

Whole life disability strategy 2017 - 2022

Draft



Overview

We know that being born with or acquiring a disability can have a major impact on people's life chances and opportunities.

The Census shows that there are currently 636,000 people living in Leicestershire; of those 524,000 are under 65, of which 147,000 are under 20.

There are estimated to be 36,100 children and young people living with a long standing illness or disability, including Special Educational Needs (SEN), and about 16,816 of them are known to schools and the LA.

There are around 3,000 disabled people under 65 in receipt of support from adult social care.

In 2015 the Adult Social Care spend for supporting these people equated to approximately $\pounds 64m$ - 42% on community based services and 58% on residential accommodation. A total of 81% of physically disabled people had community based provision compared to only 52% of people with a learning disability.

Children and Families Services spend £70m on the commissioning and provision of services for children and young people with SEN.

The percentage of pupils with a statement of SEN or Education Health Care (EHC) plan is 2.7% - 2.8%, which is similar to many other East Midlands authorities. The Leicestershire percentage of SEN Support pupils is the third lowest in the East Midlands, around 4-5% lower than the highest three counties. While the percentage of pupils with an SEN is lower than previous years it, should be noted that the proportion of children and young people placed in specialist settings has also increased and is one of the primary drivers on cost pressures that the authority faces.

Whilst performance has improved, only 3.6% of people with learning disabilities are in paid employment.

We believe that living with a disability should not be a barrier to living full independent successful lives. This strategy sets out how we as a council will work alongside all disabled people, regardless of age, their families and other key stakeholders to make sure that when they are in contact with council services, they have access to a coordinated, proportionate response. This will focus on promoting inclusion, independence and self-reliance to enable people to live their lives whilst fully addressing the preparing for adulthood agenda set out in SEND reform and addressing the inequalities that people with disabilities experience in society.

What people have told us

Disabled people and their families have told us that while things are improving they still find thatmoving between children's and adults services can be a difficult time. They worry about the availability of support for young people and the changes in systems and how to navigate them. They told us they dream about a truly joined up holistic offer where services work together, are local and are focused on early intervention and prevention, supporting young people to be active members of their own communities.

There are around 3,000 disabled people under 65 in receipt of support from adult social care.

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Our Vision

Our overall vision is to take a whole life approach to ensure that disabled people of any age can live healthy, safe, independent and fulfilling lives in their own communities. They'll have greater employment opportunities, better health and community relationships, and increasing independence and control over what they want to do and how they wish to be supported.

In order to deliver our vision we will:

- 1. Take a Whole Life Approach We will aim to reduce the impact of transition between different ages and stages of life by working with individuals, their families and others who support them, to create a seamless experience.
- 2. Focus on early help, intervention, integration and prevention Starting at birth we will aim to ensure that disabled people and their families will have access to the right information and support to enable them to be actively included within their local communities. We aim to ensure they are supported to start developing the skills they will need to lead a more independent life.
- 3. Promote Personalisation and Progression Services will demonstrate how they are responding to meeting the ildentified outcomes of each individual they support, and how they can demonstrate when they are met.
- **4.** Champion increased independence and employment People should be able to live, work and be active contributors in their community, making the best use of their own and other available resources and opportunities.
- **5.** Promoting Choice and Control with shared responsibility and community resilience - People should be able to exercise choice and control over as many matters as they can, but with these rights goes responsibility. We will be adopting a strengths-based approach that takes account of informal as well as formal networks of support to link people into their own community capacity rather, than wrap services around them.

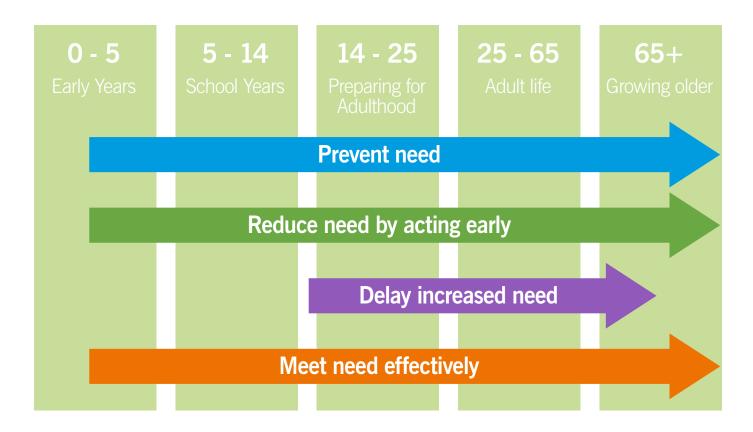
This strategy sets out how we as a council will work together with disabled people, their families and others who support them to make the vision a reality.

