

**PLEASE INDICATE TIME REQUIRED TO PRESENT THE PAPER:**

**0-25 Advisory Board**

**AGENDA ITEM NO:**

**Item for:** Decision/Assurance/**Information** (Please underline and bold)

**22/10/2021 (Date of Meeting)**

<b>Report of:</b>	Charlotte Ramsden Strategic Director of People
<b>Date of Paper:</b>	22/10/2021
<b>Subject:</b>	Trauma & Resilience – Next Steps
<b>In case of query Please contact:</b>	Debbie Blackburn <a href="mailto:deborah.blackburn@salford.gov.uk">deborah.blackburn@salford.gov.uk</a> Madha Ayub <a href="mailto:madha.ayub@salford.gov.uk">madha.ayub@salford.gov.uk</a>
<b>Strategic Priorities:</b>	Please tick which strategic priorities the paper relates to:
	<input type="checkbox"/> <b>Quality, Safety, Innovation and Research</b>
	<input type="checkbox"/> <b>Integrated Community Care Services (Adult Services)</b>
X	<input checked="" type="checkbox"/> <b>Children's and Maternity Services</b>
	<input type="checkbox"/> <b>Primary Care</b>
	<input type="checkbox"/> <b>Enabling Transformation</b>
<b>Purpose of Paper:</b>	
To inform the 0-25 Advisory Board of current work and next steps in the Trauma and Resilience workstream. To seek approval for funding from the BOND budget.	

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### Further explanatory information required

<b>HOW WILL THIS BENEFIT THE HEALTH AND WELL BEING OF SALFORD RESIDENTS OR THE CLINICAL COMMISSIONING GROUP?</b>	Developing a Trauma responsive approach will improve service responsiveness to need.
<b>WHAT RISKS MAY ARISE AS A RESULT OF THIS PAPER? HOW CAN THEY BE MITIGATED?</b>	N/A
<b>WHAT EQUALITY RELATED RISKS MAY ARISE AS A RESULT OF THIS PAPER? HOW WILL THESE BE MITIGATED?</b>	This service provision will improve equality.
<b>DOES THIS PAPER HELP ADDRESS ANY EXISTING HIGH RISKS FACING THE ORGANISATION? IF SO WHAT ARE THEY AND HOW DOES THIS PAPER REDUCE THEM?</b>	N/A
<b>PLEASE DESCRIBE ANY POSSIBLE CONFLICTS OF INTEREST ASSOCIATED WITH THIS PAPER.</b>	N/A
<b>PLEASE IDENTIFY ANY CURRENT SERVICES OR ROLES THAT MAY BE AFFECTED BY ISSUES WITHIN THIS PAPER:</b>	N/A

Footnote:

Members of the Service and Finance Group will read all papers thoroughly. Once papers are distributed no amendments are possible.

<b>Document Development</b>
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Process	Yes	No	Not Applicable	Comments and Date (i.e. presentation, verbal, actual report)	Outcome
Public Engagement (Please detail the method i.e. survey, event, consultation)		✓			
Clinical Engagement (Please detail the method i.e. survey, event, consultation)	✓			Via the All Age Mental Health Commissioning group	
Has 'due regard' been given to Social Value and the impacts on the Salford socially, economically and environmentally?	✓				
Has 'due regard' been given to Equality Analysis (EA) of any adverse impacts? (Please detail outcomes, including risks and how these will be managed)	✓				
Legal Advice Sought		✓			
Presented to any informal groups or committees (including partnership groups) for engagement or other formal governance groups for comments / approval? (Please specify in comments)	✓			Earlier version to Programme Oversight Group and Leadership Team and CAN ERG.	

**Note:** Please ensure that it is clear in the comments and date column how and when particular stakeholders were involved in this work and ensure there is clarity in the outcome column showing what the key message or decision was from that group (and whether amendments were requested about a particular part of the work).

