

## North Yorkshire County Council

## Young People's Overview and Scrutiny Committee

30 January 2015

**Draft Strategy for Meeting The Social Care Needs Of Disabled Children And Young People And Their Families, 2015-2018****1 Purpose of the report**

- 1.1 To consider the formal consultation which is currently underway on a draft strategy to meet the care needs of disabled children, young people and their families in order to meet the target saving in the 2020 programme.

**2 Background**

- 2.1 Since 2011/12 savings in excess of £500k have been made in the budgets for disabled children, young people and their families. By 2020, further savings of £887k have to be made in the current budget of £5.234M.
- 2.2 The meeting of the Corporate Director and Executive Member for CYPS on 9 December 2014 agreed to a public consultation on a strategy to meet the social care needs of disabled children, young people and their families, which, if implemented would achieve the target saving. A copy of the report which was considered at the meeting, including the draft strategy, is attached at Appendix 1.

**3 Consultation**

- 3.1 A twelve week public consultation on the proposals commenced on 17 December 2014 and ends on 11 March 2015. Details of the consultation meetings are attached at Appendix 2. A report will be made to the Executive on the outcomes of the consultation before a final decision is made.

**4 Recommendations**

- 4.1 That the Committee notes that the consultation on a draft strategy to meet the social care needs of disabled children, young people and their families has commenced.
- 4.2 That the Committee considers whether it wishes to receive the results of the public consultation at its meeting on 17 April 2015.

Andrew Terry, Assistant Director, Access and Inclusion, Children and Young People's Service  
County Hall, Northallerton

22 January 2015

Appendix 1 – Report from the Corporate Director’s (CYPS) meeting with Executive Members on 9<sup>th</sup> December 2014 and Draft Strategy to Meet the Social Care Needs of Disabled Children and Young People and their Families

Appendix 2 – Consultation meetings in January and February 2015

NORTH YORKSHIRE COUNTY COUNCIL  
CHILDREN AND YOUNG PEOPLE'S SERVICE  
CORPORATE DIRECTOR'S MEETING WITH EXECUTIVE MEMBERS

9<sup>th</sup> December 2014

**Draft Strategy to meet the Social Care Needs of Disabled Children and Young People and their Families**

1.0 PURPOSE OF REPORT

1.1 To consider a draft strategy to meet the social care needs of disabled children and young people and their families.

1.2 To approve public consultation on the draft strategy, which is attached at Appendix 1.

2.0 EXECUTIVE SUMMARY

2.1 The Council has a 2020 NY target saving for budgets relating to disabled children and young people and their families of £887k. This report proposes consultation on a draft strategy which will emphasise support and provision which is personalised; a reduction in bureaucracy; involve greater targeting of provision and reductions in the cost of some individual packages of social care support; make significant improvements in preparation for adulthood, and also be affordable within the reduced budget.

2.2 The draft strategy proposes additional investment for a fixed period in some parts of social care provision in order to build the capacity to make significant changes and improvements, and also to achieve longer term sustainable savings. It also highlights the need for the voluntary and community sector, with some support from Council, to further develop local support opportunities for families across all parts of the county.

2.3 It is also necessary to propose to achieve some part of the savings by reducing levels of discretionary provision, and by reducing the indicative levels of support for new cases in the disabled children's service.

2.4 The draft strategy seeks to respond to big challenges with proposals which pay due attention to the six cross cutting themes in the 2020 NY programme, and which would be implemented in a phased and carefully managed way. .

3.0 ISSUES

3.1 From 2008/09 there was significant additional investment in provision for disabled children and young people through the government's Aiming High for Disabled Children programme. The challenge now is how to develop and implement a coherent strategic approach to making provision whilst disinvesting, and also minimising potential disruption to the lives of these families.

3.2 The Children and Families Act, 2014 and the Care Act, 2014 have raised the expectations around disabled children and young people and their families and it is important in this context that the emphasis in the draft strategy is on being ambitious

and forward looking as much as it is about cost reduction and managing within reduced resources.

#### 4.0 PERFORMANCE IMPLICATIONS

- 4.1 The current local performance indicator set for services relating to the social care of disabled children and young people and their families is currently limited to measuring the timeliness of statutory assessments, Ofsted judgements of Children's Resource Centres and progress against the commitments in the Disabled Children's Charter. It is proposed as part of the strategy that a broader set of indicators be developed which additionally will enable reporting on issues concerning the quality of the service received by parents and carers, and children and young people.

#### 5.0 POLICY IMPLICATIONS

- 5.1 When the strategy, as amended following consultation, is approved by the Council, it will be necessary to consult on a revised Short Breaks Statement. This would include proposed revisions to the indicative service response guide which informs resource allocations following assessment of need. The Short Breaks Statement is included in the Local Offer of all services for disabled children and young people and their families.

#### 6.0 OPTIONS

- 6.1 A number of models for reframing eligibility to provision made by the Council, as a way to achieve the savings target, have been considered by officers. These are illustrated and summarised at Appendix 2.
- 6.2 The main alternative option to the proposals in the draft strategy would involve the upwards recalibration of the criteria for eligibility to services to meet assessed need, and the subsequent reassessment of significant numbers of disabled children and young people and their families to ascertain whether they would meet the revised criteria. This would require significant temporary additional investment in additional social workers, if they were available, and no guarantee of the required cost reductions. This option also carries a greater risk of legal challenge, including judicial review.
- 6.3 The option of reducing the overall cost of individual short break packages for those assessed as requiring support is included, but for new cases only. Where provision is already being made, reviews of need and provision would take account of the Council's guidance on indicative service response guide which was in place when the child and family were first assessed as requiring support.
- 6.4 The draft strategy and focus areas for change are recommended because, whilst achieving the required 2020 NY saving, they would also secure some significant improvements to services.

#### 7.0 FINANCIAL IMPLICATIONS

- 7.1 Appendix 3 provides an analysis of current and proposed budgets for all areas of social care provision for disabled children and young people and their families. The savings will be profiled over the 3 year period and the delivery cashable benefits will be closely monitored.

7.2 When the revised budgets are implemented, North Yorkshire will still spend more than statistical neighbours, using DfE benchmarking data.

## 8.0 LEGAL IMPLICATIONS

8.1 The draft strategy addresses a number of themes in order to deliver significant savings whilst simultaneously seeking to improve assessment processes and provision for the care needs of disabled children and young people and their families. The themes are set in the context of a number of legal duties and statutory guidance which are summarised below.

8.1 The Children Act 1989 imposes a duty on local authorities to assess needs and Section 17 contains the definition of a “child in need”. A disabled child is per se a “child in need”.

8.2 Statutory Guidance: “Framework for the Assessment of Children in Need and their Families” was published by the Department of Health in 2000. This guidance must be followed, unless there is good reason not to do so. The basic principles of the Assessment framework are:

- Assessments should be “needs-led” rather than by the availability of provision
- Assessments should take into account the needs of the whole family and individuals within it
- Assessments should be undertaken and provision made so that children and families do not have to wait for essential services to ensure that families do not reach crisis point
- Assessments are reviewed as children grow and develop and their family circumstances change

8.3 Section 90 Children and Families Act 2014 inserts new Sections 17ZD and 17ZE in to the Children Act 1989 which place the local authority under an additional duty to assess the needs of carers, and then decide whether to meet those needs.

8.4 A local authority must explain the process by which it decides whether or not a child is “eligible” for support services. The draft strategy does not involve any change to the current eligibility criteria.

8.5 Under the Breaks for Carers of Disabled Children Regulations 2011 a local authority must provide a range of services including day time care and overnight care, in the child’s home or elsewhere; educational or leisure activities outside of home and services to assist carers on evenings, at weekends and during school holidays.

8.6 The Chronically Sick and Disabled Persons Act 1970 places a duty on local authorities to make arrangements for the provision of welfare services including practical assistance in, and adaptations to, the home, recreational facilities outside of the home, and facilitation of holidays. However, the local authority would generally meet their duties in terms of a disabled child assessment under the Children Act 1989. The duties under this Act will be replaced when the Care Act 2014 comes into force in April 2015.

8.8 Sections 58, 59 & 60 of the Care Act 2014 place the local authority under a duty to carry out a child’s needs assessment if the child is likely to have need for care and support after the age of 18. There is a duty to assess the needs of carers during the

transitional period, and if the local authority refuses it must set out reasons for its refusal.

- 8.9 The local authority must consider its duties under the Equality Act 2010 and ensure that it does not discriminate against anyone because they have a disability, or against a family member of a disabled child.

## 9.0 CONSULTATION

- 9.1 There will be a twelve week public consultation on the draft strategy, including a number of meetings with parents and carers to listen to their views and to discuss their ideas and concerns. Written responses to the consultation, and a digest of issues raised at meetings, will be included in the report to the Executive at the end of the consultation period.

## 10.0 IMPACT ON OTHER SERVICES AND ORGANISATIONS

- 10.1 The stronger communities theme in the draft strategy has implications for the development of community capacity through the voluntary and community sector. In some areas of the county there already exists a mature and well regarded infrastructure to enable this .Work will be undertaken through North Yorkshire and York Voluntary Forum and the Council's Stronger Communities team to assist with the development of additional and wider local capacity to support parents and carers.

- 10.2 The North Yorkshire forum for parents and carers of disabled children and young people, NYPACT, works in partnership with the local authority on all proposed developments to strategy, policy and practice. A reference group of parents has assisted officers in the development of the draft strategy by offering advice and insights. This has been on the clear understanding that the proposals do not represent the views of NYPACT or the members of the reference group. NYPACT will play an appropriate and significant role in facilitating engagement and consultation meetings with parents and carers.

