

Public Document Pack

North Yorkshire Council
Children and Young People's Service - Executive Members & Corporate Director Meetings

Tuesday, 16 April 2024 / 1.00 pm

A G E N D A

1 **Apologies for Absence**

2 **Declarations of Interest**

Items for Executive Member decision

3 Reviewing appropriate funding responsibility for pupils unable to attend school because of health needs (Pages 3 - 22) (Pages 3 - 22)

Any Other Business

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Circulation:

Executive Members

Janet Sanderson
Annabel Wilkinson

Officer attendees

Stuart Carlton
Howard Emmett

Presenting Officers

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NORTH YORKSHIRE COUNCIL

CHILDREN AND YOUNG PEOPLE'S SERVICE

CORPORATE DIRECTOR'S MEETING WITH EXECUTIVE MEMBERS

16th April 2024

REVIEWING APPROPRIATE FUNDING RESPONSIBILITY FOR PUPILS UNABLE TO ATTEND SCHOOL BECAUSE OF MEDICAL NEEDS

Report of the Corporate Director – Children and Young People's Service

1.0 PURPOSE OF THE REPORT

- 1.1 To seek approval from Executive Members to introduce revised funding responsibilities for pupils unable to attend schools because of medical needs from June 2024 – taking into account recent relevant guidance from the DfE.

2.0 BACKGROUND

- 2.1 The specific trigger prompting the proposals in this paper is the guidance published by the DfE in December, 2023 '*Arranging education for children who cannot attend school because of health needs*'.
- 2.2 However, we have been mindful for some time, that the cost of supporting young people out of school on medical grounds, and being supported through the medical education service has been growing, to the point that in 2024-25 the budget for the service will be a cost of £942,500 supported from the High Needs budget. In addition, as the number of pupils being supported by the service has increased significantly through time, the resource pressure involved in delivering the entitlements in the Medical Education policy has increased
- 2.3 In that context, and with the significant financial deficit we are forecasting for future years in the high needs budget, we have been reviewing whether there is an appropriate balance of funding responsibility for the centrally managed Medical Education Service. The Council currently recovers Element 3 (top-up) funding for pupils who have access to an Education Health and Care Plan, but this only accounts for approximately 1/3 of the pupils supported by the Medical Education Service. The DfE guidance published in December has prompted us to review whether those funding recovery arrangements need to be extended.
- 2.4 The recent guidance sets out a range of expectations about meeting the needs effectively of young people who are missing school on medical grounds. The particular paragraph (top of page 7) in the guidance that is the focus of this report is :- *"Alternative provision for children with medical needs is funded from local authorities' high needs budgets. However, where a child remains on the roll of their home school but requires a period of time in alternative provision due to their health needs, the local authority and home school may wish to consider the transfer of a portion of the school's funding associated with that child to the alternative provision. This would ensure that the funding follows the child. This arrangement would cease when the child is reintegrated back to their home school or are no longer on the roll of the home school."*

3.0 FINANCIAL IMPLICATIONS

- 3.1 Currently when a child is supported through the medical education service, we only recover funding from schools in cases where the young person has an EHCP (approximately 1/3 of the cohort of young people supported by the service). In this scenario, we recover the Element 3 (top-up) funding from the school.
- 3.2 Our interpretation of the guidance is that it would be appropriate to recover an element of the core funding allocated to schools when the young person is supported by the medical education service. There is a clear expectation set that 'funding follows the child'.
- 3.3 Consequently we consider that it would be appropriate to recover the AWPU funding component (or AWPU plus component) for the full duration of time that the young person is supported by the Medical Education Service. Our assessment is that whilst there could be a theoretical argument that some young people in these circumstances were previously accessing support from the schools notional SEN budget (or Element 2 funding), it would not be possible to formulate a direct funding contribution at individual pupil level, and consequently Element 2 funding does not form part of our proposals
- 3.4 We have assessed whether it would be appropriate to just recover the AWPU sums, or whether it would be appropriate to also recover other elements of school funding allocations that are directly linked to individual pupils (in particular, Deprivation funding). The AWPU values are set out in the table below and we have estimated that recovering AWPU only would recover circa £535k in a full financial year towards the cost of the Medical Education Service. Recovering deprivation funding in addition has the challenge that it is difficult to access the pupil level information for all schools to be able to process precisely in line with the principle of funding following the pupil. It may be possible to incorporate a general deprivation funding 'oncost' into the funding recovery arrangements for all pupils but this would only add circa £45k into the level of income recovery. Therefore, it is proposed that for Year 1 we will only recoup the AWPU component but will keep this issue under review.

