

NORTH YORKSHIRE COUNTY COUNCIL

NORTH YORKSHIRE HEALTH AND WELL-BEING BOARD

16th July 2014**Disabled Children's Charter: Performance Summary****1.0 PURPOSE OF REPORT**

- 1.1 This report provides an annual performance summary on progress relating to the seven commitments within the Disabled Children's Charter.

2.0 BACKGROUND

- 2.1 Every Disabled Child Matters, a consortium of leading organisations in the disabled children sector, in partnership with The Children's Trust Tadworth, a specialist provider of services for disabled children, have developed a Disabled Children's Charter for Health and Well-being Boards. The purpose of the charter is to support Health and Well-being Boards to meet their responsibilities towards disabled children, young people and their families, including children and young people with special educational needs and health conditions.
- 2.2 On 19th July 2013, the North Yorkshire Health and Well-being Board formally signed up to the Disabled Children's Charter. By adopting the charter, the Health and Well-being Board agreed to pursue seven commitments to improve the health outcomes of disabled children and young people and their families, and to provide evidence after one year to demonstrate the progress made towards each one.
- 2.3 The seven commitments require the Health and Well-being Board to provide evidence that it:
- Has detailed and accurate information on the disabled children and young people living in our area, and provide public information on how we plan to meet their needs;
 - Engages directly with disabled children and young people, and their participation is embedded in the work of the Health and Well-being Board;

- Engages directly with parent-carers of disabled children and young people, and their participation is embedded in the work of the Health and Well-being Board;
- Sets clear strategic outcomes for partners to meet in relation to disabled children, young people and their families, monitor progress towards achieving them and hold each other to account;
- Promotes early intervention and support for smooth transitions between children and adult services for disabled children and young people;
- Works with key partners to strengthen integration between health, social care and education services, and with services provided by wider partners; and
- Provides cohesive governance and leadership across the children and young people's agenda by linking effectively with key partners.

2.4 By signing the charter, the Health and Well-being Board has demonstrated that it is committed to improving the quality of life and outcomes experienced by children, young people and their families, including children and young people with special educational needs and health conditions.

3.0 ANNUAL PROGRESS SUMMARY

3.1 The Children's Trust is progressing a programme of improvement in services for disabled children, young people and their families, through the implementation of the Special Educational Needs and Disabilities (SEND) Strategy 2011-14 and through the programme of SEND reforms required by the Children and Families Act 2014. This work is being delivered through the multi-agency SEND Steering Group and is reported through the Children's Trust Board.

3.2 Progress made against all priority outcomes associated with this work was reported to the Children's Trust Board at its meeting on 11th June, and included:

- Improved collaborative working between education, health and care services in the provision of services for children and young people and their families, including joint commissioning of services (beginning with speech, language and communication needs);
- Better information for families and young adults with SEND, including the publication of the Local Offer of what help is expected to be available locally for children and young people and their families: local arrangements are now publically available, with our approach recognised nationally as good practice;
- One overall assessment and plan for children and young people with SEND: Education, Health and Care Plans are currently being introduced across the county, subject to informed parental consent;

- Greater choice and control for children, young people and their parents in the help they need, with personal budgets available for education, health (subject to eligibility criteria) and care services; and
- Smoother and more integrated transitions to adulthood.

3.3 A detailed summary of progress against each of the seven commitments is attached at Appendix 1, with performance graded in a Red/Amber/Green rating scale. Whilst positive steps have been made across all of the seven commitments, the majority of activity has been graded as 'amber'; this is to acknowledge that further work is required to ensure that arrangements for children and young people and their families are appropriate and of consistently high quality.

4.0 RECOMMENDATIONS

4.1 That the Health and Well-being Board notes the report and the progress made against the seven commitments within the Disabled Children's Charter.

