

Appendix 1: Development of effective short breaks and the move to individual budgets as a core offer

Short Breaks and Individual Budgets

Introduction and policy context

This report proposes a managed move from the current position, where existing services can often determine what care and support package can be provided, to a more self directed and personalised approach based on greater availability of individual budgets. The agenda is complex and challenging and not without risk. The Council for Disabled Children (CDC) review 'Personalisation of social care for disabled children, young people, their families and carers' is appropriately subtitled 'Opportunities, challenges and concern'.

This report guards against the risk of what the CDC review calls a 'precipitate rush' to implement personalisation and takes serious note of the questions and challenges such an approach generates. This proposal takes careful account of these risks while focussing on the potential for significant improvement i.e.

'Personalisation, if implemented correctly will be incredibly beneficial to both service users and providers within the health and social care sector. Not only does it put control back in the hands of the individual but it also gives the opportunity to do things differently for our clients, which is very exciting' (Newman S 2009 'Personalisation; practical thoughts and ideas from people making it happen', OLM -Pavilion).

Children with disabilities often have complex needs which mean they require support at a much higher level than would be expected for non-disabled children. For example they may need a high degree of personal care including lifting and moving, medical management, behaviour management. These needs place pressure on their parent carers and families and may mean that the child/young person is not be able to participate in activities without the support of their parent carer. A way to support families to care for their disabled child is to provide opportunities for short breaks which provide both a positive experience for the child/ young person and a break from the caring role for their parent carer.

Aiming High for Disabled Children: Better Support for Families describes short breaks as follows:

"Short breaks provide opportunities for disabled children and young people to spend time away from their primary carers. These include day, evening, overnight or weekend activities and take place in the child's own home, the home of an approved carer, a residential or community setting. Provision of short breaks should be based on an assessment of the whole family addressing both their personal and social needs. Short breaks occur on a regular and planned basis and should be part of an integrated programme of support which is regularly reviewed."

In order to ensure that short breaks remain a focus, the Coalition Government laid regulations under the Children and Young Person's Act regarding short breaks, which came into force in April 2011. Entitled *Breaks for Carers of Disabled Children Regulations 2011*, these regulations mean that LAs are required to:

- offer breaks as a preventive early intervention
- offer a range of services for parents
- publish a statement of those services on their website. This statement must include details of any eligibility criteria the LA applies to short breaks services.

In November 2011 a Department of Education Report on the impact of short breaks on families with a disabled child over time described them as fundamental to the wellbeing and resilience of families with a disabled child:

'These findings suggest that short breaks have both a direct positive impact on the health and wellbeing of carers, and buffer the impact of important stressors on carers' health and well-being. These findings reinforce the experiences of carers about the importance of short breaks to their health and well-being and their capacity to continue caring effectively for their disabled child.'

Adult services have seen a move towards a personalised approach to social care provision, including individual budgets where the individual (or their proxy) is allocated a resource over which they exercise control. The government has indicated its commitment to extending this model. In November 2010 Paul Burstow said:

"Personal budgets can make an incredible difference to people's lives. They give people choice, control and independence. They look to people not the state to shape services, and improve outcomes, making a reality of the Big Society. I want councils to provide everyone eligible with a personal budget by 2013."

Extension of individual budgets to children with disabilities has been supported by a national pilot project which reported on its findings in July 2011. The Green Paper 'Support and aspiration in SEN' goes further with a key work stream being the introduction of personal budgets for SEN linking to a single plan across health, education and social care.

The national pilot programme describes an Individual Budget (IB) in the following way:

'An individual budget (IB) applies to an arrangement whereby a service user gains direct control over the application of funding allocated to them following an assessment process or processes, and where funding is sourced from a number of income streams held by local statutory bodies. The intention in bringing different funding streams together is to go beyond current direct payment arrangements, and provide a more holistic and joined up package of support.

Under IB, the service user will also be offered the support of a broker to help manage the allocation provided - some of which may be in cash form, but can also be services provided in-kind. The broker may also hold the budget on behalf of the beneficiary.'