Value of AWPU Funding Allocations – per pupil – 24-25 financial year

Primary AWPU :- £3,562
Key Stage 3 AWPU :- £5,022
Key Stage 4 AWPU :- £5,661

- 3.5. There are further specifics to how we would propose this funding arrangement operates:
- New arrangements would be introduced from June 2024 – but would only apply to new referrals to the medical education service from June, 2024
 - Funding recovery would be applicable from Day 1 of the Medical Education Service providing support to the young person
 - Where young people are being supported through the deployment of an AV1 (robot), we are mindful that there are resource implications for the school in overseeing how that young person interacts with the curriculum. Therefore, we are minded to operate a discount on the level of AWPU recovery in these circumstances – and because of the positive opportunity that the AV1 devices represent, we are minded to set that discount rate at 100% (based on the current

profile of service users this would reduce the income forecasts by circa £25k per annum.

- 3.6. The figures for AWPU recovery set out above are based upon the current service configuration where circa 125 pupils per annum are supported. The modelling is also based upon an anticipated reduction in the average number of weeks that young people are supported by the service (from the current 38 weeks to 31 weeks) and an expectation that we can organise that a higher percentage of young people at Key Stage 3 and Key Stage 4 could be supported in small groups of 3 students.
- 3.7. We have an expectation that the expected duration of the package will entail a starting offer of up to 12 weeks with a clear review and anticipated reintegration plan at that point unless there is a treatment and recovery plan in place which exceeds this timescale (for example following a road traffic accident or a clear time period for treatment eg chemotherapy etc). If we can achieve a transition to this model of operation, then we will see potential financial benefits to the Medical Education Service budget. It will be important that the progress made on these key issues is kept under review, alongside the feedback from colleagues in schools and ensuring that we are maintaining a sharp focus on the outcomes for young people being supported by the service – which we will deliver through quarterly tracking at the CYPs High Needs Budget Transformation Board.
- 3.8. Our projections are that these measures would yield circa £530k in academic year 2024-25, although the precise level of income recovery will depend upon the future numbers of young people supported by the service. Thereafter the figures should reduce slightly for future years, as the measures in paragraph 3.7 above should result in reduced numbers of young people requiring support from the service

4.0 LEGAL IMPLICATIONS

- 4.1. Governing Bodies of Schools, Proprietors of Academies and Management Committee of Pupil Referral Units all must make arrangements for supporting pupils with medical conditions, pursuant to section 100 Children & Families Act 2014. They must have regard to guidance issued by the Secretary of State. The guidance on ‘Supporting Pupils at School with Medical Conditions’ states pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- 4.2. The Council has a statutory duty according to section 19 Education Act 1996 to make arrangements for the provision at school or elsewhere for children of compulsory school age who by reason of illness, exclusion from school or otherwise may not for any period receive suitable education unless such arrangements are made for them.
- 4.3. The arrangements under section 19 shall be full time education or such part time basis as the LA consider to be in the child’s best interest for children with physical or mental health reasons.
- 4.4. The Council has a power according to section 61 Children and Families Act 2014 to make arrangements for any special educational provision that it has decided is necessary for a child or young person to be made otherwise than in a school, early year’s education or post 16 institution. This power is only available where the

Council is satisfied that it would be inappropriate for the provision to be made in school and following consultation with the young person and parents and where there is an Education, Health and Care Plan in place.

4.5. Statutory guidance 'Ensuring a Good Education for Children who Cannot Attend School Because of Health Needs' states in considering alternative education the Council should not:

- have processes or policies in place which prevent a child from getting the right type of provision and a good education; and
- have inflexible policies which result in children going without suitable full-time education (or as much education as their health condition allows them to participate in).

4.6. LG Ombudsman issued a Focus Report in September 2011 (amended June 2016) Out of School...out of Mind? That gave guidance to the Council on how the LGO expects it to fulfil their responsibilities for those who cannot attend school full time to:

- consider the individual circumstances of each case and be aware that a council may need to act whatever the reason for absence (with the exception of minor issues that schools deal with on a day-to-day basis) even when a child is on a school roll;
- consult all the professionals involved in a child's education and welfare, taking account of the evidence utilised in coming to decisions;
- choose, based on all the evidence, whether to enforce attendance or provide the child with suitable alternative education;
- keep all cases of part-time education under review with a view to increasing it if a child's capacity to learn increases;
- adopt a strategic and planned approach to reintegrating children into mainstream education where they are able to do so; and
- put whatever action is chosen into practice without delay to ensure the child returns to education as soon as possible.

