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| <b>CREATING OPPORTUNITIES AND TACKLING INEQUALITIES SCRUTINY COMMITTEE</b> | <b>Agenda Item No. 6</b> |
| <b>21 JULY 2009</b>  | <b>Public Report</b>     |

## **REPORT OF THE DIRECTOR OF CHILDREN'S SERVICES**

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### **SERVICES FOR ADULTS AND CHILDREN WITH DISABILITIES**

#### **1. PURPOSE**

To set out a position statement relating to adults and children's services for those with disabilities; to highlight some of the plans for those services; to propose some scrutiny topics for the next year and to suggest some scrutiny methods.

#### **2. RECOMMENDATIONS**

Members to agree the scrutiny topics which they wish to scrutinise over the next year

#### **3. LINKS TO CORPORATE PLAN, SUSTAINABLE COMMUNITY STRATEGY AND LOCAL AREA AGREEMENT**

The work highlighted within this report directly contributes to the Creating Opportunities, Tackling Inequalities outcome of 'Supporting Vulnerable People' within the Local Area Agreement.

#### **4. A POSITION STATEMENT – ADULTS AND CHILDREN**

##### **4.1 Adults**

##### **4.1.1 Learning Disabilities**

Learning disability is the most common form of disability in Britain affecting around 1.2 million people. It is estimated that there are 339 people in the Peterborough resident population aged 15-64 with profound learning disability, and a further 3803 with mild to moderate learning disability.

Some people live relatively independently, hold down jobs and have busy social lives. At the other extreme, where people have profound and multiple disabilities, round-the-clock support is necessary.

Service users, parents, carers and the voluntary sector make up most of the membership of our Learning Disability Partnership Board which has led the development of the learning disability strategy. (See appendix 1 for details of service provision)

##### **4.1.2 Physical Disabilities**

A register is kept of people with sensory impairments and 388 people with sensory impairments were supported by community based social care services in 2008, covering 26.1% of those registered.

There has been an increase in the number of people with a physical disability receiving community care services to support them to live at home. Adults with a physical disability have been proactive in taking direct payments and it is anticipated that there will be a similar demand for individual budgets. (See appendix 1 for details of service provision)

## 4.2 Children

There is no single data source to reliably identify the number of disabled children in Peterborough. Data is collated from health, early years, and special educational needs data sources. It is estimated therefore that there are just over 1,800 disabled children and young people in Peterborough as follows: -

| Age band     | Number       |
|--------------|--------------|
| 0-5          | 605          |
| 5-16         | 1,017        |
| Post-16      | 229          |
| <b>Total</b> | <b>1,851</b> |

|                          |             |
|--------------------------|-------------|
| Total 0-19 population    | 40,386      |
| <b>% with disability</b> | <b>4.6%</b> |

## 5. SOME KEY FINDINGS AND PLANS

### 5.1 Adults

In 2005, an inspection of services for adults with learning disabilities in Peterborough was undertaken by the Commission for Social Care Inspection (CSCI). The inspection indicated that further work was required in the following areas:

- Person centred planning
- Independent and self-advocacy
- Uptake of self-directed support
- Service users living with elderly relatives
- Transitions.

#### 5.1.1 Strategic Plan Goals

A. To enable inclusion for those with **learning disabilities**:

1. Utilise the review of all out of area placements to:
  - Scope current service gaps to ensure effective commissioning of services with SCG or locally dependent on need and market availability of accredited providers
  - Identify those who are suitable to return to area
  - Undertake advocacy and person centred planning with those not yet ready to return.
2. Improve availability of information in accessible and user friendly formats
3. To work jointly with housing associations, private sector, and shared ownership to commission a full range of tenures, including:
  - Live alone (independent / supported living)
  - Live with family
  - Live in a house or flat with others

- Live in cluster housing – when a group of people live near each other, in the same neighbourhood, street, or block of flats.
4. To increase the number of people with learning disabilities in paid and voluntary employment by working with our contractors, Job Centre Plus and other partners to
    - Raise expectations regarding work, especially in schools and colleges
    - Develop partnership working with educational establishments via the transitions strategy group. Ensure transitions toolkit, which will include individual's future employment options, is completed for year 9 pupils with learning disabilities at their review from September 2009
    - Liaise with organisations we contract and work with to raise awareness of and create employment opportunities.

