

0 – 25 Disability Service

Equality Impact Assessment and Analysis (EqIAA)

Section 1 - Introduction

This EqIAA investigates the Council's proposals in relation to the new 0 – 25 Disability Service.

Section 2 – Research and Consultation Conducted

The council undertook a significant engagement and consultation process over 12 weeks from 2 December 2013 until 24 February 2014.

To engage as many people as possible, the council used a wide range of engagement and consultation techniques including:

- The publication of an engagement document that outlined the council's vision and proposals in detail. An easy read version of this document was also produced.
- A supporting website which provided access to all the documents, event information, surveys, presentation and initial equality impact assessment.
- A survey to gather views on key points; paper, online and easy read versions were also produced. The council also welcomed comments and views in writing, email or by phone.
- The main focus of the engagement was a series of seven workshops and events aimed at parents and carers and other organisations and stakeholders.
- The council also gave a series of presentations at various other meetings, groups, forums and networks.
- The council also commissioned KiDS to undertake some specific engagement work with young people with a special educational need or disability.

The engagement was promoted using local and social media and through parent carer forums and networks. Formal stakeholder notification was also sent to a large mailing list of interested organisations, schools, statutory consultees and service users.

Consultation response rates

The council received survey responses as well as significant feedback from the organised consultation events. The table below outlines the approximate number of attendees at each event.

Event	Number of attendees
20 January, Shireway Community Centre, Yate	44
22 January, Turnberries, Thornbury	28
23 January 9, Greenfield Centre, Winterbourne	42
28 January, Jubilee Centre, Bradley Stoke	64
30 January, Longwell Green Community Centre	56
10th February, Shireway Community Centre, Yate	17
27 January, Kingswood Civic Centre (organisations)	62

In total across these events 3,204 individual comments were recorded which are summarised throughout the *"0 to 25 SEN and Disability Service Engagement Report"*.

Section 3 – Identification of Equalities Issues

This section incorporates the feedback received via consultation in order to assist in the identification and analysis of equalities issues.

Vision and Core Principles

As part of the engagement workshops, participants were asked to consider the proposed vision for the new service.

“every child and young person with a special educational need or disability is to be given the best chance to succeed in life by enabling them to maximise their potential at school and college, and to move successfully into adulthood: finding work, living independently and participating in their community.”

Overall there was strong support for the vision with 85% of survey respondents stating that they agreed with it.

The consultation papers highlighted 12 core principles which would guide the work of the new 0 – 25 Service. The twelve core principles ran as a consistent thread throughout the engagement process.

When asked specifically, 90% of survey respondents stated that they agreed with the twelve core principles.

The following shows the 12 core principles:

1. Person centred
2. Outcomes focused
3. Enabling and inclusive
4. Enabling independence
5. Preparing for adulthood
6. Proportionate to need
7. Integrated assessment process and single plan
8. Clear and transparent
9. Timely
10. Safe
11. Excellent communications
12. Key Working

The Children and Families Bill was based on feedback from a range of parents groups and the Council for Disabled Children and these Core Principles reflect this wide ranging feedback and will therefore ensure that the need to change how services are developed and delivered for SEND children and their families will meet the overall vision for the service.

How will this new service be different?

Children and young people will be at the heart of the system. This will have a very positive impact on the service that children and young people will receive, as it will enable the single plan to be specific to individual needs, focussed specifically on outcomes. The principle of identifying and delivering against individual needs fits particularly positively in respect of equalities, as the core purpose of equality is that of treating individuals according to their needs.

Parents, carers and service users will receive a clearly defined level of support. This will enable people to have clear information as to what they can expect from the services offered and the outcomes the services will be working towards with children and young people. A clear emphasis on the clarity of information is highlighted as this will enable an inclusive approach to be taken, meeting the needs of each individual.

There will be close cooperation between all the services that support children, young people and their families through the joint planning and commissioning of services. This ensures that service users have a voice in the identification of gaps in provision and therefore have a positive influence on continuous improvement and development.

The new service will have a particular drive to identify children and young people with special educational needs and disabilities early. This will ensure the outcomes the child needs to meet will be identified and worked on at the earliest opportunity.

Children and Young People will benefit greatly from this as it will mean SEND children and young people will now not need a diagnosis to request the support offered through the Single Assessment Framework (SAF) as we will have close working with those involved in SAF process.

A clear and easy to understand 'local offer' of education, health and social care services will be provided to support children and young people with special educational needs and their families. This information will be available to all children and young people with SEN.