4.7 The Council has to pay due regard to all the statutory Guidance's from the Department of Education, with the December 2023 'Arranging education for children who cannot attend school because of health needs' the quoted paragraph does allow for the Council to recoup funding from the home school.

5.0 IMPACT ON OTHER SERVICES/ORGANISATIONS

5.1 We will work closely with the schools community to ensure that these new arrangements are communicated clearly, and can be operated between schools and the local authority in such a way to not prevent young people accessing the support they need.

5.2. We are very mindful of the challenging financial circumstances that our schools are operating in. Therefore, we have reviewed that the pattern of referrals into the

Medical Education Service is not such that any one school would face a significant new financial impact as a result of these proposals (assuming that the past referral trends continue into the future).

5.3. We discussed the revised guidance and potential scope of any income recovery arrangements with the Schools Forum High Needs Sub Group on February 8th.

5.4. The feedback from the group was that :-

- 1 Any arrangements should be simple and easy for schools to follow
- 2 Concern that funding adjustments should be predictable, and that, if possible, there should not be in-year adjustments (as schools have already formulated their budget plans for the financial year in question)
- 3 Concern that there are specific and significant resource implications for schools associated with supporting young people being supported by AV.

5.5. We consider that we have responded to the issue regarding AV provision (in the proposals set out in section 3.5) and that those proposals should be straightforward for schools to follow. On the issue of predictability we believe that, with a service operating with circa 120 pupils per annum and the unit of funding proposed for recovery being relatively modest, the funding implications for any one school will be relatively low. Whilst we recognise the tightness of budget plans for our schools community, we do not consider that the scale of funding adjustment involved would fundamentally disrupt a schools budget plans in any one financial year, and that on the grounds of simplicity and adhering to the principle of funding following the pupil, we are proposing to recover funding in the year in question.

6.0 EQUALITIES IMPLICATIONS

6.1 An Equalities Impact Assessment has been undertaken for this proposal, and is attached as Appendix 1. The assessment recognises that the proposal to recover AWPU funding is an integral part of transforming the service, to enhance the service offer to young people whilst ensuring the service remains financially sustainable. It has assessed that the service developments should improve the quality of overall service offer to young people, because of the opportunities for more socialisation in group settings. It is acknowledged that some young people will need transport to reach locations for the tuition sessions being undertaken in groups. The assessment will be kept under review.

7.0 CLIMATE CHANGE IMPLICATIONS

7.1 A Climate Change Impact Assessment has been undertaken and is attached at Appendix 2. The assessment has identified that there will be different transport patterns necessary to deliver the service, as the movement to organise the service to deliver more group sessions will result in less staff transport but will result in more transport for individual young people. The assessment will be kept under review

8.0 REASONS FOR RECOMMENDATIONS

8.1 In the context of our local authority High Needs budget position, we are not in the position where we can disregard the guidance issued by the DFE about the principle of funding following the pupil.

8.2 Our assessment is that the proposals contained within this paper are proportionate and should ensure that the Medical Education Service has the appropriate resource

base to meet the needs of young people referred into that service

9.0 RECOMMENDATIONS

9.1 The Executive Member is asked to:

- approve the new arrangements set out above to recover AWPU funding from schools where a pupil requires support from the local authority on medical grounds (as discussed in paragraphs 3.4 and 3.5). These arrangements to be applicable from April 2024.

Stuart Carlton
Corporate Director – Children and Young People’s Service
COUNTY HALL, NORTHALLERTON

Author of Report – Martin Surtees

Appendices:

Appendix 1 :- Equalities Impact Assessment
Appendix 2 :- Climate Change Impact Assessment

Equality impact assessment (EIA) form: evidencing paying due regard to protected characteristics

(Form updated October 2023)

EOTAS and MES

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.



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	CYPS - Inclusion
Lead Officer and contact details	Cerys Townend Cerys.townend@northyorks.gov.uk
Names and roles of other people involved in carrying out the EIA	Sarah Wright Sarah.wright@northyorks.gov.uk
How will you pay due regard? e.g. working group, individual officer	SEND Partnership board High Needs funding subgroup
When did the due regard process start?	8 th of February 2023

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?)

