**IDS Consultation**

**10th June 2014**

**Shire Hall, Warwick**

IDS - Local offer

17 meetings across county - evenings and daytime

Explanation about Wacky Forum - Consultation group - children with disabilities

Why consulting now - SEND reforms, local offer - must be in place by 1/9/14 - if our Local Offer is not approved we are likely to need further discussions with DfE.

Adrian gave explanation of Education Health & Care plans (EHC)

Personal Budgets - must be offered, families don’t have to take a personal budget if they prefer not to though

Short Breaks - explanation our WCC service costs in the region of £24 per hour vs £16 per hour that may be likely form the Voluntary and Private sector.

Can it be “like for like”? - Yes

Will the standard short break offer include autistic children - yes

Putting Short Breaks ot to lender - private and voluntary sector

PIP - How many children are having PIP? Need to find out this information

Local Offer - There is nothing in here regarding carers.

Comment - Respite - rubs both ways!

Personal Budget - What happens if parents spend money on inappropriate needs? Spending of money is monitored to make sure parents are spending appropriately. In most instances we find that families want the best for their children and so spend the funding for the benefit of the child. In a very small number of cases this is not so and consideration is given to each case of how to deal with that situation. eg personal budget unlikely to continue is spent inappropriately

Are you looking to increase service in Family Link? Yes

Comment - Children in residential have more nights because they have greater need. Adrian - that is not necessarily so at present.Most of the children experiencing Residential care have greater needs but there are a small number that don’t.

Comment - With Family Link - not same recording of information undertaken - a personal example of the use of Family Link given. 1 Family Link was allocated (who was amazing!) then required to move to next Family Link - whole process took approximately 3 years before totally settled.

How many children in time will reduce in residential - We need discussion and not able to put figure on yet.

Transport - Isn't this covered in school transport - Children can have their travel from home to school. We have usually determined respite as a “temporary” home.

Explanation of the budget and how mapped to key area of spend

Comment - Budget is there but savings are not. Adrian - budget is now mapped to local offer “Matrix”

Budget only describes how we use Council money - not Health money. Budget runs from April to March.

Are you going to cut more? Adrian - slippage will happen on the savings required e.g. if we need to take a child into residential care, there will also be slippage on staffing savings (was planned for April-now likely to be July) Savings on Short Breaks in place from September rather than March as out of tender, so some slippage there too.

Won't clawback in 15/16 what not saved in 14/15?

IDS Budget is now £3.85m to deliver services

Where are the pressures? - Most pressure can be felt on residential budget - we are already overspending on this area, if we get further children that need to go into Residential care then this is where costs can spiral..

Comment - this is where it is likely that you cut support at lower levels and it squeezes parents too much. Children end up in care as a result.

Residential costs - is it around £300k? Yes that could be a figure for a child who is oxygen dependant.

Described oxygen dependant scenario & concerns about tipping parents over edge if reduce current support too much.

What happens with Transition? We have to get better in supporting children in transition to adult services.. FAC’s will be challenged by system. How do we deliver services to changing needs - eg cost of Autism vs Cancer.

There is now a new protocol for transition.

Educational provision buying at Hereward. We could have further discussions with provision for Young People with Disabilities.

SEND provision - is now up to 25

18 - for Social Care, 19 for Education (unless in care system)

DLA or PIP

Flowchart exploration - requirement for outcome based approach

“We have short breaks already - do we need to re-apply”? No

**Question 1**

* DLA care component - anything else we should consider
* Discussed personal examples where both families would automatically be eligible for Short Breaks £350 plus would be likely to have assessment and other services
* Concerns about families that come up behind those that currently have high assessed needs
* PIP’s come into play at 16
* JH - respect for individual. At 18 the child has become an adult, society needs to remember that and treat accordingly
* Disabled - our children - we are proud of - child disabled by society. Every child is precious. Presentation has not always reflected this viewpoint.

**Question 2**

* More than 24 nights……
* \*Focus on assessment
* Family circumstances are key
* Sleep needs for families - should be part of assessment
* 6 months review for 3 purposes - to identify
	+ more need
	+ less need - most families unlikely to have less need
	+ same need
* Some families will not be suitable for Family Link
* Does the Health and Wellbeing Board have a role - started discussion with CCG. In theory we think they should only be commissioning for Rugby. Agreement with CCG to begin debate about the Health Units. Health and Wellbeing Board - Accountable to Local Authority
* How do go about getting more money out of Health if needs change? Challenge - cost always likely to have.
* ILEAP - put into tender - if parents given some money can spend where like

**Question 3**

* Impact of transport costs
* Some families transport own child at present so could be open to more money
* Report to cabinet 22/7/14 - co written with parents (report from consultation)
* O and S - 16th July - after paper has been published so they
* Must have LO published by start of September - but start of journey so likely to be refined over time
* Important for parents to understand the Democratic Process
* This gives the start of a gesture dialogue - previous consult wasn't.