- 10.3 There will be further engagement and consultation with the Partnership Commissioning Unit representing the four North Yorkshire CCGs, and with the Airedale, Wharfedale and Craven CCG concerning the health provision for disabled children and young people. The intention is to include in the SEND strategy, which is shortly to be reviewed, a section covering the Health needs of disabled children and young people.

- 10.4 One of the proposals in the draft strategy is improvements in the preparation for adulthood of disabled young people by significantly reducing the problems and issues related to that transition. Discussions between CYPS and HAS, with 'invest to save' funding largely from the Dedicated Schools Grant, will enable the implementation of a well- researched and practical model to achieve this. The proposed model will be refined with HAS, and in discussion with NYPACT and the Flying high Group of disabled young people before it is finalised and launched across the county in 2015. Health, Housing and Leisure services will then be engaged in the model so that the holistic needs of the young person are planned for.

- 10.5 There are important links between the proposals in the draft strategy and other services in CYPS. In particular, the forthcoming review of the Fostering Service in Children's Social Care will enable more local opportunities for the parents of disabled children by actively promoting the recruitment of additional foster carers willing to offer overnight care in family settings. This key aim of the draft strategy would enable

a reduction in the number of places required in Children’s Resource Centres and the closure of one CRC when this has been achieved.

11.0 RISK MANAGEMENT IMPLICATIONS

11.1 The risk log for this project is attached at Appendix 4.

12.0 HUMAN RESOURCES IMPLICATIONS

12.1 The Council delivers its current social care services for disabled children and young people and their families through the Disabled Children’s Service, and through the Inclusion Support officer group in Integrated Services. Staff in those services are aware that once the strategy for meeting social care needs has been adopted by the Council following consultation, it will be necessary to review and restructure the staffing required to deliver it. A significant proportion of the overall savings target will be achieved through this restructuring, as shown at Appendix 3.

12.2 The restructuring of Council services relating to the social care of disabled children and young people and their families will be carried out in line with Council policies and procedures.

13.0 EQUALITIES IMPLICATIONS

13.1 A draft Equalities Impact Assessment is attached at Appendix 5. This will be published with the consultation document and will be updated and reported to the Executive at the end of the consultation period.

14.0 RECOMMENDATION

14.1 That Executive Members consider the draft strategy for meeting the social care needs of disabled children and young people and their families and approve it for public consultation.

PETE DWYER  
CORPORATE DIRECTOR – CHILDREN AND YOUNG PEOPLE’S SERVICE

*Report prepared by Andrew Terry, Assistant Director, Access and Inclusion*

Consulted .....Executive Member

Date: 9 December 2014

Agreed: .....Corporate Director

Date: 9 December 2014

Appendices

Appendix 1 - Strategy for Meeting the Care Needs of Disabled CYP and their Families 2015-2018

Appendix 2 - 2020 Social care services for Disabled Children - Options Appraisal (Matrix)

Appendix 3 - Budgets for Disabled Children Young People and their Families

Appendix 4 - 2020 Risk Register

Appendix 5 – Draft Equalities Impact Assessment

## **DRAFT STRATEGY FOR MEETING THE SOCIAL CARE NEEDS OF DISABLED CHILDREN AND YOUNG PEOPLE AND THEIR FAMILIES, 2015-2018**

### **Forward**

All children and young people are unique individuals with their own characters, strengths and abilities, needs and aspirations. They want to feel safe, to be listened to, to have friends, to be able to enjoy leisure and social opportunities, and to be guided and helped in their preparation for adulthood and independence. Those who have a disability are no different but they are more vulnerable, and their need for support to enable them to exceed expectations is greater, and sometimes significantly so.

We believe that children's needs are best served in their own families. They too have their own unique resources and strengths, but those with a child, or children with disabilities sometimes require extra help with their social care so that they are better able to manage. The needs of some families of a child with disabilities are severe and long term, and they need high levels of support to help them to stay together.

The Council has a crucial role to play in supporting children and young people with disabilities and their families to succeed. We remain ambitious on their behalf and we have a good track record. We invest proportionately more in this area of work than the majority of councils; we continue to maintain a dedicated social work service for the families of children with disabilities which is well regarded, and Ofsted, in their May 2014 inspection report, commented favourably on the provision made for children with complex and enduring needs.

It is well known that Councils are faced with the challenge of large reductions in their budgets. These are so significant in the period to 2020 that all of the services which we provide have to be examined for efficiencies and reductions, even those for our most vulnerable families and communities. In the past three years we have saved over £500k in the social care budgets for disabled children through a carefully managed programme of efficiencies with little or no adverse impact upon children and their families. Whilst that method has been successful in reducing costs, it is not the way to address the financial challenge which we now face. We have further savings of £887k to make in the next three years, and we also want to make some targeted investment in some parts of the service to bring about important and necessary changes. A strategic approach to making provision is now needed in order to protect what we most value, and to enable us to do things differently whilst making sure that services are affordable.

Less money to spend is an unavoidable reality, but we should not dilute our aspirations. Where we can, we must make opportunities to alter and improve our approaches to making good and effective provision and we must target our resources at the greatest need. The key themes in the section of the new Children and Families Act which deals with special educational needs and disabilities have helped to shape this draft strategy. They are positive and emphasise greater choice for parents; the personalisation of provision; more active engagement of children and young people, and parents and carers in the planning of services; improved working with other agencies, and effective transition to adulthood of young people with complex needs.



Important strategies cannot be developed and delivered successfully without the help of partners. That is especially true in the case of this strategy which will be greatly strengthened through the engagement and support of the voluntary and community sector. Though more developed in some areas of the county than others, voluntary groups already do a lot. We must help them to do more, and to extend their reach. Families live within local communities, and across a whole range of services, the Council will work to strengthen the ability of those communities to provide more help and support.

We are very mindful of the legal duties which are placed on the Council and will ensure that they are adhered to. Just as importantly, we are mindful of the collective moral purpose which sits at the heart of our Children and Young People's Plan which emphasises our commitment to the right opportunities and experiences for every child.

Through North Yorkshire's Health and Wellbeing Board, the Council has signed up to the Disabled Children's Charter. That commits us, amongst other things to engaging directly with parent carers of disabled children and young people. In the drafting of this strategy Council officers have had regard to the insights and advice of a small reference group of parents from NYPACT, the forum for parents of children with disabilities. It is the first time that we have tried this approach. It was the right thing to do and our intention is to take the same approach whenever we develop services, policies and strategies in the future. But I think that it is important to be clear that the role of NYPACT is also to question and challenge decision makers, and that the responsibility for the proposals in this draft strategy rests firmly with the Council.

The draft strategy is ambitious and challenging for parents and carers, young people, the voluntary and community sector, and for Council employed staff. Taken together, it would represent 'whole system' change, and a significant shift in expectations. It would need to be managed with great care, always involving meaningful engagement and consultation.

We look forward to hearing your views on the draft strategy which will help us to shape the future of social care services for children with disabilities and their families.

**(add Tony Hall's and Pete Dwyer's signatures here)**

## Aims and Principles

The overarching purpose of this draft strategy is to ensure that, across North Yorkshire, there is a sustainable system of support and social care provision for disabled children and their families.

### Aims

- i) promote personalisation for the families of disabled children and young people and increase the choices available to them, including through Direct Payments.
- ii) prevent family breakdowns and reduce the number of disabled children who become Looked After.
- iii) increase the proportion of disabled children enjoying overnight care in family based settings and within children's own homes.
- iv) ensure that services are respectful to children and young people by ensuring that they are fully consulted on matters which directly affect them, taking account of their developmental age.
- v) ensure that parents and carers are consulted on matters that affect their children, and that they are treated with respect and courtesy.
- vi) ensure that assessed needs are met in a realistic and proportionate way
- vii) ensure that the transition to adulthood is well planned and managed

### Principles

- i) the safeguarding of disabled children and young people is paramount
- ii) the strategy acknowledges that every child is a unique individual and that support and help for them should therefore be personalised
- iii) the strategy will take full account of the legislative framework for disabled children, the Equality Act and related DfE guidance
- iv) financial and other resources will be used effectively and transparently, ensuring that the highest levels of need receive the greatest levels of support
- v) the strategy will recognise the value and importance of targeted prevention and early help
- vi) the strategy will recognise the need to provide co-ordinated locally based provision with other agencies and the voluntary and community sector
- vii) the strategy will be supported by a range of providers who are committed to ensuring high quality, ethical care
- viii) the Council's social work service for disabled children and their families will be staffed by suitably trained and experienced workers and managers

- ix) the strategy will be informed by the range of different practice in other local authorities

## 1 THE CURRENT POSITION

### Assessment of Need and Eligibility to Services

Assessment is at the heart of the duty on the Council to support disabled children, young people and their families. All assessments comply with the requirements outlined in the 'Framework for the Assessment of Children in Need and their Families' published by the Department of Health in 2000. The Assessment Framework ensures that when social workers in the Council's Disabled Children's Service (DCS) undertake an assessment of a child or young person's care needs they address all aspects of their life. The needs of carers are also assessed in line with the duty to carry out a carer's assessment, when requested.

The children and young people who are supported by the DCS usually have significant learning disabilities which are often accompanied by other needs. Disabled children and young people with higher functioning conditions (e.g. Asperger's, ADHD, attachment disorders, and mental health difficulties) can have their needs met through the Council's prevention services or at higher levels of need, following assessment by the Children's Social Care Service.