**B. To ensure modern and responsive services are provided for people with disabilities**

- 1) Work with GPP to ensure improved physical facilities for people with a disability
- 2) Review sensory support services to ensure service is aligned to client needs
- 3) Establish a rehabilitation worker for visually impaired people, giving support with mobility skills, daily living skills and communication
- 4) Work with Independent Living Support Services to develop the market following a review of the gaps and development needs identified by service users
- 5) Facilitate the establishment of a 'user-led' organisation through the further development of the Peterborough Disability Forum to represent disabled people
- 6) Ensure optimal access to the new capacity within the City Care Centre to provide intensive rehabilitation for adults with a disability in the bedded and day care areas.

## 5.2 Children

There is a new national indicator measured by a survey of parents with disability. All local authorities who have included this indicator in their local area agreement participated in the first survey in March 2009, the results of which provide the national benchmark for performance against which improvement will be measured. The scores are for the percentage of parents who express satisfaction with services in the following respects: -

- Provision of information
- Assessment of need
- Transparency
- Participation
- Feedback

The scores for each area are aggregated to give an overall score. The national benchmark is 59% satisfaction rate and Peterborough's performance at 60% very much reflects the national average picture and is broken down as follows: -

|              | Health | Education | Social care |
|--------------|--------|-----------|-------------|
| Information  | 64     | 69        | 61          |
| Assessment   | 76     | 82        | 62          |
| Transparency | 95     | 89        | 86          |

|               |    |    |    |
|---------------|----|----|----|
| Participation | 60 | 50 | 52 |
| Feedback      | 16 | 19 | 16 |

### 5.2.1 The plan to integrate services for children with disabilities

Integrating services for disabled children provided by health, and the different divisions within children's services (Learning and Skills, Social Care, Family and Communities) is part of the 'Every Child Matters' agenda to ensure that children and families receive a co-ordinated assessment of need and appropriate services to meet those needs. Avoiding duplication of assessment and providing clear pathways for children and families to access universal, targeted and specialist services are key elements of integrated service delivery. For disabled children, this means ensuring that they and their carers are provided with support to remain at home; to be able to access universal services such as community leisure facilities and extended schools; that there are targeted services specifically designed to meet moderate levels of need and that there are highly specialist and well coordinated services to meet complex needs of children with profound disabilities.

A project to integrate services for children with disabilities has been established by the children's trust partnership board, managed within children's services and was the subject of a report to Children and Lifelong Learning Scrutiny Panel on 4<sup>th</sup> March 2009. An interim service manager has been appointed who has additional capacity being provided through a small team from the Voluntary Sector Forum. A shadow Management Board is in place. (See Appendix 2)

### 5.2.2 Further plans

Consultation with parents confirmed that the key elements of the commissioning strategy highlighted in the previous scrutiny report are very much what they wanted to see. The appointment of the Aiming High Commissioning Officer therefore enables the city council to accelerate progress in all areas: -

- a. Increasing information, advice and guidance to parents
- b. Supporting access to universal provision through: -
  - o Additional care support to access mainstream facilities;
  - o Developing extended services and holiday schemes to increase access to disabled children;
  - o Grants to voluntary sector providers to improve access for disabled children;
  - o Improving transport access to overnight short breaks and universal leisure activities/extended services;
  - o Increasing direct payments and providing appropriate support to parents to use the scheme;
  - o Increased domiciliary care services;
  - o Improving the availability of aids and equipment to support short breaks;
  - o Increasing occupational therapy capacity to provide appropriate assessment for short break provision;
  - o Reviewing the capacity of the short breaks fostering service following the residential respite review;
  - o Prioritising allocation of capital to enable disabled children to access mainstream play, leisure and sports facilities.