The evidence from the national pilots indicated that families see benefit in having greater insight into the costs of services and control over the resources allocated to them.

'It was really empowering to know about the money and I was able to understand the support I could buy when I related it to the money'

'By turning it into money, that makes it more flexible in itself...and you can think I could use that smarter and make it work harder'

'Better knowing how much you got...you could then fit your plan into the money'.

Quotes from the focus groups in the pilot evaluation

The phased introduction of individual budgets is one of the key proposals in Brighton and Hove's Commissioning Strategy for Disabled Children agreed in January 2011 and taking forward this element over the next 3 years supports Corporate Plan priorities focusing on tackling inequality, engagement, participation and local decision making and builds towards a family and child led approach.

Current position in Brighton and Hove:

Short breaks are offered via a range of service providers and/or the direct payments programme. Current services providing 1:1 short breaks and/or leisure opportunities:

- Befriending: Children's Society- volunteer young people are matched with older young people and spend time with them accessing a range of leisure opportunities
- Outreach: BHCC in house service whereby a child/young person is provided with a BHCC employed/sessional worker. The worker spends time with the child in their home or takes them out into the community.
- At home care for individual children: Crossroads
- Short term foster care: Link plus- Barnado's – link plus foster carer assessed and matched with a family to provide daycare and/or overnight care in their own home for a child/young person

At present all of the above commissioned services are provided free at the point of delivery to families. The current Direct Payments Scheme is not used to purchase any of these services.

Direct payments are local council payments for people who have been assessed as needing help from social services, and who would like to arrange and pay for their own care and support services instead of receiving them directly from the local council.

The direct payments budget allows resources to be allocated to a family to 'purchase their own support directly. Families using direct payments are currently supported through a contract (jointly with adult services) with the Federation of Disabled People. Families report they appreciate the flexibility of direct payments but they can find the recruiting of support workers, commonly called Personal Assistants, (PAs) and their ongoing employment difficult and an added stress in their lives.

The current direct payments budget is £397,450. As of 16.12.11 there are 92 families' allocated direct payments with 5 in process.

Resources for provision through either a commissioned service or the direct payment option are allocated by the Delivery Unit Resource Panel chaired by the Head of Children's Disability Services. Thresholds for allocation take account of: the needs of a family; current service pressures; waiting lists; and current support packages.

Children are referred to the Resource Panel, which consists of both internal and external service providers, by their social worker who presents the case for additional/different support . A discussion ensues as to the best available package of

care and providers offer services based on their match with the family's needs and available resources.

The strength of the current Resource Panel arrangement is the collective approach to meeting the needs of families by bringing together all those who manage services and having an oversight of service pressures and waiting lists,. Each provider strives to be flexible to meet the needs of families who may present with high levels of need, stress and distress.

However, there is no formal resource allocation tool and the decision is therefore open to challenge. Representatives from the local parent and carer council (PaCC) have made it clear that there needs to be greater clarity about the allocation of resources to allow families to feel that the system is 'fair'.

The Delivery Unit, which manages the Resource Panel, has received a small number of complaints about the allocation of resource from families and without a clear methodology for objective decision making can find it hard to defend their position.

Commissioning strategy: proposed changes

Aims:

- *To improve the way support is offered to families by working with all stakeholders and parent carers to explore the move to a core offer of an individual budget for those children and families with an assessed need for social care support*
- *To ensure the appropriate infrastructure is in place to support families to manage individual budgets ,*
- *To ensure that children are safeguarded, appropriately supported and that their families receive maximum benefit from the support they receive.*
- *To build a platform where the individual budgets agenda can support the value for money programme*

National evidence from the pilot programme indicates families tend to opt for using money to access mainstream activities, buy individual support for their child in the form of a Personal Assistant (PA) and that they find the process more flexible and responsive. Over time there is likely to be a shift away from families 'buying' services traditionally offered to them including residential overnight breaks:

'IB pilots illustrated a trend towards the use of more PA related and universal/community based provision relative to overnight residential care provision. In addition, the evaluation evidence showed that existing service users tended to increase the amount they spent on PAs, with less spent on overnight residential care relative to their previous/traditional care package, whereas newcomers had spent comparatively less on PAs and more on universal services than existing service user'

To make these changes the proposed project will:

- Enable and empower parent carers to lead the development of a support plan to meet the needs of their children and, where appropriate, to take responsibility for individual budget management

- Work with providers to develop their services in response to potential new patterns of demand and preferences from service users.
- Enable the workforce to respond to new arrangements in a way that builds on their skills and creativity
- Ensure providers demonstrate and manage their unit costs, and measure and evidence what they do so that they can be clear about the outcomes of their work and the impact they are making.