The Council's eligibility criteria for access to services from DCS is:

'The disabled child or young person has needs arising from a learning disability and/or a physical disability which have a substantial and long term adverse effect on carrying out normal day-to-day activities AND there are significant difficulties in meeting needs within their family, broader support networks or through local universal provision'

On completion of an assessment, a decision is made whether it is necessary to provide services, and if so, the type and levels of provision to meet need. Decisions about this are made with reference to an indicative service response guide.

The DCS and provision for disabled children and young people and their families is organised in three geographical areas which relate to District Council boundaries. The West area covers Harrogate and Craven; Central covers Hambleton, Richmondshire and Selby, and East covers the Scarborough and Ryedale areas.

The table, below, shows the number of children open to DCS over the last five years at 31<sup>st</sup> March and at October 2014.

**Table 1**

	2010	2011	2012	2013	2014	October 2014
Central	193	169	139	130	133	150
West	149	158	133	132	135	125
East	214	175	182	179	183	184
Total	556	502	454	441	451	459

## 2 TYPES AND RANGE OF PROVISION TO MEET ASSESSED NEEDS

Disabled children whose needs meet the DCS criteria may receive a range of support and interventions from the service. This may range from advice and guidance about behaviour management, parenting, and individual work with children and young people to services which offer the family a break from their caring responsibilities and the child a break from their carers. These are known as short breaks. Short break services support children to help them to continue to live at home, to be more included in their local community and to increase their independence. They enable the parent or carer to take a break from their caring responsibilities and for the disabled child or young person to have a break from their main carer. It can be a modest service that enables the child or young person to have a period of day care, to access a community activity or specialist day care activity, or an overnight service in a Registered setting in foster care or a children's resource centre.

The range of short breaks that families access is wide and can include holiday activity groups with specialist providers, Saturday groups, domiciliary care in the home, early years settings, sitting services and day care. Some of these may be funded by a Direct Payment or commissioned by the Council from local providers. The pattern of provision may differ in some areas because of the availability of services, but this type of provision would be similar in most local authorities, subject to the range of providers in the area.

### Overnight Care

There is a group of children whose needs are so complex that their parents and carers are assessed as requiring overnight short breaks. In October 2014 the total number of disabled children and families receiving an overnight short break was around 140.

### Domiciliary Care

Approximately 20 families use domiciliary care to provide an overnight break. These families prefer to take the overnight service in their own home but other families may not have the space to accommodate an overnight carer, or would not feel the benefit of the break if their child was still in their home. Some of these families use a Direct Payment to pay for domiciliary care.

### Family Based Care

As of October 2014, 40 disabled children and young people were receiving family based short breaks. Currently there are 30 sets of foster carers who provide placements for disabled children, two of whom are Contract Carers who support children with the most complex needs.

The average cost of overnight care which is made by a Foster Carer is £55 per night.

The average cost of overnight care which is made by a Contract Carer is £130 per night.

### Children's Resource Centres

There are four CRCs in the county which offer overnight short breaks, and also some day care. They are:

**West**                    Nidd House, Killinghall and its partner, Beck House, Starbeck, Harrogate, and The Ghyll, Skipton

**Central**                Morton-on-Swale, Northallerton

**East** May Lodge, Scarborough (provided through contract by Action for Children)

The table, below, shows the number of children accessing each of the CRC's in October, 2014.

**Table 2**

Children's Resource Centre	No of Children
May Lodge	18
Morton-on-Swale	22
Nidd House & Beck House	29
The Ghyll	11
<b>Total</b>	<b>80</b>

Desk top, case by case, analysis has concluded that approximately half of the children who currently access overnight short breaks in CRC's could have their needs equally well met in a family based setting, if that opportunity was available.

The average cost of overnight care which is made in a CRC is £425 per night.

### **Direct Payments**

Families who have assessed need can request part or all of their service response as a Direct Payment (DP). The number of families receiving a DP has steadily increased since 2003 to its current level of around 130.

Families can use their DP for services which meet assessed need. For instance, if a family has day care needs they could choose to employ a personal assistant or a session at a suitable day-care setting or scheme.

The DP support service for the families of disabled children and young people is provided by the Council's Health and Adult Services. There is a need for this service to be re-specified to acknowledge the growth in demand, and the strategic intention more actively to promote DPs as a positive choice for more parents and carers.

### **Commissioning and Contracting of Provision**

Just under half of the total provision budget for disabled children and young people is spent on services which are commissioned from independent providers, including Direct Payments.

In 2013/14 a family based fostering service contract in the Central and West areas was ended and the service was brought back 'in house' as it could be more cost effectively managed through the Council's own Foster Care Service,

Generally, there is a limited availability of registered independent providers in the county. This is more so in the rural areas.

Services which are provided by the independent sector are commissioned and contracted in line with Council's procedures and protocols.

## **Discretionary Provision**

### Short Break Grants

As part of its response to Aiming High for Disabled Children, the Council has provided some short break support to disabled children and families with lower levels of need through its Integrated Support Service. The table below shows the take-up of that support over the last three years. In 2014/15 the support has been provided by way of a grant (£500 per family) as a way of reducing bureaucracy and this has led to a significant increase in demand.

**Table 3**

2012/13	226
2013/14	276
2014/15	377

### Outdoor Education

The Council makes an annual grant of £58k to the outdoor education centre at East Barnby to assist it to make provision for disabled children and their families utilising the adapted facilities which the Aiming High for Disabled Children grant helped the centre to develop. Some of the service is provided at the outdoor education centre at Beverley Park. The original aim was to provide for children with severe and complex needs but the remit has widened to include a wider range of disabled children. In 2013/14 the centres provided 59 activity days for 446 disabled children and their families.

Woodleigh children's home in Harrogate provides an outreach activity service. This provides a range of inclusive events and activities for young people with a variety of needs.

### Targeted Youth Groups

The Council's Youth Service makes inclusive provision in all areas of the county through the FUSE theatre project and other targeted group opportunities. FUSE is an inclusive youth theatre project which has a presence in seven localities in North Yorkshire and has funding until at least 2017 from the Big Lottery. 130 young people, some of whom are disabled, access FUSE

## **Transition to Adulthood**

Some disabled young people need extra help and support as they move into early adulthood. Those with significant and complex needs may continue to require services from the Council. This is an area of provision to which the SEND part of the Children and Families Act, 2014 and the Care Act, 2014 have drawn particular attention as requiring improvement. The Council has implemented some significant developments in the last three years through personalised learning pathways to help to build the independence of disabled young people and to better prepare them for adulthood.

## **The Disabled Children's Service**

The DCS has been a specialist service since 1996. It includes 17 Social Workers and 10.5 Family Support Workers, all of whom are appropriately qualified. In 2012 the DCS undertook a satisfaction survey of parents and carers of disabled children which showed high levels of satisfaction with the service received.

### **Inclusion Support Officers**

As part of its Integrated Support Service, the Council provides a team of eight Inclusion Support Officers whose key role is to work with the families of disabled children whose needs are not so great as to require statutory provision. Until 2014/15 they were significantly responsible for locating and allocating discretionary support to those families, but that is now achieved by payment of grants. They also assist families by 'signposting' services and advising settings on inclusive practice.

### **Fostering Service**

The Fostering Service includes 2 Fostering workers and 19 sets of Foster Carers for disabled children. This group of staff and carers serve the West and Central areas of the county. Action for Children are currently contracted to deliver family based care in the East of the county.

### **Care Services Provided by Health**

There are three significant strands of Health support related to the care needs of disabled children. The CRC in Scarborough is provided by Action for Children under a joint commissioning arrangement between the Council and Health. The Council and health work closely in relation to children with very complex health needs and plan jointly for children and young people where Continuing Health Care funding is required to address plans which need a collaborative approach. Health also commission the Training and Education of Short Breaks Service (TESS) which provides training for family based carers, CRC's, and settings.

### **Support and Provision from the Voluntary and Community Sector**

There are a number of established and successful voluntary and community groups across the county who support disabled children and their families, some of them representing national organisations and charities. There is, however, no pattern of support; there are gaps in some areas of need and in some geographical areas of the county. A few of the groups also hold Council contracts to provide services to the families of disabled children. The availability of VCS support is included in the Local Offer.

North Yorkshire Parents and Carers Together (NYPACT) is the overarching parent forum for disabled children and their families. It is represented on the Children's Trust Board. Funding for administrative support to NYPACT is provided by the Council through a contract with North Yorkshire and York Forum for Voluntary Organisations. NYPACT currently has over 750 members.

The Council has a contract with Barnados to co-ordinate the Flying High Group. This is a group of disabled young people between the ages of 16 and 25 who work with the Council to help with consultation and engagement relating to key policies and practices. This group has won national recognition for the important work it has carried out and has recently assisted in a United Nations research on disability rights, and worked with the Office of the Children's Commissioner. The Flying High Group was actively engaged in the development of the short breaks programme and the young person's version of the Local Offer.

### 3 PROPOSALS FOR CHANGE AND IMPROVEMENT

The proposals for change and improvement would be supported by policies which put personalisation, local delivery and community support at the heart of the strategy.

#### Focus Area 1: Protecting Eligibility to Services

The Council's criteria for eligibility to services for assessed needs would **not** be altered. This means that, all else being equal, there would continue to be about 450 families of disabled children and young people who require provision to be made by the Disabled Children's Service.

The annual review of the Short Breaks Statement, including engagement and consultation with parents and carers, will include any amendments arising from the draft strategy.