The recent guidance Arranging education for children who cannot attend school because of health needs (December 2023) sets out a range of expectations about meeting the needs effectively of young people who are missing school on medical grounds. The particular paragraph (top of page 7) in the guidance that is the focus of this workstream is :- ***“Alternative provision for children with medical needs is funded from local authorities’ high needs budgets. However, where a child remains on the roll of their home school but requires a period of time in alternative provision due to their health needs, the local authority and home school may wish to consider the transfer of a portion of the school’s funding associated with that child to the alternative provision. This would ensure that the funding follows the child. This arrangement would cease when the child is reintegrated back to their home school or are no longer on the roll of the home school.”***

The intention is to recoup AWPU for any child receiving group tuition from the Medical education Service, for the entirety of their attendance.

Section 2. Why is this being proposed? What are the aims? What does the authority hope to achieve by it? (e.g. to save money, meet increased demand, do things in a better way.)

The AWPU values are set out in the table below and we have estimated that recovering AWPU only would recover circa £535k in a full financial year towards the cost of the Medical Education Service.

The cost of supporting young people out of school on medical grounds, and being supported through the medical education service has been growing, to the point that in 2024-25 the budget for the service will be a cost of £942,500 supported from the High Needs budget. In addition, as the number of pupils being supported by the service has increased significantly through time, the resource pressure involved in delivering the entitlements in the Medical Education policy has increased. In the context of significant financial deficit we are forecasting for future years in the high needs budget and given the guidance suggesting that funding should move with the child, it seems appropriate to recoup this from the schools.

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

Schools will be accountable for releasing the AWPU for a child to unwell to attend school for medical reasons, were as previously this was not recharged from schools.

Children and young people will be taught in groups of 3 or more children in a local venue, this should provide greater opportunities for socialisation, and support improved mental health. Parents might be reluctant to move away from a home tuition model of delivery to group delivery.

Staff will increasingly be working in community venues with groups of children and young people rather than delivering 1-1 tuition in the family home or local community.

Section 4. Involvement and consultation (What involvement and consultation has been done regarding the proposal and what are the results? What consultation will be needed and how will it be done?)

No formal consultation has been undertaken

Initial discussions with the High Need subgroup further engagement planned if proposal approved with school leaders, families and health colleagues.

Section 5. What impact will this proposal have on council budgets? Will it be cost neutral, have increased cost or reduce costs?

Reduce the pressure on the High Needs block funding required to meet the LA's statutory duties in supporting children with medical needs by circa £535k

Section 6. How will this proposal affect people with protected characteristics?	No impact	Make things better	Make things worse	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc.
Age		X		Secondary aged pupils will benefit from social opportunities and access to education outside of the home where appropriate
Disability		x		Improved educational offer for children and young people to unwell to attend school for medical reasons (including those with mental health needs)
Sex	x			
Race	x			
Gender reassignment	x			

Sexual orientation	x			
Religion or belief	x			
Pregnancy or maternity	x			
Marriage or civil partnership	x			

Section 7. How will this proposal affect people who...	No impact	Make things better	Make things worse	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc.
..live in a rural area?			X	Some children may have to travel to the group tuition rather than receive home tuition Smaller schools have smaller budget
...have a low income?	X			
...are carers (unpaid family or friend)?			X	Parents and carers may be resistant to the change from tuition in the home to tuition in the community.
..... are from the Armed Forces Community	X			

Section 8. Geographic impact – Please detail where the impact will be (please tick all that apply)

North Yorkshire wide	x
Craven	
Hambleton	
Harrogate	
Richmondshire	
Ryedale	
Scarborough	
Selby	

If you have ticked one or more areas, will specific town(s)/village(s) be particularly impacted? If so, please specify below.

No- aiming for equity

--

Section 9. Will the proposal affect anyone more because of a combination of protected characteristics? (e.g. older women or young gay men) State what you think the effect may be and why, providing evidence from engagement, consultation and/or service user data or demographic information etc.

No

Section 10. Next steps to address the anticipated impact. Select one of the following options and explain why this has been chosen. (Remember: we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us)	Tick option chosen
1. No adverse impact - no major change needed to the proposal. There is no potential for discrimination or adverse impact identified.	x
2. Adverse impact - adjust the proposal - The EIA identifies potential problems or missed opportunities. We will change our proposal to reduce or remove these adverse impacts, or we will achieve our aim in another way which will not make things worse for people.	
3. Adverse impact - continue the proposal - The EIA identifies potential problems or missed opportunities. We cannot change our proposal to reduce or remove these adverse impacts, nor can we achieve our aim in another way which will not make things worse for people. (There must be compelling reasons for continuing with proposals which will have the most adverse impacts. Get advice from Legal Services)	
4. Actual or potential unlawful discrimination - stop and remove the proposal – The EIA identifies actual or potential unlawful discrimination. It must be stopped.	
<p>Explanation of why option has been chosen. (Include any advice given by Legal Services.)</p> <p>The impact of this project will be positive for CYP with medical needs as the educational offer will be improved.</p> <p>The impact on individual schools should be minimal because of the small number of children across the county accessing medical tuition (circa 125).</p> <p>The impact on parents/cares could be positive in so much as providing education outside of the home for the child allows for the parent to attend work during tuition, however some families might prefer the education to take place in the home, and may be resistant to change initially, but the positive outcomes of CYP engaging in education should outweigh the initial concerns of reservations of families.</p>	