Children and young people with more complex needs will receive a coordinated assessment of needs and a new 0 to 25 Education, Health and Care Plan (EHC Plan). This will, for the first time, give new rights and protections to 16-25 year olds in further education and training comparable to those still in school. Implementation of this will assist young people to prepare for adulthood and will support them to meet their aspirations.

There will be a joined-up focus on outcomes for children and young people from education, health and care. This will work towards their health, education and care needs and plan for a clear pathway through education into adulthood, including finding employment, living independently and participating in their community. This removes the need for separate transition planning as it will be integrated within the EHC Plan in co-production with service users.

There will be increased choice, opportunity and control for parents and young people including a greater range of schools and colleges for which they can express a preference and the offer of a personal budget and direct payments for those with an Education, Health and Care Plan. Working to achieve this will give families a greater say in the services their families will receive.

There will be increased inclusion through co-production as a result of the 'team around the child' process. A skilled lead-professional will provide knowledge and guidance around the local offer as well as eligible services accessible which will enable children and young people to meet their desired outcomes.

Who is the service for?

The number of children and young people with additional needs is difficult to accurately define due to the complexity of that population and validity of data & double counting. However, in South Gloucestershire Council we know that;

1,352	Children & young people are identified as having Special Education Needs (SEN) at school action plus
3,236	Children & young people are identified as having Special Education Needs (SEN) with school action
1,058	Children and young people with statements of SEN (Jan 2013)
706	Children and young people with Statements of SEN attend mainstream schools
352	Children and young people with Statements of SEN attend a special school
76	Children and young people with Statements of SEN attend independent and non maintained special schools
2	Children with Statements of SEN attend registered early years education settings
11	Children with Statements are Elective Home Educated
1550	Disabled children and young people receive Disability Living Allowance
234	Children & young people are identified as having a disability within social care
9	Children & young people are identified as having a disability with a child protection plan in social care
12	Children & young people are identified as having a disability who are in care
360	Children and young people are currently members of the Disabled Children's Network
140	Children and young people access services from the Sensory Support Service
245	Children and young people access the Child Health and Disability service
29	Children and young people who are in care access out of county/independent non maintained placements
173	Adult 19-25 with a Learning Disability
32	Adult 19-25 with a Physical Disability
60	Adult 19-25 with a Mental Health Disability

The service is for all children and young people aged 0-25 with special educational needs or disabilities and their families who meet the eligibility criteria for an EHC assessment and not just for those children and young people who have a statement of special educational needs, as defined below. The new service will enable those with responsibility to identify and support children and their families to do so in a more cohesive continuum. It will provide a graduated response to identified needs and will provide a clear overview of the range of provision that settings will be expected to provide from early identification of a difficulty in a measured and timely response. To decide the type of assessment and therefore support a child or young person is eligible for, the council intends to use the following eligibility criteria:

The child/young person meets the criteria of the Children and Families Act for a statutory Education Health and Care assessment or where the child is under five and notification has been given by health professionals that they have difficulties that are likely to result in significant special educational needs in the future.

The SEND Green Paper published in 2011 was clear that under the proposed new system: *“...all children who would currently have a statement of SEN or learning difficulty assessment would be entitled to a new single assessment process and ‘Education, Health and Care Plan’ to identify their support needs”*.

The Children and Families Act has not changed the definition of a special educational need. Under the Act the legal definition of when a child requires an Education Health and Care Plan is the same as that for a statement under the Education Act 1996. Therefore no child or young person should lose their statement or Learning Difficulty Assessment and not have it replaced with an EHC plan simply because the system is changing.

The normal expectation is that children and young people with statements will transfer to an EHC plan. However, just as a local authority may decide that a child or young person no longer requires a statement (for example, where special educational provision beyond what is normally available is no longer needed either because a child’s/young person’s needs have changed or because the services required can be provided without the need for a statement), a local authority may decide, following an appropriate review and discussion with parents/the young person, that an EHC plan is not required.

An EHC plan will be implemented where a child/young person has a significant learning disability and/or an enduring complex health condition or impairment which significantly affects, or is predicted to affect everyday life functioning of the child/young person’s development and complex family circumstances which affect the ability of the child/young person to reach their full potential. Outcomes identified to improve their life opportunities through the integrated EHC assessment process a single plan will be developed which will help the child reach this potential.

Disabled children and young people are extremely vulnerable and are more likely to be abused or harmed than their non disabled peers; the research nationally about this is well documented. The Council has provided a comprehensive, proactive safeguarding service to disabled children for over 7 years and in this time has developed excellence of practice in this area and will continue to do so, ensuring that continuous improvement is ingrained within the new service.