#### Focus Area 2: Reducing Bureaucracy

For disabled children with lower levels of assessed need, we believe that most families do not always require the on-going involvement of a social care professional. Our analysis shows that approximately 130 families who currently have regular contact from a social care professional could continue to receive a service without the need for such frequent involvement.

Where the Council believes that family circumstances are stable, predictable and safe, and where there are no child protection concerns, we propose to spend less time overseeing these cases. This would help to reduce bureaucracy and empower families. It would also require lower levels of staffing to be made by the Council.

The needs of these children and young people and their families would be considered as part of the annual review of their Education, Health and Care Plan or Statement of SEN. A system would be put in place for when a review identified the need to re-engage a social care professional with the family more frequently.

These families would also be provided with a named person should they wish to discuss the needs of their child at any time, or if they had any questions or concerns about the services being provided.

#### Focus Area 3: Enabling more Choice and Control

Direct Payments allow families to choose how resources are spent, allowing them to find alternatives to Council services. Whilst recognising that some families do not want to use DP's, we will continue to promote them as a positive option, and to increase the confidence of parents and carers in DP's by improving the advice and guidance which the Council provides.



**Focus Area 4: Reducing the cost of some individual packages of support**

Decisions about the type and levels of support to be made in packages following an assessment of need are made with reference to the indicative service response guide. This would be reviewed as part of the Short Breaks Statement consultation during the summer term, 2015, with a view to reducing the cost of new packages of support. Existing cases would be reviewed, in the normal way, using the existing indicative levels of service.

**Focus Area 5: Enhancing local provision by providing more family based short breaks**

Many families of disabled children and young people face limited choice in the type of overnight care service which they can access. Although family based care is available, for many the offer is limited to residential short breaks in Children's Resource Centres.

We propose to develop a policy which would promote family based overnight opportunities as the preferred option, where this would meet assessed need, either through domiciliary care or with foster carers.

To enable this we intend to increase the number of foster carers for disabled children, both existing foster carers who are willing to extend the provision which they make, and new foster carers. This development will be managed through the Council's Fostering Service, in which we will additionally invest over the next three years to ensure that there is more high quality provision for disabled children and young people.

The current and proposed number of foster carers, Contract Carers and domiciliary carers is shown, below.

**Table 4**

Type of Provision	Existing	Proposed	Difference	2015-2016	2016-2017	2017-2018	2018-2019
<b>Development of Family Based Care</b>							
Contract Care	2	5	3	0	1	2	0
Foster Care	26	51	25	8	9	8	0
	28	56	28	8	10	10	0
Domiciliary Care	19	25	6	1	2	2	1
<b>Total</b>	<b>47</b>	<b>81</b>	<b>34</b>	<b>9</b>	<b>12</b>	<b>12</b>	<b>1</b>

The council has set aside capital funding of £300,000 in order to fund adaptations to the homes of foster carers, where required, in order to ensure that the needs of children and young people can be properly met.

#### **Focus Area 6: Children's Resource Centres**

Children's Resource Centres would remain available for children and young people with the most complex medical needs or challenging behaviour, and for whom a family based setting would be inappropriate. This would also include support those who are Looked After by the Council who may otherwise require provision to be made outside of the county.

As the number of overnight family based care opportunities increased over the three year period 2015-2018 the current capacity in CRCs would no longer be required.

At the mix and balance of overnight care places changes over the period 2015-2018, the current capacity in CRC's would no longer be required.

It is therefore proposed that CRC provision be centralised in Beck House, Starbeck and Nidd House, Killinghall for families in the Central and West areas of the county.

The Council would continue to commission the existing CRC in the East of the county ( currently at May Lodge, Scarborough).

Of the other two CRCs (The Ghyll, Skipton, or Morton-on-Swale, Northallerton), one would become a specialist CRC catering for disabled children and young people who are Looked After. The other would be closed. This would follow a detailed consideration of demand and the local availability of family based overnight opportunities.

We would consider, on case by case basis, and with Ofsted approval, extending the provision in CRC's to age 19 for young people who needed additional support in their transition to Adult Services.

### **Focus Area 7: Maintaining some Discretionary Provision**

#### i) Short Break grants for less complex needs

In order to target reduced levels of resource at the greatest need, it would not be possible to provide discretionary short break grants at the current level. At the same time, it is recognised that the availability of these grants helps to prevent the need for statutory services and the associated bureaucracy.

We therefore propose to maintain these grants but to cap the budget which is available to £100k per annum. The details of the grant scheme (eligibility, application process and amount per family) would be consulted upon in the 2015 Short Break Statement review.

#### ii) Financial support for outdoor education

The East Barnby outdoor education centre would no longer receive annual grant funding from the Council to support the provision which is made at the centre, and at the Bewerley Park outdoor education centre, for disabled children and their families. The Council would assist the centre in developing a sustainable funding model. This could involve a partnership arrangement between the centre, Ryedale Special Families and parents' groups.

The outdoor activity services provided by Woodleigh children's home, Harrogate, would continue.

#### iii) Targeted Youth Groups

The Council's Youth Service is currently being restructured. The changed service will consult in 2015 about the future configuration of local targeted groups and how they may be operated. It is anticipated that targeted youth groups, including the FUSE theatre project, will continue.

### **Focus Area 8: Improving Preparation for Adulthood**

Supporting more disabled young people to make a successful transition to adulthood is a key priority for the Council and its partners. We therefore propose to invest over the next three years in a new model which would support those young people with the most complex needs. They would have access to a seamless and specialist service ensuring that they are fully supported and able to develop a clear pathway into adulthood. This support would include earlier planning, access to consistent information, earlier access to the supported

employment service, appropriate education and training as well as a clear and fully coordinated move into adulthood at the most appropriate transition point suitable to the individual. This new model would remove the “handover” at the age of 18 to other services. The new way of working would ensure that the young person was at the centre of planning by providing them with a voice and greater control.

### **Focus Area 9: Strengthening Local Communities**

We propose to work more closely with the community and voluntary sector to help groups to meet lower levels of need by offering advice and support to the parents and carers of disabled children and young people. The Council would employ its Stronger Communities team to assist in this, and will also encourage and support the voluntary and community sector in any bids it makes to central government for grant funding for this purpose.

### **Focus Area 10: Improving Commissioning and Contracting**

Joint work would be undertaken with the commissioning and contracting team in Health and Adult Services to attract more domiciliary care providers able to work with disabled children and their families.

A provider forum would be established which would enable the Council to describe its needs to potential providers and to encourage interest about working in this specialist area.

Encouraging and developing the market of providers in this way, linked to the Local Offer, could help to contain costs and also to give confidence to more parents to opt for a Direct Payment.

### **Focus Area 11: Improving Engagement**

Work with NYPACT will be strengthened by supporting the development of their proposal to establish local groups of parents and carers.

The engagement framework which has been jointly developed between NYPACT and the Council will be extended.

Council officers will continue periodically to run local information sessions for parents, to attend NYPACT meetings on request, and to support the NYPACT annual conference.

The funding to sustain the Flying High Group, and for support to NYPACT would continue at its current level.

### **Focus Area 12: Improving Performance**

In consultation with disabled children and young people and their parents, the Council will develop new measures of the performance of its services which enable evaluation of the quality of provision and experiences. This will be reported on a regular basis.

**Focus Area 13: Improving Access to Information**

North Yorkshire's Local Offer, which has been recognised nationally as a good practice exemplar, will be maintained. Its further development will be informed by the views of disabled children and young people and their families.

**Focus Area 14: Reviewing Council Services**

We would take forward a staffing review of services provided by the Council. This would include staffing in the Disabled Children's Service and the Inclusion Support Officers in Integrated Services.

All services relating to the assessment for and provision of short breaks, including the Council's CRC's, would be located in the Access and Inclusion service.

A staffing review of Children's Resource Centres would be required in 2017.

Some additional staffing would be required in the Fostering Service to recruit and support new foster carers.

## 4 FINANCE

Information about the current and proposed budgets for disabled children and young people and their families is set out in **Table 5**, below.

### Budgets for Disabled Children, Young People and their Families

Description of Budget	Current Budget for 2014-2015 £	Proposed Budget £	Saving £	% of Existing Budget
<b>Discretionary Provision</b>				
Short Breaks (Level 2 Grants) Funding	100,000	100,000	0	0.00%
Contribution to Outdoor Education	58,000	0	-58,000	100.00%
	<b>158,000</b>	<b>100,000</b>	<b>-58,000</b>	<b>-36.71%</b>
<b>Provision to meet Assessed Needs</b>				
Children's Resource Centres	1,752,230	1,270,930	-481,300	-27.47%
Children in Need - Section 17 Payments to Parents or Childcare Providers	17,900	17,900	0	0.00%
Local Commissioning - spot purchasing of care, transport and Direct Payments	1,347,700	1,173,300	-174,400	-12.94%
Block contracts	162,100	93,100	-69,000	-42.57%
Foster Care	181,900	327,000	145,100	79.77%
	<b>3,461,830</b>	<b>2,882,230</b>	<b>-579,600</b>	<b>-16.74%</b>
<b>Staffing</b>				
Disabled Children's Service	1,369,000	0	-1,369,000	
Inclusion Support Officers	257,765	0	-257,765	
<i>Combined Service</i>	0	1,243,765	1,243,765	
Fostering Service	78,100	211,700	133,600	
	<b>1,704,865</b>	<b>1,455,465</b>	<b>-249,400</b>	<b>-14.63%</b>
<b>Total Budgets</b>	<b>5,324,695</b>	<b>4,437,695</b>	<b>-887,000</b>	<b>-16.66%</b>

## 5 IMPLEMENTATION AND DELIVERY

The strategy for meeting the care needs of disabled children, young people and their families will be implemented in the three year period 2015-18. Strategic leadership would be provided by the Assistant Director, Access and Inclusion.