## Salford ACE and Trauma Responsive Update and Business Case

### 1 Executive Summary

*The Better Outcomes New Delivery (BOND) Programme saw the Clinical Commissioning group establish an investment into Children's services. The programme looked to intervene and invest in strategic pressure points to develop different delivery models that could deliver better outcomes for children in Salford and reduce the budget pressure caused by very high cost, high need interventions. As part of this development, the Trauma and Resilience work has always featured as a key component to all the projects (Route 29, Achieving Change Together, Transforming Care Salford, and Domestic Abuse).*

*This report seeks to update the Board on current work in the Trauma and Resilience workstream, and approval is sought to fund various initiatives from previously allocated BOND funding.*

### 2 Salford Trauma and Resilience Strategy

- 2.1 The Salford Trauma and Resilience strategy was developed in 2019 and sets out the overarching vision to develop systems to mitigate the impact of trauma and to further embed resilience practice across the city. The aim is to review and refine our ways of working through a Trauma informed and Trauma responsive lens and prevent the cyclical nature of Adverse Childhood Experiences (ACEs). This will see the further development of resilience across pathways and systems and enhance adult, child and family health and wellbeing by understanding how to deliver care and support that is trauma informed.
- 2.2 A business case for Trauma and Resilience was agreed at the Service and Finance Group as part of the BOND programme. The business case includes an investment in capacity around training, coordination and work with third sector organisations to create a social movement for change. The total financial value is £239,180. This element will enable and facilitate the true prevention agenda across Salford. Outcome measures will be based on the Welsh model of measurement and will be linked to new Greater Manchester priorities. Invest to save methodology will be applied to the developments to demonstrate cost avoidance and reduction in demand across a variety of services.
- 2.3 The Trauma and Resilience work is part of the wider BOND investment, which has seen transformational work in terms of culture, reorganisation of services and testing of new and innovative approaches. The Salford Trauma and Resilience approach has been recognised as a beacon of good practice and has been adapted at a Greater Manchester level.

### 3 Salford – future direction:

- 3.1 The Trauma and Resilience work was paused for some time due to lack of commissioning capacity and restarted in July 2021. Our aim is to make Salford an all-age ACE and Trauma responsive City and link across Health (all elements), Social Care, Police, Probation and Education.
- 3.2 Outlined below are next steps for developing and implementing a Trauma informed and responsive approach in Salford.

#### 1. Training and awareness

Training in Trauma Informed and Responsive approaches has been delivered to more than 1176 practitioners across the Salford system. This is over a wide range of professionals across Salford services, including:

- Headteachers, teachers, teaching assistants, SENCOs
- Social workers
- Residential Child Care workers, Supported tenancies officers
- Early Help practitioners
- Nurse practitioners, midwives, nurses, health visitors
- Safeguarding officers, Child protection officers
- GPs, CAMHS practitioners, Psychotherapists, Psychologists, Paediatricians
- Youth worker, Probation officers, crown prosecutors, detective inspectors, sergeants, constables
- Commissioning managers
- Youth Justice team, Learning disabilities team, Complex needs team

Further training sessions are set and are regularly being planned to ensure the approach is understood widely. We are also working closely with the Greater Manchester Trauma Responsive programme and spaces on their training sessions have been allocated to various Salford organisations.

Work is ongoing to ensure the Salford trauma training is accessible widely - to different teams (health, schools, LA) and different staff groups:

- Salford teams working directly with adults, children and young people.
  - o We are linking in with various team managers to understand and support the training uptake in their teams.
- Salford staff who may not work directly but interact with adults, children and young people (reception staff etc.)
  - o Discussions are ongoing to develop Trauma podcasts for staff who may not have capacity for longer sessions but could flexibly use this resource. In the initial stage this is targeting GP practice staff like receptionists but if successful, can be widened in scope.
  - o We are working with HR to discuss options of extending the trauma training to other directorates.
- Salford staff as colleagues, managers and employers.

- We are working with HR to discuss options of extending the trauma training to other directorates in SCC.
- Linking with workforce development to include training as part of induction for new staff.

The Salford Way website holds a variety of resources for colleagues, parents and families around ACEs, Trauma and Trauma responsive approaches. Further information and resources are being collated through the GM Trauma Programme and will be added to this website.