There are statistically more boys and young men affected by disability than girls and young women. Autism is anecdotally more prevalent in South Gloucestershire. The new service will ensure that mechanisms for monitoring the outcomes of boys and girls are in place in order that checks can be made in respect of success. This will also be the case in respect of Race.

The new arrangements under the Children and Families Bill will not have a significant impact on the thresholds for targeted, high level interventions. The reason is that the existing legislation – Children Act; Chronically Sick and Disabled Persons Act; Care Act; Carers and Disabled Children Act, and Children and Families Act will remain on statute and will continue to be used to underpin all assessments and interventions with service users of the new 0-25 service.

To be eligible for a social care service as a child or adult, a young person’s needs must be ‘eligible needs’ within the council’s eligibility criteria. Those young people will need to consider alternative support once they become adults. In such circumstances the service will provide support in planning for adult life to provide a seamless change of services.

In respect of consultation conducted, the majority of respondents agreed with the proposed eligibility criteria for the new service, there were some concerns that the eligibility criteria would be used as a way to reduce the amount of support available and who could receive it as a result of funding pressures. There were also questions about the specific details and how it would operate in practice. For those children and young people who don't meet the 0-25 eligibility criteria, options to access support to meet outcomes will be available through the Local Offer and through the SAF process will be available

Survey response: How strongly do you agree or disagree with the proposed eligibility criteria for the new 0-25 service for children and young people with special educational needs or disabilities?

26%	Strongly agree	16%	Neither agree or disagree	5%	Strongly disagree
37%	Tend to agree	5%	Tend to disagree	11%	Don't know

Respondents agreed with tailoring support to need and welcomed support packages that were flexible and tailored to individual children's needs and could adapt if circumstances changed.

Survey response: How strongly do you agree or disagree with how support is proposed to be tailored to need?

42%	Strongly agree	16%	Neither agree or disagree	0%	Strongly disagree
42%	Tend to agree	0%	Tend to disagree	0%	Don't know

Integrated assessment and single plan

When specifically asked, 74% of respondents agreed with the proposed approach to the integrated assessment and single education, health and care plan in South Gloucestershire.

From the feedback received through the engagement process, respondents made the following points about the assessment process:

Feedback Received	Response
<p>Timely assessments and getting an early and prompt diagnosis was felt to be essential to getting the appropriate proactive support in place as quickly as possible rather than waiting for reactive interventions when things reach crisis point. There was a general feeling that assessments currently take too long, are not joined up and start too late.</p>	<p>As reflected by 74% of respondents from the engagement process the implementation of the integrated EHC assessments and single plan will require a reduction in the timescales. The assessment process and work with families will have an aim to be completed by 6 weeks. This will also ensure the assessments are integrated and co-ordinated to meet the timescale of 20 weeks.</p>
<p>Respondents wanted a way to easily access assessments, with clear routes in and referrals and transparent thresholds and eligibility criteria.</p>	<p>The Local Offer will publish clear pathways to an EHC Plan as well as needs indicators. This will be accessible to all through our Local Offer. 64% of respondents to our consultation requested the availability of online support and our Local Offer will be available online.</p>
<p>There was a desire to see parents listened to and fully involved in the assessment process and their role as experts in their child recognised and respected.</p>	<p>Parents and carers have indicated a range of support they will need to support them through the assessment process. A total of 71% want face to face and written guidance to assist them through the process as well as 43% requesting training which will be provided and 64% would like online support.</p> <p>Training has also been requested by staff working in this area, the preferred route (85%) is through training and professional development, 62% through guidance documents and 54% by their manager.</p>

Feedback Received	Response
<p>There was general support for some form of self-assessment as the initial first step although it was recognised that parents would need appropriate information and support to enable them to do this.</p>	<p>A self-assessment form has already been developed as an initial first step in the EHC assessment process and information will also be developed to support parents and carers.</p>
<p>Parents were keen that assessments were undertaken in partnership with them rather than it being a process done to them.</p>	<p>A self-assessment form for parents, carers and service-users to inform us of their views at the initial stages of the assessment and this will continue into the plan where our process will be a 'team around the child/young person' approach.</p>
<p>There was general support for assessments taking place in environments where the child feels comfortable such as the home, nursery and school and for these opportunities to be used for simultaneous assessments by a range of professionals.</p>	<p>The Assessment Co-ordinator role plan to hold TAC meetings in the most appropriate settings for the Child and Young Person. Plus our ICT solution will look at assisting other professionals to 'call in' to the meeting if they are not able to attend.</p>
<p>Parents wanted assessments to be easily accessible in terms of location, transport and times, with adequate notice which took into account working patterns.</p>	<p>As we want to ensure we have a successful TAC approach to this work we will ensure assessments are accessible in terms of location, transport and times. Meetings will be planned with adequate notice which takes into account parents and carers working patterns.</p>
<p>Some respondents had concerns about who would have access to the information contained within the assessment, how it would be used and data security.</p>	<p>Parents, carers and young people will be able to agree whether they want to share their information – unless it relates to a safeguarding issue. Protocols between agencies will be developed as to who would have access to the information contained within the assessment, how it would be used and data security.</p>
<p>Respondents tended to be sceptical that the current IT arrangements would enable effective multi agency data sharing and communication between professionals. This was an area that was felt to be key to the success of a joined up assessment process.</p>	<p>Our ICT service will develop a robust ICT solution with all of the agencies involved in the integrated EHC assessments and the single plan.</p>
<p>Parents wanted professionals to have access to and have read previous assessments so that they were fully aware of the situation and circumstances when they undertake further assessments reducing the need to repeat information.</p>	<p>We will ensure that in the future our ICT solution will endeavour to allow previous assessments to be accessed by the Lead Professional who will be working directly with children, young people and their families.</p>