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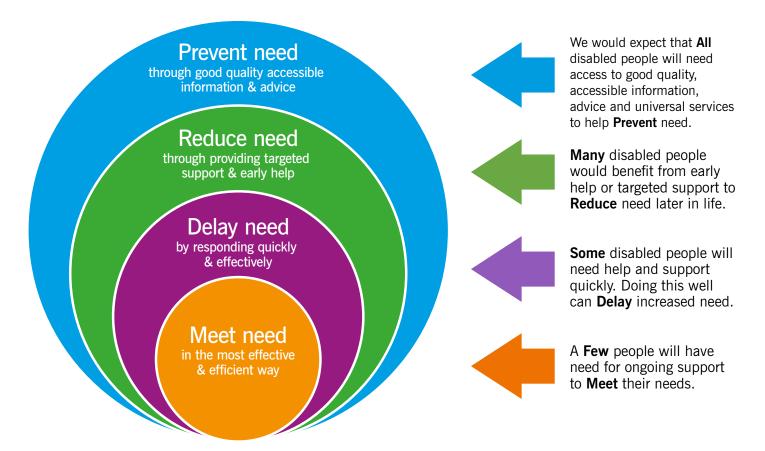
Our Strategic approach

By taking a whole life approach we can ensure that we can support people when they really need it but in ways which will ensure that they can be as independent as they can be.

The model is designed to ensure that at different stages in life people can get the right level and type of support at the right time, to help prevent, reduce or delay the need for ongoing support and to maximise peoples' independence.



The four elements of Prevent, Reduce, Delay and Meet originate from the Care Act 2014 and have a strong resonance for Adults and Communities and Public Health. The work of the Children & Family Services will be mapped onto only Prevent, Reduce and Meet to reflect the initial impression of the word Delay in addressing need for children.



How we plan to achieve our vision

Prevent need

Whilst most disabilities cannot be prevented, we know that if we provide the right information and support at the right time people, in particular young people and their families, often make different choices which prevent or reduce the need for social care support later in life.

How it works now

- People often don't know how to find the information they want or what support is available, either through formal services or within their local communities.
- Too many people rely upon formal education, health and care services for support rather than access universal services where they can. This is often because they don't know what is available, and the people who run those services don't always know how to make them accessible and welcoming.
- Disabled children and their families don't have the right information to help them plan effectivelyfor their later life.
- Accessing the right advice and guidance is spread over a range of services and platforms.
- Families say that if their child has an 'obvious disability' then the service they receive is good. If, however, the disability is 'unclear' and/or late onset, then accessing information, assessment and support is seen as fragmented, inaccessible and slow.
- Educational outcomes for children and young people with SEND are significantly below national averages.
 Consequently, intervention and support at the universal offer stage by early years settings, schools and FE colleges needs to be improved.
- Children and young people with a disability are more likely to be a 'child in need' and more likely to receive a social care service and be taken into care.
- Children and young people with disability are more likely to experience poor health, irrespective of their disability.

We want people to say:

- I have the information and support I need in order to remain as independent as possible.
- I receive information as and when I need it, and in the best way(s) for me. This means I can make informed decisions at all stages of my life.
- I have access to information about learning, care and support which is consistent, accurate, accessible, up to date and easy to understand.
- I know where to get information about what is going on in my community.
- I have the opportunity to get qualifications and go onto training and employment.
- I am able to use community resources to prevent the need to have social services involved with my family or the need to go into care.
- I am able to access services to enable me to live a healthy and happy life.

To make that happen we will:

- Ensure we have the right support and information available to help ensure women have a healthy pregnancy, e.g. smoking cessation and substance misuse programmes.
- There will be a comprehensive package of pre-antenal screening programmes implemented with public health, ensuring all children aged two years are assessed and screened for SEND and referred to LCC when appropriate.
- Ensure there is a direct and effective mechanism for sharing data across education, health and care services for children and young people aged 0 to 25 with a disability to help shape performance management, and strategic planning and commissioning of services in the future.
- Ensure that all staff working with disabled people, in particular those working with children, young people and their families, understand the vision and are confident to promoteit.
- Promote and ensure high quality early years and childcare provision through developing the market to ensure there is sufficient provision to meet the needs of eligible children, and allow disabled children equal access to pre-school provision as the rest of the population.
- Work with the school improvement system to improve the offer for children with disabilities to improve educational outcomes.
- Ensure sufficient early years places.
- Commission sufficient special school and FE provision for five to 25 year-olds.
- Work with the local area to ensure we have a local offer and council website that
 accurately reflects the service offer for disabled children and their parents, now and
 into their adult life.
- Ensure that young disabled people and their families are supported to think more proactively about their futures at their year 9 review.
- Ensure with health commissioners that all young people who are disabled have a review of their health needs at the age of 14 to start planning for adult health services.
- Continue to promote access to "universal services" through offering support and advice to service providers where required, and where appropriate provide financial support for things like changing places.
- Offer leadership programmes for young people and their families to help them plan more effectively for their futures.
- Work with local area co-ordinators to ensure that they have the right information to share and know who lives in their areas who may benefit from a connection.