Section 11. If the proposal is to be implemented how will you find out how it is really affecting people? (How will you monitor and review the changes?)

Through service user feedback and feedback from schools

--

Section 12. Action plan. List any actions you need to take which have been identified in this EIA, including post implementation review to find out how the outcomes have been achieved in practice and what impacts there have actually been on people with protected characteristics.

Action	Lead	By when	Progress	Monitoring arrangements

Section 13. Summary Summarise the findings of your EIA, including impacts, recommendation in relation to addressing impacts, including any legal advice, and next steps. This summary should be used as part of the report to the decision maker.

The impact of the change of CYP with medical needs should be positive, with a better educational offer for those to unwell to attend school.

The financial impact on individual schools should be minimal given the small number of pupils from each school accessing the provision.

Clear engagement with families and personal support in relation to children already supported by the service and any new referrals will be provided by the MES co-ordinators.

Section 14. Sign off section

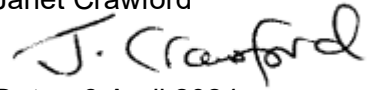
This full EIA was completed by:

Name: Cerys Townend
Job title: Interim Head of Inclusion
Directorate:
Signature:

Completion date:

Authorised by relevant Assistant Director (signature):

Janet Crawford

A handwritten signature in black ink that reads "J. Crawford". The signature is written in a cursive style with a large, looped 'J' and 'C'.

Date: 8 April 2024

Climate change impact assessment

The purpose of this assessment is to help us understand the likely impacts of our decisions on the environment of North Yorkshire and on our aspiration to achieve net carbon neutrality by 2030, or as close to that date as possible. The intention is to mitigate negative effects and identify projects which will have positive effects.

This document should be completed in consultation with the supporting guidance. The final document will be published as part of the decision making process and should be written in Plain English.

If you have any additional queries which are not covered by the guidance please email climatechange@northyorks.gov.uk

Version 2: amended 11 August 2021

Please note: You may not need to undertake this assessment if your proposal will be subject to any of the following:

Planning Permission
Environmental Impact Assessment
Strategic Environmental Assessment

However, you will still need to summarise your findings in the summary section of the form below.

Please contact climatechange@northyorks.gov.uk for advice.

Title of proposal	EOTAS and MES
Brief description of proposal	To introduce revised funding responsibilities for pupils unable to attend schools because of medical needs from April 2024 – taking into account recent relevant guidance from the DfE.
Directorate	CYPS
Service area	Inclusion
Lead officer	Cerys Townend/Martin Surtees
Names and roles of other people involved in carrying out the impact assessment	Sarah Wright
Date impact assessment started	27.2.24

Options appraisal

Were any other options considered in trying to achieve the aim of this project? If so, please give brief details and explain why alternative options were not progressed.

No

What impact will this proposal have on council budgets? Will it be cost neutral, have increased cost or reduce costs?

Please explain briefly why this will be the result, detailing estimated savings or costs where this is possible.

The AWPU values are set out in the table below and we have estimated that recovering AWPU only would recover circa £535k in a full financial year towards the cost of the Medical Education Service.

The cost of supporting young people out of school on medical grounds, and being supported through the medical education service has been growing, to the point that in 2024-25 the budget for the service will be a cost of £942,500 supported from the High Needs budget. In addition, as the number of pupils being supported by the service has increased significantly through time, the resource pressure involved in delivering the entitlements in the Medical Education policy has increased. In the context of significant financial deficit we are forecasting for future years in the high needs budget and given the guidance suggesting that funding should move with the child, it seems appropriate to recoup this from the schools.