Feedback Received	Response
Parents wanted to be kept fully informed about the assessment process and have the results explained to and shared with them and other people involved in the care of their child in a clear and understandable way.	This is will be core to the development of the EHC assessment and single plan. Information will be offered to assist with this process as well as sign off from the young person and parents as appropriate.
There were some concerns about the resources required to undertake assessments and whether the staffing, knowledge and systems were in place to support joined up assessments.	There will be a range of professionals within the 0-25 team who have a secure knowledge base and experience. Also, the 0-25 team will receive core training to meet the requirements of the 0-25 service.
Parents were keen that assessments were portable across settings and authority boundaries if they move home, school or provider.	All settings will be expected to work within the integrated EHC assessment framework and single plan. Other local authorities will have this way of working in place by the 1 st September 2014.
There was support for assessments taking place in early years settings and for there to be better coordination when children start school to ensure a smooth handover.	Early years settings will be expected to work within the integrated EHC assessment framework and single plan. We expect this will improve co-ordination between schools.
There were some questions about how this related to the Common Assessment Framework (CAF) and privately commissioned assessments.	Those children and young people who do not meet the 0-25 eligibility criteria, options to access support to meet outcomes will be available through the Local Offer and through the SAF process (the SAF will replace the old CAF).
Timely assessments and getting an early and prompt diagnosis was felt to be essential to getting the appropriate proactive support in place as quickly as possible rather than waiting for reactive interventions when things reach crisis point.	The 0-25 service will provide timely assessments. We will work proactively with partners from the statutory agencies to expect a prompt diagnosis. As noted by parents we want to offer families support to meet outcomes rather than interventions when things reach crisis point. Work will continue with health partners to ensure the integrated EHC assessments and single plan reviews include diagnosis as appropriate. Also access to local offer and core services will not be dependent on diagnosis
There was a general feeling that assessments currently take too long, are not joined up and start too late.	Assessments will reduce from 26 weeks to 20 weeks and the summary of assessments will be integrated with specific outcomes identified for Children and young people.

Feedback Received	Response
<p>Respondents wanted a way to easily access assessments, with clear routes in and referrals and transparent thresholds and eligibility criteria.</p>	<p>A single route of entry from all referrals will assist in clarity of referral for families. This will be widely advertised and First Point will act as a 'one stop shop' for queries for SEND. Capacity within First point will be increased so support to make a referral or to be signposted to the local offer services can be offered to families.</p> <p>Parents, carers and service users will receive a clearly defined level of support. This will enable people to have clear information as to what they can expect from the services offered and the outcomes the services will be working towards with children and young people. We are working towards families being able to access their EHC on line.</p> <p>A clear emphasis on the clarity of information is highlighted within the EHC forms and guidance. This will enable an inclusive approach to be taken, meeting the needs of each individual.</p> <p>Signposting to local offer services will be central to the 0-25 philosophy of working.</p>

The Local Offer

The Local Offer will be the basis of where all early identification and support is focused. Eventually this will include Early Years settings, FE colleges as well as maintained schools. It will also include what services are open to all 0-25 service users, from Health resources as well as Education and Social Care.

There are two key purposes to the local offer:

- To provide clear, comprehensive and accessible information about the support and opportunities that are available; and
- To make provision more responsive to local needs and aspirations by directly involving children and young people with SEN, parents and carers, and service providers in its development and review.