Reduce

Disabled children often need additional early support to enable them to be ready to fully benefit from their education. Providing this support can improve their long-term life chances and opportunities. Providing the right type of low level support or advice early to any disabled person can reduce their dependence on long-term care and enable them to be as independent as they can be. Using assistive technology is an excellent example of how this can work in practice.

How it works now

- Very few disabled people known to services are in paid employment.
- We don't know enough about those young people who are likely to need extra help when they get older, or the kinds of support they will need.
- We have low expectations of what people can do for themselves, or could achieve with a little bit of help. For example, get a job, travel on their own or spend time alone.
- We support people to look for paid support rather than use what is already in their communities, which would make their personal budgets go further.
- We don't always offer support to people quickly enough when they ask for help so they end up in crisis. Sometimes that means families are separated or people have to leave their home.
- Re-enablement and the provision of specialist aids or equipment can come from a variety of services and at different ages and stages.

We want people to say:

- I have access to a range of support that helps me live the life I want and remain a contributing member of my community.
- I have opportunities to learn, train, study, work or engage in activities that match my interests, skills and abilities.
- I am supported to make progress with my studies and get the fullest education possible in a way that does not limit my later options.
- I feel welcome and included in my local community.
- I feel supported in my role as a parent with a disabled child.
- I can get support in a place where I am close to the people and things that
 are important to me. If there are times when I cannot be close to them I am
 supported to stay in contact.
- My role as a carer is recognised and understood and support is there for me and theperson I care for when we need it.

Providing the right type of low level support or advice early to any disabled person can reduce their dependence on long-term care and enable them to be as independent as they can be.

To make that happen we will:

- Offer the right proportionate help to families at the right time be that self directed, targeted or specialist assistance.
- Enable the early years, school and college system to meet the needs of disabled young people without recourse to the local authority. We'll do this by setting out clearly expectations at the SEN support stage and, where appropriate, devolving funding, responsibilities and services to this sector thereby optimising early help, the graduated response and sustainable education system.
- Strengthen the early help and pre-school provision for children with disabilities to ensure they are in position to begin school ready to learn.
- Ensure that disabled children have access to the right kind of education provision and support to ensure they have their needs met from their education and achieve better outcomes.
- Work with the FE sector to ensure a wider range of options for young people in transition and adults who want to continue their education.
- Identify those young people who are at risk of needing more intensive long-term support at an earlier age through attending year 9 reviews so we can help them to plan for the future.
- Support initiatives alongside our partners which can help people to be active members of their communities, e. local area co-ordination.
- Work with key stakeholders to design a new employmentpathway. This will start at school and go right through to gaining work or another meaningful suitable alternative.
 As part of the development we will look at the support that is available to both young people and employers, both from the council and other organisations.
- Support individuals and families earlier in managing difficult behaviours through the use of positive behaviour support and other forms of carers support programmes.
- Support carers to identify their own support needs so they can remain mentally, emotionally and physically well and confident to keep caring.
- Work with partners to further develop and deliver services that reduce the need for help, such as peer support groups, self care etc.
- Work with providers to seek new ways of working that promote independenceand reduce needs for formal support.
- Maximise the use of new technology and equipment to enable individuals to be as independent as they can be by reviewing current re-enablement service delivery.
- Continue to promote independent travel for young people with disabilities.

Delay

We recognise that most people with disabilities and their families cope well with everyday life and "just get on with it", but there are times when people need additional help to delay the need for care. There are also things we can do to help minimise the impact of disabilities if we act early or intervene when people tell us that things are difficult. These can range from supporting people in a crisis through to providing short term training or support to individuals and/ or their families to regain or learn new skills.

How it works now

- We mainly look at people's disabilities and the things they can't do, rather than those they can.
- Most of the services we run or pay for support people in the same way rather than help them to grow and develop and be as independent as they can be.
- We do not know enough about what are the best kinds of services and support that can help reduce need for long term care.
- It can take a long time to get the support people need as they have to wait for an assessment.

We want people to say:

- I can get access to support quickly without having to go through over complicated procedures.
- I can plan ahead and have systems in place so I can get help at an early stage to avoid crisis. However, if they do occur I can get the right help quickly.
- I feel safe, I can live the life I want and I am supported well to proactively manage any risks.

To make that happen we will:

- Work with partners to ensure we have the right services in place to support people in crisis, for example developing the outreach services for people with learning disabilities and reviewing child and adolescent mental health services (CAMHS) offer.
- Respond quickly when people ask for help so they get access to the right support when they need it, rather than having to wait for a detailed assessment.
- Ensure that the services we commission focus on promoting inclusion and independence.
- Increase the range and types of short breaks and ensure they support people to develop their independence, as well as provide families with a break from one another.
- Ensure that our support offer, be that for families with disabled children or those for adults e.g. Community Enablement and Re-enenablement Team (CERT)focus on "what works" and support people to be as independent as they can be and active members of their own communities.

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Meet need

We acknowledge that a small number of disabled people will need support from childhood and through most of their adult lives, and we will continue to meet their needs where others cannot. We will, however, start to work more with individuals, their families and others who support them to ensure that support is still focused on both enabling them to live as independently as they can and to achieve their goals while ensuring they are utilising the other resources around them so that the limited public funding can be put to best use.

How it works now

- We focus on meeting people's needs through paid support and traditional "specialist" services which often means that community resources and opportunities are not fully explored.
- People often expect that the council will fund all of their needs and wants without considering other ways of funding or meeting them.
- Services are often continued whether they are effective at supporting people towards their goals or not.
- The majority of services and the ways we work with people do not focus on supporting and promoting independence and positive risk-taking but instead can create dependence, over-reliance and avoidance of risk.

We want people to say:

- I receive good quality personalised support that has helped me become more independent and live the life I choose.
- I was prepared for moving into adult services and I was supported to transfer when I was ready, taking into account the other things that were happening in my life.
- When I reached adulthood I felt comfortable using adult services. Even though the services weren't the same, the level of coordination was.
- I am able to get skilled advice to plan my care and support and am given help to understand costs and how to make best use of the money I have to use, where I want and need this.
- My support is coordinated, co-operative and works well together and I know who to contact to get things changed.
- I am supported by the right people with the right skills.
- · All education, health and care needs are fully taken into account and recorded in one plan I can understand.

We acknowledge that a small number of disabled people will need support from childhood and through most of their adult lives.

To make that happen we will:

- Review our strategy and approach to accommodation to ensure that people are able to live in their own homes in a way that is affordable.
- Where people cannot stay at home, we will seek to find the most suitable and cost effective alternative as close to home as possible.
- Review our transition pathway to ensure it is working for the young people and the families that are using it.
- Review the way we help people to plan and source their care and support to
 enable them to find the right support to meet their needs once they have had an
 assessment.
- Develop a new proactive approach to working with the people with the most complex needs based on active case management and co-ordinated care.
- Work with staff, providers and individuals, and where appropriate their families, to
 ensure that everyone understands what we are trying to achieve when we work
 together to set goals as part of support planning, and that we checkregularly to see
 if they have been met. This is often called outcome based commissioning, or the
 "progression model".
- Grow our personalisation offer through promoting greater use of self-directed support and personal budgets.
- Explore the opportunity to develop a short term service where people can move to in an emergency and / or go to for assessment or to learn new skills before moving into their own home.
- Continue to promote independent travel and use of innovative more cost effective alternatives.
- Seek partnerships from within the school system which the council can invest in to meet needs locally without using resources onighly specialist/high cost placements.

Key activity to support delivery

We will need to take some additional actions to underpin our approach and help us deliver what we have set out.

These include:

- Gathering more information about what people need, what we already have and what works, to help us know where the gaps are. This information will inform our commissioning delivery plan and will be published in our market position statement.
- Reviewing our existing processes and pathways so we can fully understand what is working and what isn't working for disabled people, their families and the staff who support them.
- Working with our partners in health to expand our personal budget offer both for adults and children alongside introducing new ways to support people to make the most of their budgets without increasing the administrative burdens.
- Working with external partners and our staff to understand what support they
 need to change the way they work. This will inform the workforce development
 plans.
- Working with partners, e.g. schools and health, to ensure we are all working to the same goals.
- Look to opportunities to integrate services for children, young people and adults.
- Reviewing our contracts and specifications as new services are commissioned to ensure they support the delivery of our vision.
- Working with our providers, both those we fund and those we don't, to ensure they know what both the council and disabled people expect from them.
- Developing a governance framework, which is the way we check and make decisions that avoids duplication, but has co-production at its heart. This will include setting up working groups and developing an action plan that we can use to check our progress.

Monitoring our performance

We will monitor how well we are doing in a number of ways. As well as the traditional routes of the business plan, yearly performance report and local account, we will work with the Leadership Group to look for other ways to feedback on progress.

A performance dashboard will be created to better performance and contract manage commissioned arrangements. A performance dashboard will be created to better performance and contract manage commissioned arrangements.