Implementing change requires a shift in understanding across the system which will only be achieved through a co-production process with service users, health and education and in house and external service providers. A transformational change programme has therefore been in put in place. Supported by the independent organisation leading the national pilot, In Control, the programme will, build on learning from the pilot phase, be working towards:

Designing a new care pathway so that:

- When a child/young person is referred for social care support and has been assessed via the statutory tools of initial and core assessment, a Resource Allocations System (RAS) will be completed by the family with the support of a professional.
- The questions asked within the RAS focus on the needs of the child/young person and the support they require, for example to care for themselves or to access their community.
- The RAS is then analysed and an indicative budget is established. This information is shared with the parent carers
- The family is then supported to come up with the best ways to use their financial resource to meet their needs. This is written up into a support plan. Families, children and young people will be freed up to think imaginatively and outside current service delivery models to plan for the support they want and need at an individual level
- The family then access the identified support, either directly or with the support of the recruitment and brokerage service supporting the scheme.
- The allocated resource and the achievement of the aims set out in the support plan will be reviewed regularly

Support and enable families to take on the new approach:

It is recognised that key to the success of individual budgets is the support offered to families to fully engage and participate in the planning of support.

'The IB pilot programme illustrated a clear desire on the part of the majority of participating families to self manage their funding allocations. However, although only a small number of families chose to have their funds managed on their behalf, it is important to note that in the absence of alternative funding methods, the IB offer may have proved inaccessible to this group. Therefore, the provision of a spectrum of choice for the management of IB funds should still be viewed as an important element of this type of approach to service/support provision. Individual budgets for families with disabled children Final evaluation report: the IB process DFE-RR145 July 2011

Current experience of direct payments is that some families find the recruitment and employment of PAs very difficult and stressful. As a result there may not be an appetite to take on an individual budget. The implementation plan includes awareness raising for parent carers and professionals alongside their engagement and participation in the development of the project.

The intention is to ensure the availability of a recruitment and brokerage service. This would play a fundamental role in supporting families to manage the allocated resource, including supported bank accounts, matching to PAs etc. Either the brokerage service or another lead professional could also, where necessary, manage the support package for the family. The intention is to be as person centred and flexible in approach as possible whilst ensuring safe and appropriate support is in place.

Grow and develop local services:

In Brighton and Hove there is a strong community and voluntary sector that provide many short break services. There are also in-house outreach and residential services and the two currently work collaboratively to identify and manage support needs. The strength of these relationships is acknowledged and the intention is to engage all current service providers in the development work required to ensure the identified support for families is available.

The first year of the project 2012-13 will include a co-production model, bringing together current service providers to consider how the pattern of services might need to change in the future and how to ensure service stability during the change process. The potential for destabilisation of current provision and measures to mitigate this are recognised in the risk log.

It will be essential to ensure that services purchased by or on behalf of families meet statutory requirements e.g. for carers to be approved foster carers if offering overnight provision in their own home to ensure children are appropriately safeguarded. There are challenges to this with the development of choice for families. Risk and innovation will need careful balancing.

Alongside development of available services there will need to be effective workforce planning and training; both in the principles of individual support planning and its monitoring and review and to ensure there is an appropriate workforce available to respond to need. Current providers of home support workers and befrienders have expressed the view that there is capacity for increased recruitment of people to work with families.

The management of change for the current and future workforce will be part of the detailed project plan.

Project Management

A phased approach will be taken between April 2012 and April 2015 across the three key areas above to reach a position where an individual budget is the core offer for all children and young people with disabilities who have an assessed need for respite/short break support.

