



Policy and Resources Committee

24 March 2015

Title	0-25 Disability services in Barnet
Report of	Commissioning Directors for Adults & Health and Children & Young People
Wards	All
Status	Public
Enclosures	None
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Summary

The proposals contained within this report are required to support the delivery of the commissioning intentions as agreed by Policy & Resources Committee on the 4th December 2014. This report sets out the approach to delivering one of the key initiatives set out in the commissioning plans of the Adults and Safeguarding Committee and the Children, Education, Libraries and Safeguarding (CELS) Committee.

Demographic trends show a growth in the population of children and young people with complex disabilities, in parallel with better life chances for young people with complex disabilities as healthcare improves. This growth does place increasing demands on education, children's and adult social care and the NHS. Disability services for education, social care and health represent a significant area of growth of demand-led spend.

This paper sets out a recommended approach to achieving the Council's vision of improved experiences and outcomes for Barnet children, young people and their families by creating services that foster genuine working together between agencies, are resilient, future proof and provide value for money.

The new 0-25 Disability Service is based on ten key solutions developed as an approach for the delivery of services that re-focus on enabling local provision in the community,

independence and social inclusion for children and young people with disabilities and their families and carers.

The report outlines the steps needed to achieve this specification and the positive impact this should have for this group of children, young people and families of Barnet.

If the proposed approach is approved, further detailed design will be worked through with partners and young people and their families, as it is developed into a full implementation plan.

Recommendations

- 1. That the Policy & Resources Committee approve the proposed direction and design of a new 0-25 Disability Service as set out in the report , which incorporates the outcomes described in the Children, Education, Libraries & Safeguarding and Adults and Safeguarding Committees' commissioning plans.**
- 2. That the Policy & Resources Committee note the plan for development of the new service and the intended start of the new service in October 2015.**

1. WHY THIS REPORT IS NEEDED

Vision

- 1.1 The intention to design an improved model for delivery of services to children and young people with disabilities aged 0-25 and their and families is required to deliver the commissioning intentions set out in the Council's commissioning plans. It is founded in the desire to improve the experience of young people's support journey from childhood into adulthood and to meet the challenges of:

1.1.1 significantly reduced public sector funding

1.1.2 reforms to assessment and provision of support for children and young people with special educational needs and disabilities (SEND) with a much stronger focus on integration up to the age of 25, and

1.1.3 an imbalance of support for young people with disabilities reaching adulthood and a perceived 'cliff-edge' drop in their care and support, as a result of the difference in eligibility criteria for adults and children's social care.

The design of the model taking place against the backdrop of these conditions provides a unique opportunity to innovate services. In particular, the new model will seek to improve plan-ability and predict-ability of this journey, by providing a joined up support approach from social care, education and health that enables children, young people and their families to build a long-term vision and plan for their future, rather than rely on an approach that is too often crisis driven and not sufficiently joined up.

- 1.2 Ethnographic research and direct work with a group of disabled children, young people and their families, undertaken in 2014 has further highlighted the anxieties of service users and their families as they experience a transition from children's services to adult social care that is often narrowly focussed on the age of 14/16-18. However, from the service user perspective, transition into adulthood is an experience that starts earlier and extends much further than this.
- 1.3 Diagnostic work to date strongly suggests that some challenges to current delivery are rooted in systemic barriers between services that are likely to be addressed more effectively if services are joined up structurally.
- 1.4 The overarching principles of the 0-25 disability service are:
- The development of a shared vision of improving life chances, developed with young people, families and all key partners
 - Raising aspirations for a fulfilling childhood and adult life by sharing clear information about what has already worked for others
 - Developing a personalised approach to all aspects of support using person centred practice, personal budgets and building strong communities
 - Developing options and support for those over 16 that lead to employment, independent living, good health, friends, relationships and community inclusion, and
 - Developing outcome focussed practice and multi-agency commissioning strategies that are informed by the voice of young people and families
- 1.5 The vision for the new 0-25 service is to:
- Improve the child's and family's journey to adulthood, in particular the experience of transitioning from children's to adult services
 - Improve the working together of partners to achieve a holistic, outcome focussed and predictable pathway to adulthood
 - Reduce the impact of demand growth on future cost pressures, in particular on Adults & Communities services
 - Re-focus all provision on supporting independence and enabling children and young people with disabilities live locally and achieve their goals
 - Help providers, users and carers to be better at long-term planning, managing and supporting demand rather than rationing supply.
 - Focus on the quality of relationships (between users and those who support them) and depth of our knowledge about users' needs and assets.

