

Improving the life chances of disabled people. A feedback response from the Council for Disabled Children

Introduction

The Council has been very pleased to be part of the development process of Improving the life Chances of Disabled People. We have found the process open and consultative, and have been impressed by the willingness of civil servants to work alongside us and learn and change. We feel the Report reflects accurately the lives and aspirations of disabled people. The Report gives government a huge challenge in changing lives from a very strong evidence base. Our concern is not the report but in the delivery strategy that is clearly needed.

The rest of this response therefore, looks at the key recommendations which affect children and families and what CDC believes is already in place to meet them. We hope this forms part of an ongoing partnership between the sector and government to ensure that the report really does lead to significant improvements in the life chances of disabled children and their families.

Key Recommendations

These show recommendation, lead government department and date to be implemented. They are summary recommendations; there are more details in the main report.

Early Years and Family Support

(5.1) Individualised budgets

Individualised budgets should, in principle, be extended to families with disabled children.

DH DfES, DWP, ODPM By 2012

CDC has been involved with others in the development of direct payment services for children. Direct Payments will form the starting point for individualised budgets and our current knowledge means we would be able to suggest models for piloting the concept further.

(5.2) Childcare and early education

- a) All 3-4 year old disabled children should have access the free part-time early education provision and providers will have access to a fully-support early years SENCO.*
 - b) Families with a disabled child under 5 years to be able to access high quality, flexible childcare.*
 - c) Extension of 'wraparound' care to be fully accessible to disabled children over 5 years.*
- a) DfES by 2010 b) Sure Start Unit by 2015 c) DfES as this is rolled out*

a and b) CDC has been working with early years providers in implementing the DDA in early years. We are hoping to undertake specific piece of work, funded by Sure Start, looking at barriers to accessing childcare for disabled children under 5.

c) From April 2005 CDC, working with Sure Start and Continyou will be developing guidance for extended schools on working with disabled children

(5.3) Evaluation of children's services

- a) National evaluations of children's services to assess impacts on families with disabled children.*
 - b) Guidance should be issued on local and regional evaluations of children's services to ensure they take account of the needs of disabled children.*
- a) DfES 2005 onwards b) DH and DfES 2005 onwards*

The Early Support programme audit tool provides a comprehensive audit for services from 0-3

(5.4) Keyworkers

- a) Provision of a keyworker to families should be considered as a key performance indicator. DFES 2006*
- b) Children's Trusts should ensure that all families have access to clear information about local support. DH and DFES 2006 onwards*

- A) Care coordination Network UK have produced national standards on Keyworking, the Early Support programme materials have a useful guide on keyworking. The University of York will deliver its national guide on keyworking practice Summer 2005
- B) CDC is working in partnership with the DFES Children's Trust Team and Children's Trust pathfinders on bringing together and disseminating good practice. Keyworking and information services are two key components of current practice development

(5.5) Early intervention

Phase one: Identify mechanisms that enable local authorities to switch spend from later intervention to early intervention.

Phase two: Depending on Phase one outcomes, assess the case for an invest-to save pilot for early intervention.

DfES and DH, 1) By 2006 with follow up studies.2) 2006 onwards

Mencap's feasibility study into a national centre for early intervention will provide the basis of this.

(5.6) Equipment

- a) Assess whether community services are able to deliver the NSF recommendation on children's equipment, and, if not, make recommendations for improvement.*
- b) Equipment services should be considered as a key performance indicator of council social care and education services.*

a) DH and b) DfES and DH, a) By 2006 b) 2006 onwards

The University of York has done most work on equipment (Bryony Beresford) Whizz kids have a national picture of wheelchair services and a number of CDC members hold equipment knowledge

(5.7) Housing, Improving the DFG

ODPM should consider reform to the DFG in the light of the forthcoming review.

ODPM By 2005

DFG group coordinated by Caroline Gordon at Mencap campaigning for abolition of means testing for children

(5.8) Workforce

The children's workforce should be capable of meeting the needs of disabled children. DfES, DH Incorporate into current work

Shadow workforce Council currently looking at how to incorporate disability issues, some concern it might get lost

(5.9) Children's Trusts

Local authorities, PCT's and Children's Trusts should work together and with partners to commission services for all disabled children.

DfES and DH Incorporate into current work

The Pathfinder Children's Trusts are progressing toward successful joint working and co location. They have achieved a great deal in the short time they have been established.

They have a support group which meets regularly to share learning and explore ways to further develop good practice.

The roles of education, health and social services within the Trust structures are becoming more defined which will be useful for those authorities taking up Trust status now.

(5.10) Joint Area Reviews

Consider how disabled children can be reflected in the Joint Area Reviews of children's services and in the CPA.

DfES and DH 2006 onwards

CDC believes that further work on outcomes is needed to ensure that JAR's are effective, we would be happy to contribute to this. The current SCIE tender on children with complex needs may provide key information. CDC about to undertake some work with CSCI regulated settings inspectors on effective inspections.

(5.11) Data collection and information sharing

a) Coordinate basic data on the number and needs of disabled children in local areas.

b) Include disabled children in the Children Act databases.

c) Include disabled children in the Common Assessment Framework.

a) DfES and DH 2005 onwards

b) DfES and DH Incorporate into current work

c) DfES and DH Incorporate into current work

CDC still holds some information on Children Act Registers, though a statement from government about where they fit or not into this proposal might be useful

The Children's Trusts project is looking at databases, definitional and eligibility rules are still a challenge for Trusts. CDC has some concerns about the Common Assessment Framework; we have been working with DFES on implementing the Integrated Children's System for disabled children and are now looking at crossover issues

Transition to Adulthood

(6.1) Continuity in delivery from child and adult services

- a) Different models of multi-agency transition should be evaluated and disseminated.*
- b) Children's Trusts should be encouraged to work as necessary with young disabled people up to the age of 25.*
- c) Pilots should assess how individualised budgets could cover the transition period.*
- a) DfES By 2006*
- b) DfES 2005 onwards*
- b) DH and DWP, DFES and ODPM, by 2012*

The Transition Information Network is now based at CDC and has developed a national profile of transition models and resources. CDC's Getting a Life project is developing a practice paper illustrating different models of multi-agency working to deliver services at transition which will be widely disseminated through TIN and CDC transition contacts.