<p>How will this proposal impact on the environment?</p> <p>N.B. There may be short term negative impact and longer term positive impact. Please include all potential impacts over the lifetime of a project and provide an explanation.</p>	Positive impact (Place a X in the box below where relevant)	No impact (Place a X in the box below where relevant)	Negative impact (Place a X in the box below where relevant)	<p>Explain why will it have this effect and over what timescale?</p> <p>Where possible/relevant please include:</p> <ul style="list-style-type: none"> • Changes over and above business as usual • Evidence or measurement of effect • Figures for CO₂e • Links to relevant documents 	<p>Explain how you plan to mitigate any negative impacts.</p>	<p>Explain how you plan to improve any positive outcomes as far as possible.</p>	
<p>Minimise greenhouse gas emissions e.g. reducing emissions from travel, increasing energy efficiencies etc.</p>	<p>Emissions from travel</p>	X			<p>Children will be transported to their medical tuition, bases will be developed as local to the children's homes, the larger the group of children within a given venue the further some children may have to travel.</p>	<p>Staff mileage will reduce due to the children coming into a base rather than the staff travelling to individual family homes to provide tuition</p>	<p>Balance size of group with competing travel distance to ensure as little travel across staff and pupils as possible also group children in transport where possible</p>
	<p>Emissions from construction</p>		X				
	<p>Emissions from</p>			X	<p>Currently tuition is provided within family homes, this will involve all families using their own utilities moving the tuition into community or council accommodation</p>	<p>Increase the size of groups if possible to</p>	

<p>How will this proposal impact on the environment?</p> <p>N.B. There may be short term negative impact and longer term positive impact. Please include all potential impacts over the lifetime of a project and provide an explanation.</p>	<p>Positive impact (Place a X in the box below where relevant)</p>	<p>No impact (Place a X in the box below where relevant)</p>	<p>Negative impact (Place a X in the box below where relevant)</p>	<p>Explain why will it have this effect and over what timescale?</p> <p>Where possible/relevant please include:</p> <ul style="list-style-type: none"> • Changes over and above business as usual • Evidence or measurement of effect • Figures for CO₂e • Links to relevant documents 	<p>Explain how you plan to mitigate any negative impacts.</p>	<p>Explain how you plan to improve any positive outcomes as far as possible.</p>	
<p>Page 19</p>	<p>running of buildings</p>				<p>means that there will be a cost attached to the running of buildings for the groups.</p>	<p>reduce the number of buildings used</p>	
	<p>Emissions from data storage</p>		<p>x</p>				
	<p>Other</p>		<p>x</p>				
<p>Minimise waste: Reduce, reuse, recycle and compost e.g. reducing use of single use plastic</p>		<p>x</p>					
<p>Reduce water consumption</p>		<p>x</p>					
<p>Minimise pollution (including air, land, water, light and noise)</p>		<p>x</p>					
<p>Ensure resilience to the effects of climate change e.g. reducing flood risk, mitigating effects of drier, hotter summers</p>		<p>xx</p>					

<p>How will this proposal impact on the environment?</p> <p>N.B. There may be short term negative impact and longer term positive impact. Please include all potential impacts over the lifetime of a project and provide an explanation.</p>	<p>Positive impact (Place a X in the box below where relevant)</p>	<p>No impact (Place a X in the box below where relevant)</p>	<p>Negative impact (Place a X in the box below where relevant)</p>	<p>Explain why will it have this effect and over what timescale?</p> <p>Where possible/relevant please include:</p> <ul style="list-style-type: none"> • Changes over and above business as usual • Evidence or measurement of effect • Figures for CO₂e • Links to relevant documents 	<p>Explain how you plan to mitigate any negative impacts.</p>	<p>Explain how you plan to improve any positive outcomes as far as possible.</p>
<p>Enhance conservation and wildlife</p>		X				
<p>Safeguard the distinctive characteristics, features and special qualities of North Yorkshire's landscape</p>		X				
<p>Other (please state below)</p>						

<p>Are there any recognised good practice environmental standards in relation to this proposal? If so, please detail how this proposal meets those standards.</p>

No

Summary Summarise the findings of your impact assessment, including impacts, the recommendation in relation to addressing impacts, including any legal advice, and next steps. This summary should be used as part of the report to the decision maker.

Impact should be minimal with mitigations in place.

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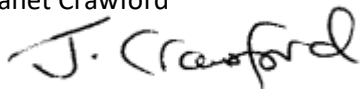
Sign off section

This climate change impact assessment was completed by:

Name	Cerys Townend
Job title	Interim head of inclusion
Service area	Inclusion
Directorate	CYPS
Signature	<i>Cerys Townend</i>
Completion date	

Authorised by relevant Assistant Director (signature):

Janet Crawford



Date: 8 April 2024

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