## 2. Developing a sustainable system around implementation

Role profiles for 2 NHS Band 7 Trauma Responsive Practitioners were consulted on with the All-Age Mental Health Commissioning Strategy group. On feedback, these were developed into a Band 8a strategic and a Band 7 senior role. During initial discussions of where these roles should be hosted, there were concerns about how these roles would be supported as to not get lost in the system. After exploring options through discussions, it was agreed to work with the Greater Manchester Resilience Hub to appoint to these roles. The Resilience Hub have significant experience delivering trauma informed and responsive approaches through their Home Office Trusted Relationships programme. They also support the Greater Manchester Trauma Responsive programme.

The Trauma Responsive Practitioners will be located in Salford, based within Salford services and work to embed this approach locally. They will be employed by the Resilience Hub and have access to clinical supervision, peer/team support, resources and knowledge/experience from other projects. This will improve their effectiveness in the work to drive forward the plan to make Salford a Trauma informed and Trauma responsive city. The roles will support developing a citywide approach anchored in principles that take a holistic view of needs, are person-centred and support resilience.

The Trauma Responsive Practitioners will maintain strong links with multi-agency partners and community leaders across a range of disciplines to identify how Trauma responsive principles can be innovatively implemented into practice across all service areas. They will work with staff, adults, children and families to support embedding Trauma responsive principles across services. These would be transformational and consultation roles that will provide training and support with formulations but would not have a regular caseload.

To make sure there is clear impact and to test the approach, these roles would be initially piloted with specific cohorts and evaluated on an ongoing basis. The roles will focus on parents and children as the Salford Trauma approach is focussed on Adverse Childhood Experiences (ACEs).

## 3. Towards a Trauma Responsive organisation

Work is ongoing to connect with various team leaders and managers across the Salford system to discuss what embedding trauma responsive principles may look like in their teams. This may mean embedding the approach in existing policies,

developing specific policies, adding elements to communication approaches etc. There have also been discussions around existing positive work that is progressing around this agenda (elements of the Inclusion strategy, Trauma informed guidance for schools, trauma responsive action plans in teams).

A Trauma workshop is being planned to bring together teams to start to understand progress and develop a cohesive view of the current position in Salford. This will also help us to establish levels of Trauma awareness and responsiveness in the system currently and consider what is required to move further towards embedding and implementation.

#### 4. Community resilience and social norming

Specific awards of funding will be allocated to third sector and community groups with known expertise in this field to develop projects, activities (e.g., champion roles, awareness raising, communities of practice) in 3rd sector organisations and social enterprise. This funding will be awarded with a defined specification and outcomes, with an aim to develop resilience and create a social movement for change.

An Expression of Interest process is being developed and will be advertised.

#### 5. Communication and shared language

Exploration work is ongoing to understand what is required to establish a shared language for Trauma responsiveness in Salford. Other Local Authorities have done work on this previously so there may be opportunities to use existing work with permission and adapt it locally.

### 4. Resources for implementation:

Resources for Salford Trauma Responsive approach:		
	Detail	Cost
Trauma Responsive Practitioners who will provide formulation to staff to prevent risk escalation this will include an adult element around parenting	x1 Band 8a x1 Band 7	£60,669.66 £52,256.46  Total: £112,926.12 recurrently
Training and Awareness	Further sessions with Norma Howes and Zoe Lodrick. Specific workshops around organisational implementation. Trauma podcasts.	£20k recurrently until GM model is resourced.
Administrative capacity to support and organise training	1 day a week Administrator at SCC Band 2A to coordinate and support Salford training.	£5,236
Community resilience and social norming	Funding awarded to VCSE. organisations based on specific	£30k recurrently

	outcomes to enable social norming to take place within the City linked to the Domestic Abuse and other Adverse Childhood experiences.	
Communication	To support community engagement and professional knowledge.	£10k
<b>Total Investment</b>		<b>£178,162.12</b>

<b>Other resources to support implementation:</b>		
	<b>Detail</b>	<b>Funding/Cost</b>
Training and Awareness	GM Training programme for all localities. Spaces on various levels have been allocated to Salford organisations through an EOI process.	Within GM Trauma Responsive Programme.
	Further resources to be added on The Salford Way website to develop a comprehensive resource.	To be managed within current staffing and the additional administrative support.
	A GM e-platform has been secured via the MyLearning web platform used by 9 Local Authorities. Unlimited licences allow this to be accessible by all organisations (health, local authority, VCSE, housing, police, probation etc.)	Funding from Thrive, The GM Resilience Hub and the Violence Reduction Unit.
	A GM web portal to be developed to host case studies, best practice, and the outcomes framework. Local areas to access and signpost.	GM Trauma Responsive approach funding.