Phase 1 April 2012-April 2013:

This will include:

- Development of the Resource Allocation System (RAS) including increased clarity about current unit costs and its practical implementation. Areas involved in national pilots will be consulted about their experience through attendance at an In Control conference and potentially field trips.
- Recruitment of between 10 and 20 families to engage in a pilot phase of RAS and allocation of a budget and support plan from October 2012
- Engagement of parent carers and young people and advocacy organisations in the evaluation of the pilot to inform options for later phases
- Engagement of in house and external providers who currently deliver services in a co-production approach to evaluate the pilot and consider options for the future shape of services
- Engagement of other commissioners including the Services for Young People Joint Commissioning Board and especially commissioners responsible for relevant adult and/or transitions services for young people.
- Participation by the Children's Disability Commissioner in the tendering process for the Adult Services Self Directed Support contract which it is intended to use between September 2012 and September 2014 to provide support for families involved in the pilot and subsequent development of the programme
- Identification of any workforce issues arising from the pilot

Phase 1 will not include resources currently allied to in house overnight residential respite. Options for the future development of council provision will require support from the council's legal and human resources services.

The cost of the pilot is twofold:

- Implementation costs: these will be absorbed within the council's existing commissioning and delivery teams.
- Capacity to respond flexibly and imaginatively to care packages developed during the pilot phase: This will be found through short term efficiencies to be negotiated with in-house and external providers delivering 1:1 support to families

The Commissioning Strategy for Children with Disabilities includes a commitment to: *'undertake a review of respite/residential provision in a strategic way looking at the viability of in-house provision and the needs of young people and their families for respite taking full account of what we know about the difficulties of finding alternative overnight respite for some children/young people'*. This will be followed up in 2012-13 and, where appropriate, findings linked to the Individual Budget programme.

Phase 2 April 2013-April 2014

Building on phase 1 to:

- Scope the options for the future shape of the PA and foster carer services
- Consider how in house and external service providers could respond to the preferences of families which emerge from the pilot.

- To make use of the RAS with a larger number of families
- To consider options for inclusion of residential respite provision within the programme

Phase 3 April 2014-April 2015

- To consider the introduction of individual budgets as a core offer for families new to the social care system
- To consider offering all families in the social care system the option to move over to an individual budget

Business Case/Financial Modelling:

Work in progress – further details to be provided.

The final evaluation report for the national pilots concludes:

Although many of the pilot teams felt that it was too early to say whether the provision of the IB approach was associated with additional costs or savings relative to traditional service provision, they did reflect on what they felt was likely to happen over the longer term. The pilot teams generally felt that the additional costs of implementing an IB approach were seen as occurring mainly in the set up phase, including recruiting staff, developing the resource allocation model, and setting up the support planning and monitoring processes. They added that in delivery terms, support planning in particular was likely to be more resource intensive than the traditional approach. However, this initial increase in resources was likely to decrease over time as the IB approach became embedded as part of the 'norm' and as families became more adept at participating in support planning. As such, the informed opinions across the sites implied that the costs of an IB approach compared to traditional service provision were likely to be broadly cost neutral as the approach was rolled out over the longer term. Individual budgets for families with disabled children Final evaluation report: the IB process DFE-RR145 July 2011

The anticipated outcomes are that:

- resources can be used to support more families, by reducing unit costs
- duplication of recruitment and training of staff can be reduced (for example outreach, befriending and link plus all look to recruit similar types of staff, undertake their CRB and other checking and training)
- economies in scale can be achieved, though taking account of expertise developed in the city.

Risk Assessment:

The transformation programme is based on two key principles:

- Clear project management - resource allocated to deliver the project plan Cabinet Member and Strategic Director support for implementation of the agreed Commissioning Strategy.