Context

- 1.6 Services for people with disabilities across social care, education and health are under considerable and growing pressure. National research, local population growth and needs analyses for Barnet show the trend of growth of demand is set to continue over the near, medium and longer term.
- 1.7 The role of the local authority in services for children and young adults with disabilities includes: social care assessment, interventions and support; safeguarding vulnerable children and adults; providing education placements

and support for children and young people with SEN; and jointly commissioning health services.

- 1.8 The school age population in Barnet is predicted to increase significantly until 2024 as a result of increased births within Barnet (a growth of 23.4% since 2004, compared to 16.9% across London) and numbers of families moving into the Borough. GLA population projections of children and young people aged 5-19 predict an increase of 15,000 pupils by 2024, taking the total school age population in Barnet to 80,000. This is an increase of almost a third against the baseline of just under 65,000 in 2011¹.
- 1.9 In addition to population growth, numbers of children requiring provision for special educational needs (SEN) have risen, influenced by factors including increasing numbers of children being born with disabilities. These combined factors will contribute to rising demand on services for children with SEN and disabilities in future.
- 1.10 An analysis of spend on the cohort of young people moving through Transition services from children's social care to adult social care indicates that there are an increasing number of young people with complex needs entering adult social care. The proportions of adult social care spend on this cohort have reversed over the past four years., Almost two-thirds of the total spend on this cohort in 2013/14 was on residential and supported living provision, compared to one-third in 2010/11. During the same time period, average spend per user on non-residential, community based provision has reduced by a quarter.
- 1.11 Changes introduced through the Children Act 2014 extend the Council's responsibilities for education of children with SEND and place particular requirements on all partners to work together to provide joint education, health and care plans.
- 1.12 Ethnographic research undertaken in Barnet in 2014 has shown that children, young people and families experience significant anxieties on the journey to approaching adulthood and their experience of the process of transitioning from children's to adult social care is often characterised by a lack of early planning for service provision post 18 and a perceived cliff-edge drop in support once children enter adult services.
- 1.13 The new 0-25 service will embrace a targeted range of new ways of working, designed to help the service respond effectively to these increases in demand and improving the service user experience and outcomes delivered through the service, by enabling children and young people with SEND live as independently as possible.

¹ Local Needs analysis data as supplied by David Monger, Education Services.

Challenges

- 1.14 Services for children and young people with SEND and their families are delivered by a range of professions, including community paediatricians, social workers, early year's education settings, mainstream and special schools and third sector community services. Building trusting and effective relationships with parents and carers of children and young people with SEND is a key enabler to building confidence in parents and carers ability to support the growing independence of their children through the journey to adulthood. Local and national research has shown that the quality of these relationships is directly linked to important choices such as accommodation and education provision.
- 1.15 Parental trust in the professionals working with them is a key enabler to prevent escalation of needs and family crises, particularly through the key stages of transition such as changing education and social care provision. Conversely, poorly managed transitions contribute to parents' anxiety and lack of trust in professionals and services. This can lead to service outcomes that include care and education away from the family home and community in a residential setting. This can result in high cost to the local authority and at times poorer outcomes for children and young people.
- 1.16 Each agency working with children and young people with SEND has a range of statutory responsibilities, processes and practice guidance to follow, including statutory requirements for completing social care, health and education assessments, care plans and provisions. There are few joint processes which creates a disjointed service for the young person and can lead to inefficiency.
- 1.17 Joint decision making is too often inconsistent and not strategically agreed between agencies. Joint funding arrangements, decision making and scrutiny processes in place are not as effective as they need to be in order to prevent escalation of needs and family crises. The lack of more joined up decision making further contributes to an effect where, care planning decisions by one agency can adversely affect the budget of another.
- 1.18 The limited availability of local education and accommodation provision for young people with SEND contributes to a growing pressure to place young people in residential educational provision, often with a life-long impact on their future accommodation and support provision. Equally, limited local provision contributes to challenges of re-integrating young people with SEND into their communities following a period of residential educational provision.