An implementation plan would be developed based on the Focus Areas. It would be monitored by Children and Young People's leadership Team and the Children's trust Board. The proposals for change would be delivered with the active engagement of parents and carers, and children and young people.

The revised and updated SEND Strategy 2015-18 will include a specific theme relating to meeting the health needs of disabled children and young people and those with complex health needs. This will enable appropriate linkages to be made with the strategy for meeting care needs.

## 6 MONITORING AND EVALUATION

The success of the strategy would be measured using a range of quantitative performance indicators, and new qualitative indicators that assess the satisfaction of disabled children, young people and families. The current indicators and most recent performance are shown, at Tables 6.1 - 6.3 below.

**Table 6.1**

Service	Indicator title	Performance – Year to date (April to October 2014)
Disabled Children Service	Number of referrals	95 Referrals completed
	Number of initial assessments	92 Initial Assessments completed
	Timeliness of initial assessments	88% of Initial Assessments authorised within timescales (10 working days)
	Number of core assessments	55 Core Assessments completed
	Timeliness of core assessments	96% of Core Assessments authorised within timescales (35 working days)

<b>Disabled Children's Charter Commitments</b>	<b>R/A/G rating</b>
1. 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	May 2014 Amber
2. We engage directly with disabled children and young people and their participation is embedded [in our work]	Amber
3. We engage directly with parent carers of disabled children and young people and their participation is embedded [in our work]	Amber
4. 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	Amber
5. We promote early intervention and support for smooth transitions between children and adult services, and with services provided by wider partners	Amber
6. We work with key partners to strengthen integration between health, social care and education services, and with service provided by wider partners	Amber
7. We provide cohesive governance and leadership across the disabled children and young people's agenda by linking effectively with key partners	Green

Table 6.2

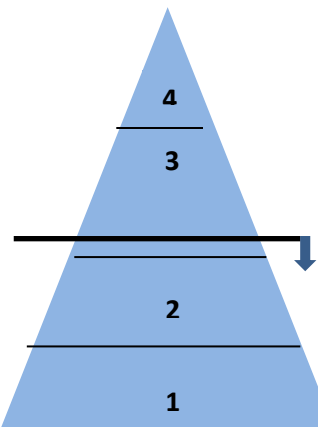
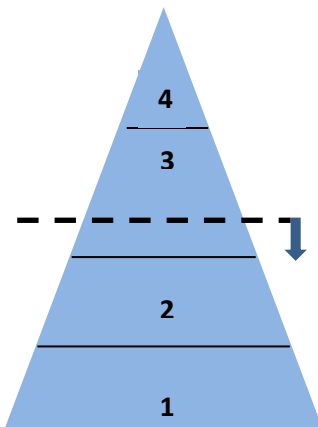
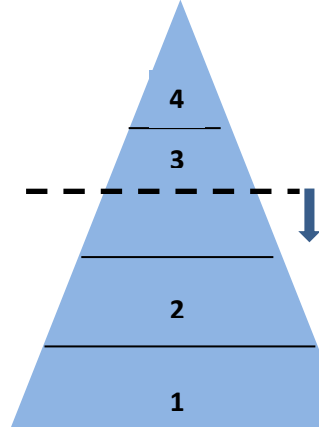
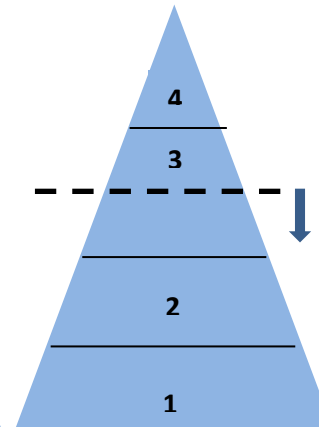
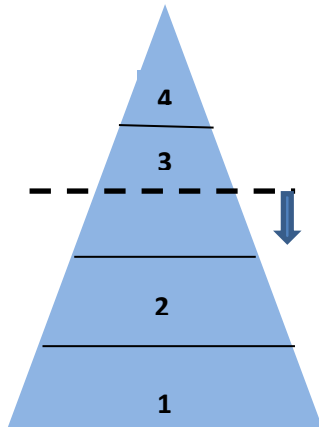
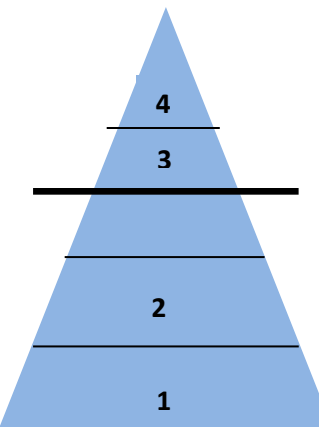


Table 6.3

Service	Indicator title	Setting Name	Most recent judgement
Children's Resource Centres	Ofsted Inspection Judgement	Nidderdale / Beck House	Good (very recent inspection - outcome awaited)
		May Lodge	Good (very recent inspection - outcome awaited)
		The Ghyll	Good
		Morton on Swale	Good

# 2020 REVIEW OF CARE PROVISION FOR DISABLED CHILDREN AND YOUNG PEOPLE, AND THEIR FAMILIES

## BUILDING A DIFFERENT STRATEGIC NARRATIVE - INITIAL OPTIONS APPRAISAL - 2014

	Option A	Option B	Option C	Option D	Option E	Option F	Doing Things Differently
<b>Outline Proposal</b>	<p>Offer statutory Services - Levels 3 and 4 only</p>  <p><b>De-escalate 100</b> less complex Level 3 cases currently case held by FSWs</p> <p>No short break offer at Level 2 but allows families access to co-ordination of services under a CAF process</p> <p>Increased use of Personalisation</p> <p>Reduce usage of CRCs</p> <p>Bring in house Contract Care/Traditional Short Breaks contract in East currently managed by AfC</p>	<p>Offer Services at Levels 2 to 4</p>  <p><b>De-escalate 130</b> Level 3 cases currently case held by FSWs and SWs</p> <p>Level 2 service limited to reduced number of low value SB grants.</p> <p>Lower Level 3 cases limited to grant</p> <p>Increased use of Personalisation</p> <p>Reduce usage of CRCs</p> <p>Bring in house Contract Care/Traditional Short Breaks contract in East currently managed by AfC</p>	<p>Offer Services at Levels 2 to 4</p>  <p><b>De-escalate 150</b> Level 3 cases currently case held by FSWs and SWs</p> <p>Level 2 service limited to smaller number of low value SB grants.</p> <p>Lower Level 3 cases limited to grant</p> <p>Increased use of Personalisation</p> <p>Reduce usage of CRCs</p> <p>Bring in house Contract Care/Traditional Short Breaks contract in East currently managed by AfC</p>	<p>Offer Services at Levels 2 to 4 but proposes a <b>20% cut</b> to all packages currently delivered to meet assessed need at Levels 3 and 4</p>  <p><b>De-escalate 150</b> Level 3 cases currently held by FSW's and SW's</p> <p>Level 2 service limited to small number of low value SB grants.</p> <p>Lower Level 3 cases limited to grant</p> <p>Increased use of Personalisation</p> <p>Reduce usage of CRCs</p> <p>Bring in house Contract Care/Traditional Short Breaks contract in East currently managed by AfC</p>	<p>Offer statutory services (Level 3 and 4) only but proposes lower level 3 cases will not receive a statutory response -DCS eligibility criteria raised</p>  <p><b>De-escalate 150</b> Level 3 cases currently held by FSWs and SWs</p> <p>Level 2 service limited to small number of low value SB grants.</p> <p>Lower Level 3 cases limited to grant</p> <p>Increased use of Personalisation</p> <p>Reduce usage of CRCs</p> <p>Bring in house Contract Care/Traditional Short Breaks contract in East currently managed by AfC</p>	<p>This is a combination of Options D and E. Offer statutory services (Level 3 &amp; 4)&amp; those who receive a service against the revised model receive 20% cut to packages</p>  <p><b>Close 150</b> Level 3 cases currently held by DCS</p> <p>Services are only provided to high level 3 and Level 4 cases.</p> <p>Increased use of Personalisation</p> <p>Reduce usage of CRCs</p> <p>Bring in house Contract Care/Traditional Short Breaks contract in East currently managed by AfC</p>	<p><b>Review of CRC use and investment in family based SBs</b></p> <p>A significant proportion of the DCS provision budget is currently spent on CRC's (£1.752m). The unit costs are high. There are significant differences in the average cost of a night in a CRC when compared to the average cost of a family based short break which is significantly cheaper.</p> <p>Analysis indicates that half of all current CRC users could have their needs met in a family based setting if this provision were available within the child's local area.</p> <p>Significant long term savings could be made if family based alternatives were provided as an alternative to CRCs. This would require a targeted recruitment campaign and a small number of adapted properties. Capital Funding is available for short breaks (circa £300k). This funding could be used to adapt a small number of domestic properties (subject to member approval)</p> <p>Moving forward children who continue to use CRCs will have their packages managed significantly more robustly, packages will not increase without re-assessment and high cost placements will be explicitly managed as an alternative to care.</p> <p>The longer term use of CRC's must be considered as more family based options are developed. This could include :</p> <ul style="list-style-type: none"> <li>- Increasing the role of CRCs in supporting LAC placements thereby reducing expenditure in</li> </ul>