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Charter commitment	Expected indicators of progress	R/A/G rating	Comments
<p>We have detailed and accurate information on the disabled children and young people living in our area, and provide public information on how we plan to meet their needs</p>	<ul style="list-style-type: none"> • Full range of sources of information collected on disabled children, young people and their families which will be used to inform the JSNA • Quality assurance process used to ensure that information and data on disabled children, young people and their families used to inform commissioning is sufficiently detailed and accurate • The way in which the JSNA will be used to assess the needs of local disabled children, young people and their families • The way in which information on any hard to reach groups is sourced, and action taken to address any gaps of information with regard to local disabled children, young people and their families • The way in which disabled children, young people and their families are strategically involved in identified need, and evidence and feedback on their experiences is used to inform the JSNA process • Public information on how the HWB will support partners to commission appropriately to meet the needs of local disabled children, young people and their families 	<p>Amber</p>	<p>Information on disabled children and young people in North Yorkshire is routinely collected and analysed through a number of sources.</p> <p>This information informs the planning and development of strategic documents such as the JSNA and underpins the operational delivery of services.</p> <p>The next iteration of the Joint Strategic Needs Assessment (JSNA) will also include a thematic report on SEND which will help to inform strategic planning and commissioning.</p> <p>The newly configured SEND Service (0-25) will bring commissioning arrangements for education and children’s social care together for children and young people with SEND (0-25) and enable greater integration and strategic planning.</p> <p>The Local Offer will also contribute to building a more comprehensive picture of need and provision for SEND across the county. Colleagues from education, health, social care, the voluntary sector and other relevant partners are all actively contributing to the development of the Local Offer.</p> <p>Initial discussions have taken place between the Assistant Director (A&I), the Lead for Speech, Language and Communication and Health Commissioners with a view to joint commissioning of services for speech, language and communication needs.</p>
<p>We engage directly with disabled children and young people and their participation is embedded [in our work]</p>	<ul style="list-style-type: none"> • Evidence of the way in which the HWB or its sub groups have worked with disabled children and young people in the JSNA process, and next steps for JSNA engagement • Evidence of the way in which the HWB or its 	<p>Amber</p>	<p>Local authority representation at Flying High Group meetings continues to enable a direct dialogue with disabled children and young people. The group have been consulted on a number of issues relating to the Children and Families Act 2014 implementation, and have</p>

	<p>sub groups have worked with disabled children and young people in the preparation and delivery of the Joint Health and Well-being Strategy (JHWS) and next steps for JHWS engagement</p> <ul style="list-style-type: none"> Evidence of partnership working with any local groups of disabled children and young people 		<p>participated in local, regional and national discussions on the reform agenda. The group continue to participate in the development of the Local Offer and have recently co-designed the main page of the Young Person’s Local Offer in North Yorkshire.</p> <p>Feedback from disabled children and young people also informs the needs assessment process for local strategic documents such as the CYPP and JSNA; this is captured through a number of mechanisms, ranging from specific biennial surveys to on-going engagement and participation in service development. Work to develop feedback and response mechanisms for the Local Offer will also be informed by the Flying High Group.</p> <p>Links between the Flying High Group and other young people’s groups (e.g. Youth Council etc) have been enhanced over the past year; for example, closer links resulted in a more representative attendance at the most recent regional Youth Conference in York. These developments continue to be supported by a countywide participation steering group.</p> <p>Further work is required to increase participation and ensure that other groups of disabled children and young people are involved. For example, as part of the implementation of the Strategy for Children and Young People with Autism, the council worked with a group of young people with Autism at King James’ Enhanced Mainstream School to develop a student voice Autism DVD entitled ‘My Autism: An Insight from Students in North Yorkshire’.</p>
<p>We engage directly with parent carers of disabled children and young people and their participation is embedded [in our work]</p>	<ul style="list-style-type: none"> Evidence of the way in which the HWB or its sub groups have worked or its sub groups have worked with parent carers of disabled children in the JSNA process, and next steps for JSNA engagement Evidence of the way in which the HWB or its 	<p>Amber</p>	<p>NYPACT representation on the SEND Steering Group and on each of the 4 work-strands ensures that parents of disabled children are involved in on-going service improvement and decision-making. This is in addition to direct NYPACT representation on the Children’s Trust Board. As members of these groups, NYPACT liaise with</p>