Risk/challenge	Mitigation/response
The change requires a shift in the hearts and minds of service users, providers and partners	Effective awareness raising with key stakeholders including parent carers- In Control are supporting the implementation and will deliver this in March 2012 Learning from pilots and other areas who are ahead of B&H e.g. East Sussex. Attendance at In control conferences. Learning from experience in adult service locally -adult services represented on steering group
Destabilisation of current service providers during a period of change	Engagement with current providers in phase 1 to co-produce the model as it goes forward.
Anxiety in the system slows down or derails the process of change	Engagement of involvement of parent carers- PACC represented at disability partnership board where the commissioning strategy was formulated and on the steering group for the implementation of individual budgets. Amaze are also represented and co-chair the disability partnership board
Financial reshaping is complex and some providers bring money into the city e.g. Barnado's and Children's society which could be lost	Adequate time allocated to be clear of current finances and to work through financial models, Support from finance and legal
SEN Green Paper has a challenging timescale to move towards a single plan and the option of a 'personal budget by 2014' to include health ,social care and education resources	Link with Se7 pathfinder- Head of Disability Services and Commissioner are part of SEN partnership board and the change board for SEN pathfinder, linked to regional developments
A change to individual budgets could place increased financial demand on resources (a small percentage of families in the pilots saw an increase in their resource allocation under the new model)	Well understood and consistently implemented RAS- a workshop has already been held for social workers (December 2011) to develop this
Risk/challenge	Mitigation/response
The change requires a shift in the hearts and minds of service users, providers and partners	Effective awareness raising with key stakeholders including parent carers- In Control are supporting the implementation and will deliver this in March 2012 Learning from pilots and other areas who are ahead of B&H e.g. East Sussex. Attendance at In control conferences. Learning from experience in adult service locally -adult services represented on

	steering group
Destabilisation of current service providers during a period of change	Engagement with current providers in phase 1 to co-produce the model as it goes forward.
Anxiety in the system slows down or derails the process of change	Engagement of involvement of parent carers- PACC represented at disability partnership board where the commissioning strategy was formulated and on the steering group for the implementation of individual budgets. Amaze are also represented and co-chair the disability partnership board
Financial reshaping is complex and some providers bring money into the city e.g. Barnado's and Children's society which could be lost	Adequate time allocated to be clear of current finances and to work through financial models, Support from finance and legal
SEN Green Paper has a challenging timescale to move towards a single plan and the option of a 'personal budget by 2014' to include health ,social care and education resources	Link with Se7 pathfinder- Head of Disability Services and Commissioner are part of SEN partnership board and the change board for SEN pathfinder, linked to regional developments
A change to individual budgets could place increased financial demand on resources (a small percentage of families in the pilots saw an increase in their resource allocation under the new model)	Well understood and consistently implemented RAS- a workshop has already been held for social workers (December 2011) to develop this
Pilot sites did not include high cost packages on the whole so this area of the service provision is currently untested	Learn from developments as they occur in other parts of the SE or the country. To test without committing budgets (virtual budgets)
Market development cannot keep pace	Co-production will inform the pace that is acceptable. Steps within each phase can be managed to a) avoid any impact on current children and families in receipt of a service and b) sustain the current providers during transition. Advice from legal and procurement re contracts etc
Workforce development cannot keep pace	Support and involvement of HR
Additional pressures are placed on the current budget for short break services by the financial situation in the council and local economy	Difficult to mitigate but a 2 year budget plan will support effective planning. Compatibility of disability strategy with others e.g. youth, supporting vulnerable young people, transitions will enable joint commissioning/provider efficiencies
Change in local or national policy direction	Need to be mindful and respond as appropriate.

Families experience a reduction in package and wish to revert to their previous package. May become disillusioned and influence the views of other parent carers	Effective awareness raising with families and transparency about the programme
Pace of change is too rapid with such a complex and profound change to service delivery in a time of financial and organisational uncertainty (e.g. evolving commissioning led organisation)	Flexibility in implementation built in to the project to allow capacity to address any issues/risks arising

The Commission on Personalisation report concludes and Brighton and Hove children's services position is :

Our prospectus for change has sought to temper hard-headed reforms with a passion for social justice; we propose a careful balancing of markets and mutuality; in the end however it is our re-imagined sense of the collective that will win out.

It is in this spirit of mutuality and common purpose that we invite you to consider and act on the proposals entailed in this report.