	Option A	Option B	Option C	Option D	Option E	Option F	
<b>Deliverability</b>	Relatively easy to deliver but carries risks in terms of increased referrals. Compliant with Short Breaks Regulations, Working Together and the Council's Vulnerability Checklist  De-escalating lower level CIN cases could only be achieved with parental consent	Relatively easy to deliver. Compliant with Short Breaks Regulations, Working Together and the Council's Vulnerability Checklist  De-escalating lower level CIN cases could only be achieved with parental consent	Relatively easy to deliver. Compliant with Short Breaks Regulations, Working Together and the Council's Vulnerability Checklist  De-escalating lower level CIN cases could only be achieved with parental consent	Difficult to deliver given the legal problems in cutting services on a percentage reduction rate which may be unrealistic to meet assessed need  Easy to challenge because of the arbitrary application of service cut	Difficult to deliver given the problem in designing and applying different criteria for disabled children compared to other Children in Need  Easy to challenge because of different treatment of a Protected Group	Difficult to deliver given the problem in designing and applying different criteria for disabled children compared to other Children in Need  Easy to challenge because of different treatment of a Protected Group	<p>this area.</p> <ul style="list-style-type: none"> <li>- Generating income from bednights commissioned by HAS in order to aid a more effective transition to adulthood for some young people (ie providing bednights for young people beyond 18)</li> <li>- Closure of 1 or more CRC as family based opportunities increase</li> </ul> <p><b>Indicative Levels of Service</b> All families are unique and individual circumstances vary. The actual level and type of services offered to disabled children, young people and their families depends on the assessment of need.</p> <p>When deciding on the level of service to be offered, the council takes into account the assessed need, the overall package of services, and any exceptional circumstances.</p> <p>As part of our change process we will review the Indicative Guide which shows levels of service which may be offered. We will also ensure a more consistent application of the indicative service response by ensuring that all decisions in relation to level of service to be offered is considered by a central panel of senior officers.</p> <p><b>Bringing back in-house the Contract Care/TSB Contract</b> in the East of the County would allow a County wide fostering service dedicated to recruiting carers for disabled children. In-house fostering services in CSC can deliver this cheaper than private and voluntary providers.</p>
<b>Significant Actions</b>	100 cases would need to be identified for de-escalation  Short Break services would no longer be available at Level 2.  Impacts upon Short Break grants, Inclusion Officers and the Outdoor Education Service	130 cases would need to be identified for de-escalation  Limited Level 2 Short Break grants would be available but revised criteria and process would need to be developed  Impacts upon Short Break grants, Inclusion Officers and the Outdoor Education Service.  Impacts upon DCS staffing as a result of reduced case holding	150 cases would need to be identified for de-escalation  Limited Level 2 Short Break grants would be available but revised criteria and process would need to be developed  Impacts upon Short Break grants, Inclusion Officers and the Outdoor education Service  Impacts upon DCS staffing as a result of reduced case holding	150 cases would need to be identified for de-escalation  Requires the implementation of 20% reduction in packages of care to meet assessed need.  Public consultation on percentage reduction to disabled children's packages would require lengthy lead in and could be delayed by detailed responses highlighting inequity	150 cases would need to be identified for de-escalation  Public consultation on revised eligibility criteria would be required. This would require lengthy lead in and could be delayed by detailed responses highlighting inequity  Assuming revised criteria could be agreed, re-assessment against revised eligibility criteria for every case would be required.  Significant staffing implication in the re-assessment of 450 cases (450 core assessments would need to be reviewed against revised criteria).	150 cases would need to be closed  Public consultation on revised service model and percentage reduction would be required both of which would require lengthy lead in and could be delayed by detailed responses highlighting inequity  Assuming revised criteria could be agreed, assessment against the revised eligibility criteria for every case would be required. Significant staffing implication in the re-assessment of 450 cases (450 core assessments would need to be reviewed against revised criteria)	
<b>Risks</b>	Medium: Compliant with statutory duties  Significant Potential for referrals to DCS to increase because there is no longer an offer at Level 2	Low: Compliant with statutory duties  If services are to continue to be delivered at Level 2 criteria will need to be devised to limit the number of grants made	Low/Medium: Compliant with statutory duties  If services are to continue to be delivered at Level 2 criteria will need to be devised to limit the	High: Potential for legal challenge. Services provided following assessment must be 'realistic to respond to assessed need'.  Imposition of arbitrary	High: Potential for legal challenge as it raises the criteria to a point above that applied by Children's Social Care and the Vulnerability Checklist, treating Children in Need	High: Potential for legal challenge as it raises the criteria to a point above that applied by Children's Social Care and the Vulnerability Checklist, treating Children in Need differently	<b>Increased Personalisation</b> Every family with a service response from DCS currently receives the offer of a Direct Payment but these DP's do not generate significant cost savings. Increased emphasis needs to be placed on the potential for

<b>Risks (Cont)</b>		<p>and a cap will have to be set to manage the budget effectively</p> <p>Self-serve by families would reduce the need for workers to support the application process and a County Panel would manage requests. The challenge would be to set strict criteria without creating inequity.</p>	<p>number of grants made and a cap will have to be set to manage the budget effectively</p> <p>Self-serve by families would reduce the need for workers to support the application process and a County Panel would manage requests. The challenge would be to set strict criteria without creating inequity.</p>	<p>cut is not sustainable and easily challenged</p> <p>If services are to continue to be delivered at Level 2 criteria will need to be devised to limit the number of grants made and a cap will have to be set to manage the budget effectively.</p> <p>Self-serve by families would reduce the need for workers to support the application process and a County Panel would manage requests. The challenge would be to set strict criteria without creating inequity.</p> <p>Risk of upheld Children Act Complaints, involvement of LGO and Judicial Review</p>	<p>differently because of their disability</p> <p>Risk of upheld Children Act Complaints, involvement of LGO and Judicial Review</p>	<p>because of their disability</p> <p>Significant potential for referrals to DCS to increase because there is no longer an offer at Level 2/Lower Level 3</p> <p>Risk of upheld Children Act Complaints, involvement of LGO and Judicial Review</p>	<p>significantly more personalised approaches that lead to reductions in the overall cost of packages. This should increase flexibility but for families who access high cost services (residential SBs, Contract Care, Foster Care) the risk of double cost will exist until the budget is freed up by de-commissioning. A spend-to-save will be needed for two years to reflect changing patterns of delivery</p> <p><b><u>De-escalation</u></b> The proposition in de-escalation is for families who have gone through assessment, meet DCS criteria and a response to meet assessed needs, to receive those services without an allocated case holder (FSW or SW). The judgement will be that these are : <b><u>stable, predictable and safe</u></b> packages of care in families where there are no CP concerns and where the CIN Plan can be reviewed at the same time as the EHCP. Those cases would be closed by consent on LCS.</p> <p><b><u>Interdependencies</u></b></p> <ul style="list-style-type: none"> <li>- LAC</li> <li>- Development of new Fostering Framework</li> <li>- Future configuration of CRCs</li> <li>- Personalisation (with purpose)</li> <li>- Integrated transitions and preparation for adulthood</li> <li>- New model for preventative services</li> <li>- Implementation of C&amp;FA Act and consolidation of an integrated SEND Service (0-25)</li> </ul>
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## Budgets for Disabled Children, Young People and their Families

Description of Budget	Current Budget for 2014-2015 £	Proposed Budget for 2018-19 £	Saving £	% of Existing Budget
<b>Discretionary Provision</b>				
Short Breaks (Level 2 Grants) Funding	100,000	100,000	0	0.00%
Contribution to Outdoor Education	58,000	0	-58,000	-100.00%
	<b>158,000</b>	<b>100,000</b>	<b>-58,000</b>	<b>-36.71%</b>
<b>Provision to meet Assessed Needs</b>				
Children's Resource Centres	1,752,230	1,270,930	-481,300	-27.47%
Children in Need - Section 17 Payments to Parents or Childcare Providers	17,900	17,900	0	0.00%
Local Commissioning - spot purchasing of care, transport and Direct Payments	1,347,700	1,173,300	-174,400	-12.94%
Block contracts	162,100	93,100	-69,000	-42.57%
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	<b>3,461,830</b>	<b>2,882,230</b>	<b>-579,600</b>	<b>-16.74%</b>
<b>Staffing</b>				
Disabled Children's Service	1,369,000	0	-1,369,000	
Inclusion Support Officers	257,765	0	-257,765	
<i>Combined Service</i>	0	1,243,765	1,243,765	
Fostering Service	78,100	211,700	133,600	
	<b>1,704,865</b>	<b>1,455,465</b>	<b>-249,400</b>	<b>-14.63%</b>
<b>Total Budgets</b>	<b>5,324,695</b>	<b>4,437,695</b>	<b>-887,000</b>	<b>-16.66%</b>

# Risk Log

<b>Project:</b>	<b>Disabled children and young people, and their families</b>
<b>Project Manager:</b>	<b>Michelle Allison</b>

