and Performance Improvement Officer
Date:	18/10/2018
<b>Approval by Head of Service:</b>	
Name:	Mark Sheridan
Position:	Head of Vulnerable Learner Service
Date:	October 2018

Please return the completed form to [accesstoservices@swansea.gov.uk](mailto:accesstoservices@swansea.gov.uk)

**3b) EQUALITIES IMPACT SCREENING FORM v2017-18 (DRAFT INTEGRATED WELLBEING STRATEGY FOR CHILDREN & YOUNG PEOPLE IN SWANSEA)**

**Please ensure that you refer to the Screening Form Guidance while completing this form. If you would like further guidance please contact the Access to Services team (see guidance for details).**

<b>Section 1</b>
Which service area and directorate are you from?
Service Area: Vulnerable Learner Service
Directorate: Education

**Q1(a) WHAT ARE YOU SCREENING FOR RELEVANCE?**

Service/ Function	Policy/ Procedure	Project	Strategy	Plan	Proposal
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**(b) Please name and describe here:**  
Integrated Well-being Strategy for Children and Young People

**Q2(a) WHAT DOES Q1a RELATE TO?**

Direct front line service delivery	Indirect front line service delivery	Indirect back room service delivery
<input checked="" type="checkbox"/> (H)	<input checked="" type="checkbox"/> (M)	<input type="checkbox"/> (L)

**(b) DO YOUR CUSTOMERS/CLIENTS ACCESS THIS...?**

Because they need to	Because they want to	Because it is automatically provided to everyone in Swansea	On an internal basis i.e. Staff
<input checked="" type="checkbox"/> (H)	<input type="checkbox"/> (M)	<input type="checkbox"/> (M)	<input type="checkbox"/> (L)

**Q3 WHAT IS THE POTENTIAL IMPACT ON THE FOLLOWING...**

	High Impact (H)	Medium Impact (M)	Low Impact (L)	Don't know (H)
Children/young people (0-18)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Older people (50+)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Any other age group	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race (including refugees)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asylum seekers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gypsies & travellers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or (non-)belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Welsh Language	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Poverty/social exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carers (inc. young carers)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community cohesion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marriage & civil partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q4 WHAT ENGAGEMENT / CONSULTATION / CO-PRODUCTIVE APPROACHES WILL YOU UNDERTAKE?**

Please provide details below – either of your planned activities or your reasons for not undertaking engagement

The policy will be subject to consultation which will include the voice of learners, parents and carers and key partners such as Health and Social Services as well as the third sector.

**Q5(a) HOW VISIBLE IS THIS INITIATIVE TO THE GENERAL PUBLIC?**

High visibility <input type="checkbox"/> (H)	Medium visibility <input checked="" type="checkbox"/> (M)	Low visibility <input type="checkbox"/> (L)
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**(b) WHAT IS THE POTENTIAL RISK TO THE COUNCIL'S REPUTATION?  
(Consider the following impacts – legal, financial, political, media, public perception etc...)**

High risk <input type="checkbox"/> (H)	Medium risk <input checked="" type="checkbox"/> (M)	Low risk <input type="checkbox"/> (L)
---	--	--

**Q6 Will this initiative have an impact (however minor) on any other Council service?**

Yes

No

**If yes, please provide details below**

The Strategy is underpinned by the concept of integrated working particularly between Education, Social Services Child and Family Services and early help and prevention services.

**Q7 HOW DID YOU SCORE?**

*Please tick the relevant box*

**MOSTLY H and/or M → HIGH PRIORITY →  EIA to be completed  
Please go to Section 2**

**MOSTLY L → LOW PRIORITY / NOT RELEVANT →  Do not complete EIA  
Please go to Q8 followed by Section 2**

**Q8 If you determine that this initiative is not relevant for an EIA report, you must provide a full explanation here. Please ensure that you cover all of the relevant protected groups.**

## **Section 2**

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email – no electronic signatures or paper copies are needed.

<b>Screening completed by:</b>
Name: Mark Sheridan
Job title: Head of Vulnerable Learner Service
Date: 06 November 2018
<b>Approval by Head of Service:</b>
Name:
Position:
Date:

**Please return the completed form to [accesstoservices@swansea.gov.uk](mailto:accesstoservices@swansea.gov.uk)**