2. REASONS FOR RECOMMENDATIONS

- 2.1 This section sets out key elements of the ten key solutions in terms of new ways of working for the 0-25 Disability Service. The full list can be found in Appendix 1. The new ways of working are designed to deliver the outcomes specified in the children's and adults commissioning plans and are intended

to promote better service user outcomes, higher levels of independence from state support, improved working between agencies and improved financial sustainability of local authority and health services.

2.2 Some of the proposed new ways of working will have a short-term impact on improved outcomes and cost reduction, whilst for others benefits should be realised in the medium to longer term. Savings in the adults and safeguarding commissioning plan are based on two key hypotheses:

2.2.1 The cost of meeting the needs of the cohort of children and young people currently aged between 18-24 can be reduced, whilst still meeting their needs effectively.

2.2.2 The costs of meeting the needs of those children transitioning into adult services between 2016 – 2020 can be reduced, whilst still meeting eligible care needs.

2.3 At the heart of the design of the new 0-25 service is the recognition that consistent, high quality relationships are a key enabler for families to build trust and confidence, both in their own ability to bring up their disabled child and in the ability of the network of professionals and services around them successfully supporting them through their child's journey to adulthood.

2.4 Problems in the current system of support for children, young people and families are often founded in the lack of consistency of such relationships, particularly through key stages in the child's education, social care and health journey. Analysis and evidence from other authorities strongly suggest that some of these challenges can best be overcome when there is structural integration of social care and health, creating a joined up journey from child into adulthood that focusses as early as possible on creating a life-long vision with children and families that creates shared plans well in advance of children entering adulthood.

2.5 The new 0-25 service will therefore ensure joined up social care for children with the most complex needs. It will integrate services for 0-25 year olds currently delivered in different teams in the Family Services and Adults and Communities Delivery Units into a single management structure. It is proposed that this will be based in the Family Services Delivery Unit. This integrated team will deliver a consistent service for children and young people with disabilities and their families, providing certainty over who will support the family from birth into adulthood. The ambition for this team is to also integrate some health services, such as occupational therapy and behavioural support into the 0-25 service. Services to be integrated will be agreed during the detailed design and implementation phase. Service changes will follow the Council's procedures for consultation and managing organisational change.

2.6 Whilst not structurally integrated with Education services, the new 0-25 team will be co-located with their colleagues to improve information sharing and support better alignment of working practices between the services.

- 2.7 The new service will seek to create a pooled funding arrangement, with the aim of reducing the instances of high cost provision decision making by agencies that have adverse effects on other agencies budgets. This will also support the development of a single health, social care and education 'personal budget' for children with disabilities and will drive creative and innovative use resources with the aim of preventing high cost / residential provision.
- 2.8 The 0-25 service will implement a programme of specialist interventions and dedicated support mechanisms. This will ensure effective interventions and support for children and young people with autism (including high functioning autism), physical disabilities, sensory impairment and children with life-limiting conditions and their families. Improving the quality of interventions for these groups of children will support families to care for their children at home and prevent family crises, improving outcomes and reducing demand on high cost residential provision.
- 2.9 Recognising service users as the experts of their own conditions and situations, we will be directly involving children and families in the design and on-going evaluation of the effectiveness of the new 0-25 service. One of the early activities will be to create a service user reference group which will be directly involved in service design and implementation and will remain involved to and provide on-going insight and challenge throughout the inception of the new 0-25 service. Ensuring that the service design factors in the views of service users on what works for them will improve outcomes in the short, medium and longer term and contribute to the ownership of solutions developed during implementation.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 The alternative options considered but subsequently rejected include:
- 3.1.1 Do nothing.
 - 3.1.2 Full integration of the new 0-25 Disabilities Service into Education and subsequently the Education and Skills Alternative Delivery Model.