No	Date Raised	Type	Description & Consequences	Owner	Level	Pre Mitigation Ranking				Mitigation(s) with action by dates	Post Mitigation Ranking				Last Reviewed	Status
						Likelihood	Impact	Score	Ten		Likelihood	Impact	Score	Ten		
CDF5	03/11/2014	Strategic	Failure to establish a countywide overnight short break facility (through the fostering service) and a domiciliary care service	MA/MK	Programme	High	High	9	1	Completed actions: Agreement that capital will be available for adaptations; agreed investment in Fostering Service by A&I Required actions: Whole service review of fostering to include these proposals (Jan - Jun 2015); work with Corporate Communications team on the advertisement, marketing and recruitment services required for fostering(from Dec 2014)	Medium	High	6	2	19/11/2014	Open
CDF1	01/06/2014	Performance	Disinvestment and changes in delivery model for services for disabled children lead to increased risk of children going into care, safeguarding and child protection issues and risk of legal challenge (judicial review and IGO)	APT	Directorate	Medium	High	6	2	Completed actions: Detailed options appraisal; Engagement with Parent reference group; High level implementation plan; EIA agreed by Legal Required actions: Public consultation and consideration of outcomes (Jan-Mar 2015); Phased implementation of delivery model (2015-2018)	Low	High	3	3	19/11/2014	Open
CDF8	19/11/2014	Performance	Reduction in early intervention services results in increased number of agreed cases, threatening the savings plan and placing undue pressure on the proposed staffing compliment	MA	Project	Medium	High	6	2	Required actions: Improve moderation and gatekeeping of cases (Jan 2015); Increase the knowledge base of screening staff in the Customer Resolution Centre (Jan 2015); Introduce centralised decision making panel (Jan 2015)	Low	High	3	3	19/11/2014	Open
CDF6	03/11/2014	Personnel	Failure to ensure that the proposed staffing review does not leave the service without the necessary resilience to meet statutory duties and provide an ongoing safe service	MA/KP	Project	Medium	High	6	2	Required actions: Look to retain as many social worker graded posts as possible; Reduce the bureaucracy in the handling of around 1/3 of cases (Mar 2015 - Mar 2016); Maintain effective engagement with staff throughout the process	Low	High	3	3	19/11/2014	Open
CDF2	01/06/2014	Resources	Fail to maintain operational day to day service delivery	MA/KP	Directorate	Low	High	3	3	Required actions: Ensure sufficient staffing is in place (including fixed term contracts where necessary); Ensure effective engagement and communications with staff take place; Regular team briefings and service days; Begin formal consultation with staff (Nov 2014)	Low	High	3	3	03/11/2014	Open

No	Date Raised	Type	Description & Consequences	Owner	Level	Pre Mitigation Ranking				Mitigation(s) with action by dates	Post Mitigation Ranking				Last Reviewed	Status
						Likelihood	Impact	Score	Ten		Likelihood	Impact	Score	Ten		
CDF3	01/06/2014	Political	Loss of political support results in delay in making decisions and failure to make savings	APT	Project	Medium	Medium	4	4	Required actions: Continued updating and effective engagement of members; Approval to consult on proposals (Dec 2014); Public consultation and consideration of outcomes (Jan-Mar 2015)	Medium	Medium	4	4	19/11/2014	Open
CDF7	03/11/2014	Comms	Failure to engage and empower the volunteer and community sectors to build the local capacity required in order for the delivery model to succeed and savings to be made	APT	Programme	Medium	Medium	4	4	Completed actions: Good relations exist with local volunteer forum and Parent forum (NYPACT) Required actions: Engagement with the Head of Stronger Communities; Identification of areas in need of wider and deeper coverage	Medium	Medium	4	4	19/11/2014	Open
CDF4	01/06/2014	Proj Mgt	Failure to recognise, engage and align with Health and interdependent 2020 projects and themes including in particular Preparing for Adulthood and LAC	MA/TV	Programme	Low	Medium	2	5	Required actions: Continued close liaison with colleagues in other work strands and cross-cutting themes; include specific reference to Health in SEND strategy	Low	Medium	2	5	19/11/2014	Open



North

Yorkshire County Council

# Equality Impact Assessment (EIA): evidencing paying due regard to protected characteristics

**‘Strategy for Meeting the Social Care  
Needs of Disabled Children and Young  
People with Disabilities and their  
Families’ consultation**

**December 2014**

If you would like this information in another language or format such as Braille, large print or audio, please contact the Communications Unit on 01609 53 2013 or email [communications@northyorks.gov.uk](mailto:communications@northyorks.gov.uk).

যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন।

如欲索取以另一語文印製或另一格式製作的資料，請與我們聯絡。

اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھئے۔





**Equality Impact Assessments (EIAs) are public documents. EIAs accompanying reports going to County Councillors for decisions are published with the committee papers on our website and are available in hard copy at the relevant meeting. To help people to find completed EIAs we also publish them in the Equality and Diversity section of our website. This will help people to see for themselves how we have paid due regard in order to meet statutory requirements.**

Name of Directorate and Service Area	Children and Young People’s Service, Access and Inclusion
Lead Officer and contact details	Michelle Allison Head of SEND Service <a href="mailto:Michelle.allison@northyorks.gov.uk">Michelle.allison@northyorks.gov.uk</a> 01609 797630
Names and roles of other people involved in carrying out the EIA	Dave Chapman – Senior Planning and Development Officer, SEND Service Michelle Allison – Head of SEND Service  Andrew Terry – Assistant Director, Access and Inclusion
How will you pay due regard? e.g. working group, individual officer	Parent Reference Group; Parent Carer Participation Planning Group
When did the due regard process start?	July 2014
Sign off by Assistant Director (or equivalent) and date	Andrew Terry Assistant Director, Access and Inclusion

**Section 1. Please describe briefly what this EIA is about.** (e.g. are you starting a new service, changing how you do something, stopping doing something?)

This EIA relates to the development of a strategy for meeting the social care needs of disabled children and young people and their parents. The strategy provides an overarching framework for the proposed changes to the services and support that disabled children, young people and their families can access, within available resources. It is believed that this may improve some of the services available whilst also achieving efficiencies for the Authority.

The strategy would involve changes to the ways in which social care services for disabled children and young people are currently provided, and developments in the organisational structures and models that support those services. It emphasises personalised and increased local provision, and greater focus on the targeting of provision.

**Section 2. Why is this being proposed?** (e.g. to save money, meet increased demand, do things in a better way.

The Council is ambitious for disabled children, young people and their families and seeks to implement a strategy which will develop and modernise approaches and provision with the aim of improving services for disabled children and young people. The strategy also seeks to make efficiencies and save money due to reduced budgets for services for disabled children and young people as part of the Council's 2020 programme whilst ensuring that the Council's statutory duties are still met. The proposed changes which the strategy would deliver would also provide savings totalling £887k.

**Section 3. What will change? What will be different for customers and/or staff?**

There are four main areas in which services and provision would be different.

1 A greater proportion of overnight short breaks to meet assessed need would be provided through family based provision, either through domiciliary care or in foster care. There would be fewer places in children's resource centres. The provision made in children's resource centres in the Central and West areas of the county would be centralised in the Harrogate area. It is envisaged that one of the other 2 CRC's ( The Ghyll, Skipton and Morton-on Swale, Northallerton) would become a children's home for disabled children and young people who are Looked After, whilst the other would be closed once sufficient local family based provision was established. He children's resource centre in the East of the county at May Lodge, Scarborough would remain open.

2 The indicative service response which is taken into account when packages of provision for assessed need is made would be revised downwards, to apply in new cases, which would mean that needs would be met in a more affordable way.

3 Approximately 30% of cases which are open to the Disabled Children's Service

would be managed with decreased interventions and less bureaucracy whilst ensuring that parents and carers were appropriately supported by the social work service.

4 Resources for discretionary short break grants would be reduced and the budget would be capped. The annual grant to support outdoor education for disabled children at East Barnby and Bewerley Park outdoor education centres, would cease and help would be provided to develop a new funding model. Local voluntary and community groups would be assisted to extend and develop their support and provision. Targeted Youth Service provision would be maintained but could be provided and delivered differently.

**Section 4. What impact will this proposal have on council resources (budgets)?**

**Cost neutral?** N

**Increased cost?** N

**Reduced cost?** Yes

The overall budget for disabled children, young people and their families will be reduced. In the three year period 2015-18 the savings target is £887,000 which is 16.66 % less than the funding available in 2014. £500k of this total would be found from provision budgets, the remainder from staffing budgets.

<b>Section 5. Will this proposal affect people with protected characteristics?</b>	<b>No impact</b>	<b>Make things better</b>	<b>Make things worse</b>	<b>Why will it have this effect? State any evidence you have for your thinking.</b>
Age		X		The strategy includes improvements in the arrangements for preparation for adulthood (Transition) for disabled young people. This would include earlier planning, access to consistent high quality information, earlier access to the supported employment service, appropriate education and training, and fully coordinated move into adulthood at the most suitable

				<p>transition point for each individual, including those requiring adult social care services. It is believed that these are improvements for the benefit of disabled children and young people whilst we recognise that packages of care for new entrants, the capping of the budget for discretionary short breaks and the removal of the grant to East Barnby may have a negative impact.</p>
Disability		X	X	<p><b>Area 1 Overnight care to meet assessed needs.</b></p> <p>For approximately 40 disabled children and young people and their families this would represent an improvement in provision. Where appropriate to need, it will be made more locally in family based situations whereas currently some families requiring an overnight short break do not have this option and have to use a children's resource centre.</p> <p>Depending upon the location of the family home, centralising the remaining CRC provision in the Harrogate area could mean longer journeys.</p> <p><b>Area 2 Revision of the indicative service response.</b></p> <p>Whilst assessed needs would still be met, the level of provision made for new cases would be revised downwards. This proposal would be subject to a further consultation when the Short Breaks Statement is</p>