## 5 Evaluation and monitoring

### Trauma training:

Demand for the Trauma training has been high and feedback very positive. Some quotes from post training evaluation are shared below:

*“The training was excellent. I have taken a lot away from this training. The rewording of questions was something I will make a conscious effort of changing.”*

*“Norma was incredible! I truly resonate with everything she said. Her training will have a*

*huge impact on my practice going forward. This was excellent personal development, thank you.”*

*“I have completed trauma training before - all have been very similar, but this training made me look at everything I had learnt before in a different way, this by far was the best training session I have been on.”*

### Trauma Responsive approaches

Outcomes for children and young people specifically will be evaluated through case studies/qualitative evidence when the Trauma Responsive Practitioners are in place and working with other services.

In the longer term, when there is more of a trauma responsive approach across policies and processes in the City – we may be able to evidence improvement in outcomes such as reduced school exclusions, increased staff wellbeing, increased trauma awareness across the system (latter through surveys). This approach will contribute to prevention and support for adults, children, young people and families across services.

### Monitoring

This workstream reports on a quarterly basis to the BOND programme.

There are discussions ongoing for developing a regular Steering Group for this workstream. A detailed action plan connected to the strategy would support a monitoring approach, but more work is required to understand the different elements around this work in Salford. Ongoing discussions with different teams and the planned Salford workshop will help develop this action plan. A Steering Group will then be set up to monitor this.

## 6 Next steps

Actions	Timeline
Link in with different teams across Salford system to support with training and understand how to progress further towards Trauma responsiveness.	Ongoing
Organise Salford Trauma informed/responsive workshop to understand local progress and consider next steps to implementation.	Provisionally 9 <sup>th</sup> December 2021
Further consultation on Salford Trauma strategy with an aim to revise and update.	TBC (The Salford workshop will support understanding of what is required in the updates, and public consultation may be required)
Appoint Trauma Responsive Practitioners.	Ongoing (adverts are going out this month) – December 2021
Set up training dates and plan for further dissemination of training.	Ongoing (more dates have been set and we are arranging further to align with schedules)

Coordinate Greater Manchester training offer for Salford.	Ongoing – places on different levels of training have been allocated to various organisations.
Consider next steps in working with VCSE organisations to develop communities of practice.	October – November 2021 An Expression of Interest process is being developed to advertise and request bids for specific projects to increase Trauma awareness.
Add further resources on The Salford Way website.	Reviewing this currently – GM group are collating resources which we will be able to add.

## 7 Risks and Issues

<b>Risk</b>	<b>Mitigation</b>
Uptake of Trauma training in some areas of the system are a challenge due to staff capacity as COVID recovery commences – for instance, primary care.	Where possible, discuss with areas of less uptake to understand if a different approach may be more useful. This may mean organising specific dates around availability. In the meantime, initiatives like the Trauma podcasts (30 min rather than longer commitment) to raise awareness.
Current challenges with clinical recruitment may affect Trauma Responsive Practitioners.	The roles will be recruited to as permanent to mitigate this. Working in partnership with the Greater Manchester Resilience Hub also provides a support system.
Different pieces of work around Trauma responsiveness across Salford system must be brought together cohesively.	Commissioning lead to continue meeting with various team leads to discuss approaches. The planned trauma event will also bring teams together to identify links and opportunities to work together.
There is a risk of duplication between the GM workstream and the Salford workstream.	Commissioning lead to continue attending GM Trauma Implementation Group meetings, support the GM approach and work closely/regularly meet with the GM Trauma Programme Manager to ensure both approaches are as effective as possible.
Administrative support to coordinate GM Trauma training is a gap due to a vacancy.	This is a temporary concern and support is expected in about 6 weeks. In the meantime, Salford is supporting but capacity is an issue.

## 8 Recommendations

8.1 The 0-25 Advisory Group is asked to:

- Note the work and next steps in the Salford ACE and Trauma Responsive workstream.

- Approve the investment outlined above which has already been agreed as part of Better Outcomes New Delivery Model Funding.

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