## **6. POSSIBLE AREAS OF SCRUTINY**

### **6.1 Adults**

1. User-led organisations – “Putting People First” the national concordat on adult social care requires all areas to have at least one user-led organisation in place by 2011. In Peterborough we have supported and funded the development of the Disability Forum which it is hoped will become the key user-led organisation for the city. Currently the Forum is being hosted by DIAL, an established local charity. A full-time Forum Worker is now in post to take forward the development. The Committee could add value by examining progress to date in the context of the national and local requirements and needs and testing how the Forum could be most effective in its role. Clearly this would require the agreement of the Forum itself which it is recommended is contacted directly by the Committee should this be an area of focus. This approach would indicate a commitment to hearing the voices of disabled people in Peterborough and to supporting truly user-led services and enabling people to take more control over their lives and have much more say in local decisions.
2. Self-directed support – adult social care will be transformed by the introduction of Individual Budgets which will bring about much more choice and control for people who use services. The system is designed to be more transparent and fairer in terms of how resources are allocated. It also aims to enable individuals to take control over their money or services and be creative in meeting their own needs. We started to implement this in January 2009 so Scrutiny would add to the evaluation of progress and provide challenge to the programme delivery as this is a key target in Peterborough’s Local Area Agreement.
3. Carers including young carers – a new national strategy has led to a new local strategy for carers in Peterborough and this is about to be finalised. A new Carers’ Partnership Board is in place with an ex-carer as a co-chair. Performance on the carers’ indicator has recently improved considerably and there are new services in place such as the emergency support register. Feedback suggests that support for parent carers needs to be improved. Scrutiny could add value to the implementation of the new strategy. A collaboration between the new Carers’ Partnership Board and the Scrutiny Committee could be an exciting venture,
4. Disabled parents with disabled children – in some families one or both parents and one or more children have disabilities. These cases are often extremely complex with several service users of children’s and adult’s services plus several people who may consider themselves carers. There is potential for difficulties between agencies working with the family (children’s services, adult social care and health services) and potential for confusion over who provides what and how to get help. A focused piece of work specifically looking at these families would be ground-breaking and could feed into the agenda around prevention and whole family working.

### **6.2 Children**

5. Although parental satisfaction in Peterborough appears to be similar to the national average, we do know that many children with moderate disabilities are not currently accessing services. Increasing awareness of services, therefore, is likely to reduce parental satisfaction initially until we have sufficient capacity developed to respond to the full range of need. Central to parental satisfaction is the ability of children with disability and their families to access mainstream community and leisure facilities. Simple issues such as accessing toilets become enormous barriers to normal family life. Public toilets which have changing facilities for older disabled children are rare. As a result of parental consultation, however, the need for such a facility in the city centre has been identified and is being taken forward within the Cathedral Square development.

Parental engagement with elected members is therefore crucial to effective scrutiny of services.

6. The development of the integrated service is being taken forward in partnership with Peterborough Community Services within the departmental transformation programme 'delivering through localities'. Within the most recent consultation document, it is proposed that services to disabled children will be brought together as a natural alliance and located with special educational needs in the learning and skills portfolio. The progress towards a fully integrated service is also an area for scrutiny.
7. Supporting transition into adulthood is a key aspect of the Aiming High programme. Although we are able to report that 100% of disabled children have a transition plan at 14+, there is a considerable amount of work required to develop holistic services which support young people into adulthood and independence.

## 7. SCRUTINY METHODS

It has been proposed that the scrutiny committee will focus on services for both adults and children with disabilities over the next year. This will allow an in-depth consideration of all or any of the scrutiny topics listed above. It also enables a unique opportunity for Members to engage in a range of scrutiny activities:

- Examination of policies and strategies
- Survey and questionnaire development and analysis
- Focus group sessions
- Shadowing staff
- Meetings with, and visits to provider organisations
- Discussions with individual adults and children
- Overseeing a debate
- Organising a seminar to set out the findings

## 8. DOCUMENTS REFERRED TO IN THE TEXT

***Aiming High for Disabled Children: Short Breaks Implementation Guide. DCSF and DH July 2008***

***Healthy Lives, Brighter Futures. The strategy for children and young people's health. A commitment from The Children's Plan. DCSF and DH February 2009 (Chapter 6 Services for children with acute or additional health needs)***

NHS Peterborough has a specialist Community Team for People with Learning Disabilities. People with physical disabilities are supported by the locality teams which cover older people and those with disabilities aged under 65. There is also a small specialist team for people with sensory needs.