	<p>sub groups have worked with parent carers of disabled children in the preparation and delivery of the JHWS, and next steps for JHWS engagement</p> <ul style="list-style-type: none"> • Evidence of partnership working with local parent groups, including the local Parent Carer Forum(s) 		<p>local parent carers to ensure that they have the opportunity to inform the development of comprehensive needs assessments for local strategic documents, such as the CYPP and JSNA.</p> <p>NYPACT are actively involved in the development and implementation of Children and Families Act 2014 reforms and continue to work with NYCC to ensure that the views of parent carers inform decision making. The idea for how to demonstrate the scope of the Local Offer in one page came from a parent. Parents made some helpful suggestions that were incorporated into the EHC plan format. At our two days of launch conferences for the new procedures, NYPACT provided an information stall and ran a workshop. They have helped us plan a road show of 7 parental discussion events around the county to explain the new legislative process for assessments and planning and we have helped them to organise their annual conference by offering speakers and workshop presenters for topics of their choosing.</p> <p>To support more active parental participation, an Engagement and Consultation Framework has been developed between NYCC and NYPACT so that future opportunities for collaborative working can be identified and jointly planned. Collaborative events are scheduled for summer 2014 and a number of parents’ reference groups are being established to inform strategic decision-making.</p> <p>Revised arrangements between NYPACT and NYCC now reflect Contact a Family’s ‘markers of good practice’.</p> <p>The new arrangements reflect a significant change in the leadership and organisation of NYPACT supported by Contact a Family. Further work is required to ensure that these engagement arrangements are consistently embedded.</p>
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<p>We set clear strategic outcomes for our partners to meet in relation to disabled children, young people and their families, monitor progress towards achieving them and hold each other to account</p>	<ul style="list-style-type: none"> Public information on the status of outcomes for local disabled children and young people based on indicators such as the NHS Outcomes Framework, the Public Health Outcomes Framework, etc Public information on the strategic direction the HWB has set to support key partners to improve outcomes for disabled children and young people. This may be encompassed by the JHWS, but would need to be sufficiently delineated to demonstrate specific objectives and action for disabled children and young people 	<p>Amber</p>	<p>The multi-agency SEND Steering Group oversees the delivery of a shared set of strategic outcomes for children and young people with SEND and reports against this to the Children’s Trust Board.</p> <p>The SEND Strategy is also directly linked to, and contributes towards, wider strategic objectives in the CYPP 2011-14. A review and refresh of the SEND Strategy is planned for 2014 and will be informed by the views of children and young people with SEND and their families.</p> <p>Priorities relating to disabled children and young people are also informing the development of the new CYPP and JSNA, both of which will be publically accessible documents upon completion.</p> <p>A number of changes relating to the Children and Families Act are also increasingly outcomes-focused (EHCPs; Local Offer etc) and are based on the clear expectation of stakeholder participation.</p>
<p>We promote early intervention and support for smooth transitions between children and adult services, and with services provided by wider partners</p>	<ul style="list-style-type: none"> The way in which the activities of the HWB help local partners to understand the value of early intervention The way in which the activities of the HWB ensure integration between children and adult services, and prioritise ensuring a positive experience of transition for disabled young people 	<p>Amber</p>	<p>Over the last two years, we have supported some young people to stay in their local communities rather than attend independent specialist colleges, usually outside North Yorkshire. The numbers of young people opting for this has increased from 5 in 2011-12, to 25 in 2013-14. The anticipated figure for 2014-15 is 28 young people accessing personalised packages. Each programme is bespoke, the outcomes are good, it is less costly than out-of-authority placements and it is being promoted as a national exemplar of good practice by the DfE. The approach developed locally was also nominated and shortlisted for a national award for innovation in commissioning.</p> <p>Working with Health colleagues in the Partnership Commissioning Unit, the council is engaged in improving Transition to Adulthood. Parents and young people will be involved in the planning for this new model of delivery.</p>

			<p>Specialist Support services and SEN Assessment services are now geared up to work with young people 19-25 years.</p>
<p>We work with key partners to strengthen integration between health, social care and education services, and with service provided by wider partners</p>	<ul style="list-style-type: none"> • Details of the way in which the HWB is informed by those with expertise in education, and children’s health and social care • Details of the way the HWB engages with wider partners such as housing, transport, safeguarding and the youth justice system • Details of steps taken to encourage integrated working between health, social care, education and wider partners in order to improve the services accessed by disabled children, young people and their families 	<p>Amber</p>	<p>The reforms being implemented as part of preparation for the Children and Families Act 2014 all seek to improve and strengthen integration between health, social care and education. This includes the integrated Education, Health and Care Plan arrangements and the holistic view of provision provided by the Local Offer.</p> <p>Progress has been made over the course of the last year, but further work is required to fully implement more integrated working practice.</p>
<p>We provide cohesive governance and leadership across the disabled children and young people’s agenda by linking effectively with key partners</p>	<ul style="list-style-type: none"> • Information on links to other local integration forums which set strategic direction for disabled children’s services e.g. the local children’s trust arrangements, the local safeguarding board, the learning disability partnership board, the schools forum etc • Evidence of how the JSNA and JHWS is aligned with other arrangements, such as: reviewing and commissioning of SEN services via the High Needs Block; safeguarding arrangements; child poverty strategies etc. 	<p>Green</p>	<p>This is provided by the Children’s Trust and its SEND Steering Group, which sets the strategic direction and receives monitoring reports.</p> <p>A report to LSCB regarding the safeguarding of disabled children, in response to the Ofsted Thematic Review published in August 2012, led to a Task and Finish group to improve practice in this area. The Action Plan that followed has now been completed and will be signed off at the next LSCB meeting.</p> <p>Work by the Schools Forum on High Needs funding for children and young people with SEN will be reported to the Health and Well-being Board as part of a regular consideration of children’s issues.</p>