3.1.3 Introducing a new 0-25 Disabilities Service based on virtual integration only

The above options were assessed as not viable as they will not deliver on the outcomes specified in the Councils commissioning plan.

4. POST DECISION IMPLEMENTATION

- 4.1 If the recommendations of this paper are agreed, detailed implementation planning work, led by the Council but working closely with young people and families, NHS Barnet CCG and partners will continue.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 The Corporate Plan 2013-2016 includes priorities to “sustain a strong partnership with the local NHS, so that families and individuals can maintain and improve their physical and mental health” and to promote family and community well-being and encourage engaged, cohesive and safe communities”.

- 5.1.2 The Health and Wellbeing Strategy for Barnet 2012-2015 includes priorities to increase the proportion of adults with mental health problems in employment and better support perinatal mental health problems.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 The Council’s Medium Term Financial Strategy (MTFS) requires a saving of £125k per annum attributed to adult services for this cohort of service users from 2016/17 to 2019/20; totalling £500k over these four years. It is anticipated that the proposal will be revenue neutral in the short term and in the medium to long term will deliver these savings as well as contribute to a reduction in future demand pressures by shifting to earlier and more effective interventions and avoiding escalation of needs. Work is underway to model financial benefits in greater detail.

5.3 Legal and Constitutional References

- 5.3.1 The Children and Families Acts 1989 and 2014, the current community care legislation and the Care Act 2014, when it comes into effect, impose duties on local authorities to provide services to those with eligible needs. The Children and Families Act 2014 replaces the previous system of preparing statements of special educational need for children and young persons aged 2-19 years with the preparation and provision of Education Health and Care plans (EHC plans) for children and young people with special educational needs aged

from 0 -25 years of age. The Care Act 2014 replaces the FACS criteria for determining eligibility for services with a national minimum criteria and it expressly includes a duty to promote integration of care and support provision with NHS and other health related provision. The Children and Families Act 2014 requires the local authority, health and care services to commission services together with a view to ensuring the integration of educational provision and training provision with health care provision and social care provision.

5.3.2 Additional statutory duties are imposed by the Mental Health Act 1983 particularly for those detained under the Act and who qualify for after care services under s117.

5.3.3 The responsibilities of the Policy & Resources Committee are contained within the Council's Constitution - Section 15 Responsibility for Functions (Annex A). Specific responsibilities for those powers, duties and functions of the Council include the following specific functions:

"If any report comes within the remit of more than one committee, to avoid the report being discussed at several committees, the report will be presented and determined at the most appropriate committee. If this is not clear, then the report will be discussed and determined by the Policy and Resources Committee." As these proposals to develop a 0-25 Disability Service will involve services come within the remit of the Adults & Safeguarding Committee (responsible for adult social care) and the Children, Education, Libraries & Safeguarding Committee (responsible for children's social care together with special educational needs services) and propose integrated provision with health services, and represent a new model of working, this decision is to be taken by the Policy & Resources Committee.

5.4 Risk Management

5.4.1 A significant risk to the achievement of these intentions is that Barnet Council and the CCG and other partners fail to co-ordinate their activities effectively. Without a shared vision and approach, there is a strong risk of poorer outcomes and an increase in demand and so cost. As such the implementation will need partnership working to ensure that plans and incentives will be aligned.

5.5 Equalities and Diversity

5.4.1 Equality and Diversity issues are a mandatory consideration in decision-making in the Council pursuant to the Equality Act 2010. This means the Council and all other organisations acting on its behalf must have due regard to the equality duties when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business, requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review.

5.4.2 The specific duty set out in s149 of the Equality Act is to have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

5.4.3 The relevant protected characteristics are – age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

5.4.4 Barnet intends that the new service will produce better, more tailored services that more closely reflect the needs and aspirations of young people with disabilities. We will do this by using data about the service user group and involving young people with disabilities in the design and development of the service and consulting them about specific proposals as they develop. At this stage it is anticipated that there will be a positive impact on service users. This will be kept under review and specific equality Impact Assessments will be considered and brought back to committee as decisions are required for specific proposals.