Key services for people with learning disabilities include:

- Employment and education support services are provided by Westcombe employment services via Peterborough community services and support people into employment and education, they also develop a directory of available courses annually
- Peterborough Council for Voluntary Services is commissioned to provide Advocacy – this is either group, case work or specific BME.
- Person centred planning is provided through circles
- Carer development worker works closely with and support parent/carers
- Transitions work stream is multi-agency partnership working that assist young people through the transition between children and adult services.
- An accommodation manager liaises with both service users and providers to ensure appropriate accommodation is provided locally.
- Service user and social care representatives provide an invaluable service in providing support and training to primary care staff on how to work with people with learning disabilities. Part of this work has led to a number of people have personal accessible Health action plans
- The Network team is supported by Peterborough Council for Voluntary Services and empowers and supports individuals in a group setting to express their views, ideas about their lives and the services they encounter. This group also has a key role within the Learning disability partnership board.
- There are a number of Supported living schemes that enable people to live and independent but supported live.
- Individual budgets and Direct payments have enabled a number of people to access a number of services including accessing leisure and community activities in a supported and safe way
- Lava lamp is a social event that has evolved from the Network team. This provides people with learning disabilities the opportunity to socialise with their peers in a safe and supported environment.

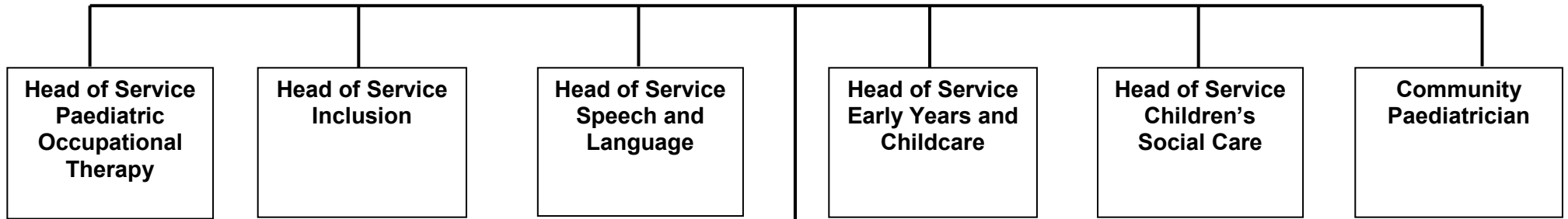
Key services for people with physical disabilities include:

- Care at home/community care including care management from a care support worker and social work support.
- Specialist assessments.
- Rehabilitation through specialist rehabilitation workers.
- Equipment including assessment, provision, training and repair.
- Information guidance and support to raise awareness.
- Specialist support for mobility skills, daily living skills, communication.

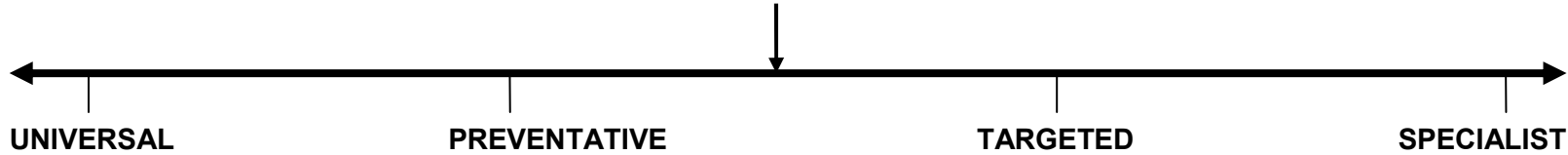
Services commissioned from voluntary and community providers include:

- Communication support groups.
- Co-ordination of peer to peer support groups.
- Drop in services.
- Social inclusion activities.
- Advocacy.
- Disability information and advice services including help to fill in forms, provide benefits checks, liaise with other agencies.

Joint Chair  
Assistant Director Family and Communities and Assistant Director Children's Community Health Services



CONTINUUM OF SERVICE DELIVERY  
(SEAMLESS SERVICE)  
POOLED BUDGETS WHEREVER POSSIBLE



Example:  
Children living at home using universal services

Example:  
Children in 24 hour 52 week care



Threshold & trigger points

Threshold & trigger points

Threshold & trigger points