The Children's Trust work has had a specific focus on transition and we are working with a number of trusts around their transition provision. For example, we have been closely following Bolton's progress on setting up a transition team for young people aged 14-25. We have visited the team and are currently writing a practice paper covering the work in Bolton and other authorities to be widely disseminated.

CDC is working with Scope on Direct Payments for young people aged 16 and 17 and have identified transition to adulthood and direct payments as a specific piece of work that needs to be carried out, subject to funding.

(6.2) Adult programmes extend self-directed control to young people when they are ready

- a) Collate and disseminate good practice examples, including Expert Patient model.*
- b) Investigate how ICES initiatives can ensure they include children and young people.*
- c) Support for young people developing individual budget plans*
- a) DH by 2006*
- b) DH by 2006*

CDC is aware of a number of initiatives developed to help the implementation of direct payments and is aware of the early stages of projects focusing on individual budget plans.

(6.3) "Universal" services assessed on meeting the needs of disabled young people and their families

Facilitating evaluation of new model of service delivery through better evidence via the new public sector duty, improving collection of information, better inspections, and clearer performance indicators, and targets.
All government departments, 2006/7 and ongoing

CDC hosted a seminar for the DRC on 22nd March looking at issues for the public sector duty and children's services. CDC has responded to the DRC's Code of Practice for the implementation of this new law and will be working closely with the DRC to ensure that children and young people are covered.

CDC is working closely with pathfinder children's trusts to look at the impact of new inspection regimes, including the new joint area reviews.

(6.4) Family support that bridges transition

a) Review remit of Family Fund Trust.

b) Individualised budgets should support young people and their families across transition.

a) DfES and Family Fund by 2006

b) DH, DWP, DFES, ODPM by 2012

None, some clear further work needed on transition to adulthood issues and direct payments. This is particularly acute you young people with profound disabilities

(6.5) Access to good quality local information

Disabled young people and their families should receive local and national information at transition.

DfES DH and DWP By 2008

The Transition Information Network produces a magazine that goes out to young people, parents and professionals, which has national information and examples of good practice. TIN also runs seminars for young people, parents and professionals, which provide an opportunity to discuss issues such as person centred planning, friends, leisure and relationships and to share information and ideas.

The next issue of CDC's transition newsletter, Getting a Life, will feature local transition guides, which are essential for informing young people and their parents about what resources are available locally. This will be an effective way of sharing the good practice that exists around the country and helping authorities that are struggling to produce guides to get an idea of what they look like.

(6.6) Disabled young people should be included in planning that is centred on their own needs

a) Good practice models for subcontracting most specialist transition support provision should be disseminated.

b) DfES and DH should consider mapping youth centred approaches to transition planning, evaluating different models, and informing the development of Individual learning plans

c) Promotion of person-centred planning practice nationally

- a) DfES, 2006 onwards
- b) DfES and DH 2007
- c) DFES by 2010

CDC has been developing a reader paper on person centred approaches for professionals. This will look at various models used to employ person centred approaches, outline good practice in transition and outline ways that person centred approaches can be developed by services working with disabled young people in transition.

CDC is aware of a number of organisations and individuals have been developing various aspects of person centred planning and will continue to work closely with them to look at the effectiveness of their implementation.

(6.7) Ensuring advice and guidance is tailored to meet the needs of disabled young people

DfES should ensure that arrangements for providing advice and guidance to young people, including Connexions, meet the needs of all disabled young people.

DfES From 2005

At a national level the Transition Information Network provides young people, parents and professionals with up to date, relevant information about all aspects of transition. The website for young people will signpost them to the most relevant national and local agencies to provide them with the information they need.

CDC's Getting a Life project is currently gathering examples of local transition guides and protocols. The next issue of the project's newsletter – Getting a Life, will feature these guides as a way of sharing good practice around the country. This will help the development of appropriate advice and guidance for young people in transition in local areas.

(6.8) Individualised learning and vocational pathways into employment

a) New arrangements from Tomlinson group's recommendations to include disabled young people.

b) Good practice examples should be issued to employers and ACAS on Health and Safety and child protection.

c) Lifelong Learning UK should develop career structures and skills of staff working with young people with SEN.

- a) DfES and LSC.2006 onwards
- b) DfES 2006 onwards
- c) DfES and LSC 2006 onwards

CDC is aware of a number groups and organisations that are using a range of initiatives to increase the employment opportunities for disabled young

people. For example, we are aware of a project that develops employment options for autistic young people through the E2E scheme.

(6.9) Access to leisure and independent living needs to be ensured

a) Code of practice on public sector duty to include increasing opportunities for participation of disabled young people.

b) Research on meaningful life options for young people with highest level of needs.

a) DWP 2005 onwards

b) DH by 2005

The Transition Information Network held a seminar in February that focused on Leisure, friends and relationships and gave young people, parents and professionals a chance to discuss the issues for disabled young people in accessing leisure opportunities and work out what the best way of overcoming the barriers are. As well as young people and parents who had a wide range of experiences of accessing leisure services delegates included representatives from mainstream and specialist leisure providers.

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