			<p>revised in 2015.</p> <p><b>Area 3 Less bureaucracy in 30% of cases.</b></p> <p>This would be welcomed by many parents and there would be safeguards put in place to ensure that each family retained a named social worker and that there would be greater engagement with the Disabled Children's Service should a review indicate that it was necessary.</p> <p><b>Area 4 Discretionary short breaks and targeted provision.</b></p> <p>The capping of the budget for discretionary short break grants and the reduction in the level of the grant would have a negative impact.</p> <p>The ending of the annual grant to the East Barnby outdoor education centre would have a negative impact unless a different local charging scheme could be developed.</p> <p>The local changes to the management of targeted youth support have no impact.</p> <p>Maintaining the current level of financial support to the parent and carer forum, and to promote the engagement of disabled children and young people would be welcomed.</p>
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Sex (Gender)	X			
Race	X			
Gender reassignment	X			
Sexual orientation	X			
Religion or belief	X			
Pregnancy or maternity	X			
Marriage or civil partnership	X			
<b>Section 6. Would this proposal affect people for the following reasons?</b>	<b>No impact</b>	<b>Make things better</b>	<b>Make things worse</b>	<b>Why will it have this effect? Give any evidence you have.</b>
Live in a rural area	X			<p>The aims and objectives of this strategy would apply to all disabled children and young people, irrespective of their home location.</p> <p>Some family based overnight short breaks would be made by the foster care service in more rural locations. There would be greater encouragement to domiciliary care for overnight breaks. This would mean more localised provision and shorter journeys for some children and young people.</p> <p>The centralisation of the CRC provision may cause longer journeys for some.</p>

				.
Have a low income	X			Disabled children's services and education, health and care plan (EHCP) provision are non-means tested and are based on assessed need. Therefore, the strategy will be applied equitably, irrespective of an individual's household income.

**Section 7. Will the proposal affect anyone more because of a combination of protected characteristics? (e.g. older women or young gay men?) State where this is likely to happen and explain what you think the effect will be and why giving any evidence you have.**

As service responses will be dependent on the assessed need of the individual, there will be no disproportionate impact on any combination of protected characteristics.

**Section 8. Only complete this section if the proposal will make things worse for some people. Remember that we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us.**

**Can we change our proposal to reduce or remove these adverse impacts?**

In order to maintain a comprehensive and meaningful service for the same number of disabled children, young people and their families it is necessary to target provision at the highest need, which means reducing the cost of packages of provision over time by amending the service response guide, whilst still meeting assessed need.

The Council will actively promote and support Direct Payments and work to develop the range of local providers so that parents have more choice and control over the way in which provision is made and increase personalised choice.

NYCC is a comparatively high spending council on services for disabled children which in part reflects the relatively expensive way in which some types of provision is

made.

**Can we achieve our aim in another way which will not make things worse for people?**

The development of the voluntary and community sector should help to ameliorate some of the potentially negative impacts by providing more local, community based help and support to families. The Council's Stronger Communities programme will be key to supporting this initiative with individual groups and through North Yorkshire and York Voluntary Forum.

**If we need to achieve our aim and can't remove or reduce the adverse impacts get advice from legal services. Summarise the advice here. Make sure the advice is passed on to decision makers if the proposal proceeds.**

It is imperative that the service continues to deliver services and meet needs in compliance with its statutory duties owed to disabled children and young people. It may be possible to achieve efficiencies if innovative changes can be introduced whilst ensuring needs continue to be met. The draft strategy illustrates that some measures may have an adverse effect, such as the capping of budget for discretionary short breaks and the removal of the grant for East Barnby. If this is discretionary and not statutory provision, it is possible to introduce such changes though it can have a negative impact on those receiving this provision, and should therefore be a proportionate action having regard to available budget and need for change.

**Section 9. If the proposal is implemented how will you find out how it is really affecting people? (How will you monitor and review the changes?)**

The development of the strategy has been informed by engagement sessions with a group of parents from North Yorkshire PACT (Parent Carer Forum) and with frontline staff who provide support to disabled children, young people and their families. The Flying High group of disabled young people will be engaged in assessing the success of the proposals relating to improvements in transitions.

These groups will continue to contribute during the implementation and delivery of the strategy and will provide important perspectives on the strategy's progress and impact.

The implementation and delivery of the strategy would be measured against a range

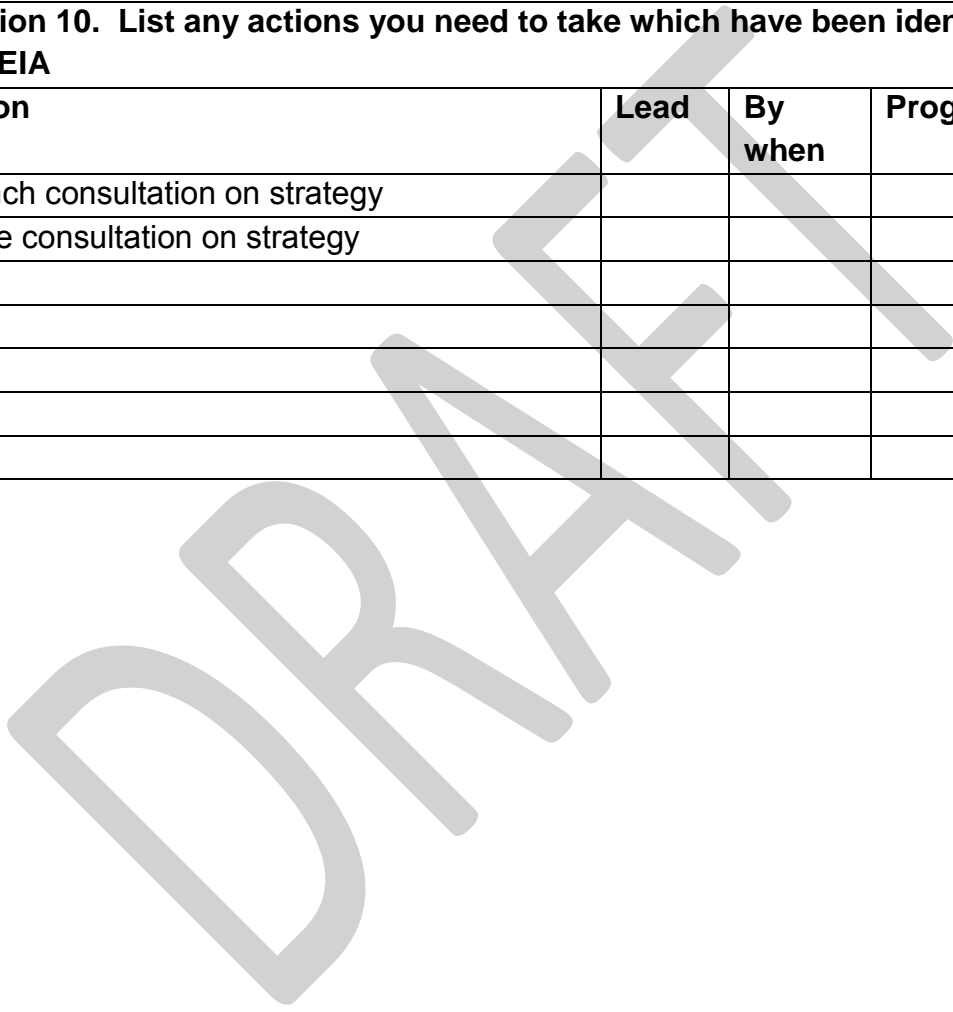


of quantitative indicators and a suite of new qualitative indicators that would enable the council to gauge the satisfaction of children, young people and families. These would form part of regular reporting on progress on implementation of the strategy to the North Yorkshire Children's Trust Board.

The regular review of individual cases would provide the basis for knowing how the proposed changes were affecting children and their families

**Section 10. List any actions you need to take which have been identified in this EIA**

Action	Lead	By when	Progress
Launch consultation on strategy			
Close consultation on strategy			
etc			



Consultation meetings – Disabled Children’s Strategy – <b>CONFIRMED Venue</b>	<b>Date</b>	<b>Time</b>
Knareborough Children’s Centre <b>Nidd &amp; Beck CRC service users only</b>	20 <sup>th</sup> Jan 2015	10:00 – 12:00
Cedar Court, Harrogate PUBLIC MEETING	21 <sup>st</sup> Jan 2015	1:00 – 3:00
The Ghyll CRC, Skipton <b>The Ghyll CRC service users only</b>	27 <sup>th</sup> Jan 2015	12:30 – 2:30
Rendezvous Hotel, Skipton PUBLIC MEETING	29 <sup>th</sup> Jan 2015	10:00 – 12:00
Falsgrave Community Centre, Scarborough <b>May Lodge CRC service users only</b>	2 <sup>nd</sup> Feb 2015	1:00 – 3:00
Morton-on-Swale CRC <b>Morton-on-Swale CRC service users only</b>	4 <sup>th</sup> Feb 2015	10:00 – 12:00
Falsgrave Community Centre, Scarborough PUBLIC MEETING	6 <sup>th</sup> Feb 2015	10:00 – 12:00
Allerton Court, Northallerton PUBLIC MEETING	9 <sup>th</sup> Feb 2015	1:00 – 3:00
Cedar Court Hotel, Harrogate PUBLIC MEETING	10 <sup>th</sup> Feb 2015	6.00 – 8.00
The ReGen Centre, Riccall PUBLIC MEETING	12 <sup>th</sup> Feb 2015	1:00 – 3:00
Falsgrave Community Centre, Scarborough PUBLIC MEETING	16 Feb 2015	6.00 – 8.00
Pickering Memorial Hall, Pickering PUBLIC MEETING	23 <sup>rd</sup> Feb 2015	10:00 – 12:00
Richmond CE Primary School, Richmond PUBLIC MEETING	25 <sup>th</sup> Feb 2015	6:00 – 8:00