5.5 Consultation and Engagement

5.5.1 The ideas and principles in the 0-25 service have been developed as a result of detailed engagement with families with a disabled child, in the form of ethnographic research.

5.5.2 The development of these proposals has drawn on consultation with staff and managers from Adults and Communities, Family Services, Education and the CCG. A working group of staff from the service areas is meeting regularly to continue to develop the detailed design of the new ways of working and a separate working group is in place with accountants from family services and adults and communities to develop detailed plans for budget alignments, financial benefit and savings modelling.

5.5.3 1:1 meetings have been held with head teachers of the Barnet Special Schools, representatives of the parent partnership, the Barnet Practitioners Forum and the Learning Disabilities Partnership Board.

5.5.4 Through key stages of implementation consultation, where appropriate, will be undertaken with service users and those who have received services in the past.

5.5.5 The Council conducted a borough wide programme of resident engagement and consultation from 17 December 2014 to 11 February 2015. The programme comprised a series of focussed workshops examining the competing pressures facing each Committee and an on-line survey open to all

residents. 149 residents attended workshops which covered Council wide services, including some of the services in the remit of the Committee, whilst 19 residents took part in the Adults and Safeguarding focussed workshop. 28 residents responded to the Strategic Plan to 2020 open consultation, with 19 of those residents completing questions in regard to the Adults and Safeguarding Committee. The Adults and Safeguarding Commissioning Plan was also reviewed, along with plans relating to other Committees, in a special workshop for service users of adult social care and children's services.

5.5.6 The majority of respondents (11 out of 17 or more) who answered the questions agreed with all the priorities set out in the Adults and Safeguarding Commissioning plan. As part of the workshop focused on the Adults and Safeguarding Committee, residents prioritised the following services:

- Support offered to carers
- Preventative work for people with learning disabilities
- Short term and residential care for people with mental health issues
- Support to community/voluntary groups for the elderly
- Direct payments for people with physical disabilities
- Leisure centre

5.5.7 Those services which attendees thought, within the context of the Council's reductions, had the most potential for savings were the more expensive services of;

- Supporting older people in their homes
- Residential care for older people

5.5.8 Residents still emphasised the importance of these services, but in the context of the financial challenges facing the Council, they were seen as more palatable options to reduce costs.

5.5.9 This is broadly similar to the services which were prioritised by the Citizen's Panel members (44 respondents);

- Support for carers
- Prevention services for people with learning disabilities
- Short term mental health support
- Residential care for people with mental health issues
- Direct payments for people with Physical disabilities
- Leisure centres

5.5.10 The services which, on balance, were seen as options for savings were;

- Homecare for older people
- Residential care for people with learning disabilities

5.5.11 There was an emphasis on prevention, with one resident stating that (in respect of short term mental health support): "It's much better in cost terms than rehabilitation. Short term they can improve and get better rather than,

possibly, being institutionalised”.

5.5.12 The preference of the residents who responded in the consultation survey and workshops was to make lower service reductions in the remit of the Adults and Safeguarding Committee than the Council has proposed.

5.5.13 The feedback from the resident workshop broadly supports the approach set out within the Commissioning Plan to prioritise services for the most vulnerable and to support a preventative approach.

5.5.14 Whilst the overall programme of resident engagement is contained in this report, each significant proposal within the plan will require detailed consultation and engagement with residents and service users. These will be reported to the Adults and Safeguarding Committee as the Commissioning Plan is enacted.

6 BACKGROUND PAPERS

6.1 The Children, Education, Libraries and Safeguarding (CELS) Committee discussed the Commissioning Plan for 2015-20 on 9th March 2015. The Commissioning Plan can be found here: [CELS Commissioning Plan 2015-2020](#)

6.2 The Adult's and Safeguarding Committee will be discussing the Commissioning Plan for 2015-20 on 19th March 2015. The Commissioning Plan can be found here: [Adult's and Safeguarding Commissioning Plan 2015-20](#)

6.3 Appendix 1: Ten new ways of working summary: