

Title: Next Steps in implementing the strategy to improve the quality,

accessibility and range of short breaks for children and young

people with complex needs arising from disability

Public Agenda

Yes

Item:

Wards Affected: All Wards in Torbay

To: **Health Scrutiny Board** On: **Thursday 7**th **July**

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1. Introduction

This report provides an update to the Health Overview and Scrutiny Committee on the next steps in implementing the strategy to improve the quality, accessibility and range of short breaks for children and young people with complex needs arising from disability. Reports 153/2010 from 17th June, 188/2010 from 15th July 2010 and 286/2010 from 2nd Dec 2010 provide additional supporting information for this service improvement.

2. Details of the service development

In 2007 Torbay reviewed the provision of short breaks for children with disabilities concluding that, whilst there was a good range of provision in place, more choice was needed for families particularly those with children with physical disabilities and medical needs, and that more families of children with disabilities needed access to inclusive 'universal' services.

Key themes from the Short Breaks Review:

- inequity and inconsistency in service provision
- services have historically been based around facilities rather than children's needs
- a need to reduce reliance on residential overnight services, that have been depended upon as day services are limited
- services should be child-focused and cost effective
- a wish for children and young people with physical and learning disabilities to be able to access the types of activities that children without disabilities access e.g. sports, days out and clubs
- a need for a range of residential provision

In 2008 the government launched "Aiming High for Disabled Children", a programme

aimed at transforming services for families of disabled children in order to support them to have to ordinary everyday lives. A key strand of the work was to significantly improve the quality and quantity of short breaks available to children and families. £34 million was released through local authorities and PCT's to support this transformation. In the last three years, Torbay has demonstrated a significant increase in the range and choice of short breaks available to local families.

The number of families receiving a short break has increased from 135 in 2008 to 621 in March 2011. The families are accessing a range of short break services including family to family, care in the home and inclusion services. Some receive direct payments to purchase services, others prefer to receive directly commissioned services. The number of families in Torbay receiving Direct Payments has increased by 241% since 2008/9, showing that families in Torbay are choosing to have the flexibility and choice that Direct Payments offer.

The Short Breaks review, and subsequent work through the Aiming High programme to expand the options available for families, highlighted a need to re-commission the residential overnight short break provision for children with complex needs as numbers of users accessing the John Parkes Unit (JPU) have fallen. In addition the unit cannot care for increasingly complex children, such as those requiring ventilation. This means that families with children in this category of need cannot access the current residential overnight service. National good practice has moved away from stand alone medical models of care to more flexible social models of short break care that happen across a wide variety of settings. Research shows that this enables children to live as ordinary lives as possible, having breaks with friends and family included or nearby and parents are able to have a more normal relationship with their child (Social Care Institute for Excellence 2009). Currently 10 children use the John Parkes Unit and the numbers will further diminish over the next 3 months as some children transfer to alternative family-based provision that they have chosen.

The Integrated Joint Agency Children's Disability Service worked with families to agree the best approach to equitable sharing of the short breaks financial envelope. The system adopted by families, Fair Access to Carers Breaks, provides a point score based on a full needs and outcomes based assessment of child, family, sibling and carer needs. This point score equates to an approximate amount of resource – the indicative allocation. Currently the users of the John Parkes Unit do not receive direct payments to pay for their JPU care as this is funded via the NHS block contract. The vision is for families to receive direct payments/individual budgets so they can choose what they want to use. This means that the cost of services must be reasonable to enable families to get the best value for money.

In July 2010 the Health Scrutiny Committee considered the proposal to embark on a procurement process for short break services to include residential overnight, day care, inreach care and emergency breaks for children and young people with complex needs arising from a disability. A presentation about the Short Breaks Transformation work that has been jointly undertaken by Torbay Children's Services, Integrated Joint Agency Children's Disability Service; and Torbay Care Trust was shared with the Committee on 15/07/10; along with the draft service specification so that the Committee could see the proposed method of service delivery. At that time the Committee felt that they did not have sufficient information to indicate whether the proposed change would constitute a substantial variation to the provision of services or a substantial development of services; and it was agreed that once provider options had been identified, the would be able to

advise on this. The issue of substantial variation is still outstanding.

In December 2010 the Health Scrutiny Committee agreed that we should proceed with an 'Any Willing Provider' procurement process in order to stimulate the market and develop a menu of options. A provider briefing event was organised for January 2011. That offered an opportunity for providers to understand the brief, the procurement method, process and timeframe. Parents and carers that use the John Parkes Unit presented their views as to what they would want to see from service. The event was well attended by a range of national and local providers and members of the Health Scrutiny Committee attended to observe.

Following the event, providers submitted their responses to stages one and two of the 'Any Willing Provider' process, six providers completed both stages. As a result of the evaluation process, three providers have been identified as providers who could deliver the service specification. The Committee needs to know that South Devon Healthcare Foundation Trust is not one of those providers, however due to the commercial in confidence nature of the process; the Care Trust is unable to declare who these are yet.

In light of this, the Committee are now asked to identify whether they consider the proposal to be substantial, and if so to provide clarity on the purpose of consultation.

3. Public involvement:

A focussed review of short break services for children with complex health needs began with a 'Listening and Design' event in September 2009 with users of the John Parkes Unit and a 'Short Breaks Working Party for Children with Complex Health Needs' was formed. The Working Party met eight times face to face from October 2009 to October 2010 to identify the elements that should be captured within a service specification: how much residential overnight short break provision is needed, of what type and quality. Wider parents views were canvassed via a consultation carried out in January and May 2010 and a service specification was developed based on what parents had said.

The specification asked for providers to deliver a range of services including residential overnight care, day care, care within family homes, emergency breaks and optional provision included befriending and reflected the things the parents and carers said were important to them: breaks should be fun and stimulating for the children, parents want continuity of care and high quality, safe services to manage high level care needs.

Locally designed criteria for evaluating providers were developed with parents and carers; and the scores were weighted 70% attributed to quality and 30% to price. We deliberately moved away from the traditional health and social care weighting of 60 % quality and 40% price as we wanted to ensure that quality was at the forefront of the decision making process.

To facilitate the evaluation process we asked providers clarification questions, visited their services where they exist; and met with them face to face as part of the scoring process. Parents participated in evaluating providers who have expressed an interest in delivering residential overnight care as this type of care only as this is the area of the specification that they were most interested in; and parents had the opportunity to visit the residential provider where they were able to look around and ask any questions that they had. Follow up meetings to document the parents and carers evaluations of the providers and their concerns have taken place. Parents have been keen to be a part of the decision making

process throughout, we have met face to face six times throughout the procurement process, January to June 2011, and we have continued to stay in contact via telephone and email. We are planning another meeting with parents in July to discuss the outcomes of the procurement process and how parents might pool individual budgets.

The Strategic Health Authority has closely followed and provided advice on the engagement process.

4. Next Steps:

- Consultation with the Health Scrutiny Committee as a Committee
- Further briefings with the affected families
- Recommendations to the Torbay Care Trust Board on 20th July 2011on the three providers

Documents available in members' rooms

None

Background papers

- Commissioning Short Breaks for Children and Young People with Physical and Learning Disabilities- HOSC 17th June 2010
- Commissioning Short Breaks for Children and Young People with Physical and Learning Disabilities- HOSC 15th July 2010
- Commissioning Short Breaks for Children and Young People with Physical and Learning Disabilities- HOSC 2nd December 2010