Further Points of Information:

- Our proposed approach to the local offer was supported by 85% of respondents in our recent engagement exercise.
- Feedback and ongoing engagement with users and professionals will support the implementation and on-going development of our Local Offer and we will ensure this is available and co-ordinated through a range of methods; face to face, telephone, and written in addition to the development of our online feedback routes.
- We will also find ways for people who cannot access or use the internet to know what help there is:
 - Developing the service to ensure that information is co-ordinated from the different agencies/ professionals
 - Information will be available/ accessed via our One Stop Shops, Libraries and Locality Hubs.
 - Annual focus groups /engagement events and activities will inform the on-going development.
 - Regular user feedback will support the continual improvement.

Key features of the local offer

Respondents were keen that the local offer had the following features:

Feedback Received	Response
Contains relevant, comprehensive, accurate and up to date information, although respondents were keen to avoid information overload	All engagement/feedback is now informing/influencing our implementation and development plans for the Local Offer. Progress and updates on future developments will be part of our ongoing communication plan and we are working with our parents and carers to implement, test and develop our information.
Ability to save, export and store information for future use or reference	
E bulletins and alerts	
A way to access the information offline and for people who do not have internet access, possibly via a helpline	Our channel and digital inclusion strategies sets out the principles by which South Gloucestershire Council will deliver its services to the public through both current and future emerging channels.
Accessible from a variety of venues including; libraries, children's centres, hubs, one stop shops, community groups, schools and other organisations	
Well promoted to both parents and professionals	Included in our communication plans.
Provides links to other detailed or more specialist information on other websites	The Local Offer will include links to relevant supporting information. Feedback we receive will inform the development of this area.
Glossary of technical terms	All engagement/feedback is now informing/influencing our implementation and development plans for the Local Offer. Progress and updates on future developments will be part of our ongoing communication plan and we are working with our parents and carers to implement, test and develop our information.
Clear easy to understand language, free of jargon and technical terms	
Logical and intuitive to use, well presented, attractive and accessible design and layout	
Discussion forum where users can ask questions and share information with other users	
Calendar of events, activities and training opportunities open to both parents and professionals	A pathway for the 0-25 Disability service has been developed and will be published as part of the Local offer together with supporting key notes for all to access.
Flow charts or process maps including checklists (a map of the minefield and what to expect)	

Organisation and structure of the local offer

Respondents wanted to be able to find information in a variety of ways including:

Feedback Received	Response
Easy to use and comprehensive search by key words and terms	All engagement/feedback is now informing/influencing our implementation and development plans for the Local Offer. Progress and updates on future developments will be part of our ongoing communication plan and we are working with our parents and carers to implement, test and develop our information.
Suggestions based on frequently asked questions, other peoples searches and page views	
A to Z	
Glossary of key terms	
What's new	
Information organised by:	56% of respondents wanted information organised by theme and 56% by key milestones and life changes - this feedback will inform our approach to the high level structure.
Condition, disability or behaviour	
Age	
Key milestones and life stages	
Key themes such as health, education, transport	
Location of services and support	
Service type and provision	
Universal or specialist support, linked to eligibility level	
Provider	

Information needs and topics to be included in the local offer

Respondents told us that they would want to be able to access the following information from the local offer:

Feedback Received	Response
Assessment and planning process	All engagement/feedback is now informing/influencing our implementation and development plans for the Local Offer. Progress and updates on future developments will be part of our ongoing communication plan
Breaks and respite care	
Child care	
Complaints and appeal processes	
Comprehensive information about schools and the services and support they provide	
Contact information for providers and professionals (names, phone, email and website details)	
Directory of clubs, charities and support organisations	
Discounts and special offers	
Early years provision	
Eligibility criteria and thresholds	
Emergency out of hours provision and support to deal with situations and crisis support	
Events and training opportunities	
How to access services and the eligibility criteria for them	
Info about specific conditions and specialist advice specific to them (or links)	
Information about specific life stages including a guide of the process, check lists and what to expect	
Information on benefits and entitlements	
Information on how to apply for blue badges, bus passes and radar keys	
Out of area services and provision	
Pathways to diagnosis (who to go to, where and when)	
Peer, sibling and family support groups	
Personal budgets	
Post diagnosis support	
Referral process	
Safe guarding	
Self assessment tools	
Specialist services such as occupational therapy, physical therapy, speech and language therapy	
Techniques, processes and mechanisms to deal with or manage conditions, circumstances and behaviours	
Transport options and providers	
Who does what and their responsibilities	

Involvement in developing the local offer

Respondents suggested the following as ways to involve parents/carers and professionals in the ongoing development of the local offer:

Feedback Received	Response
Feedback page	Feedback is welcomed in any format – with 95% of respondents indicating their preference for online response.
Discussion forum	All engagement/feedback is now informing/influencing our implementation and development plans for the Local Offer. Progress and updates on future developments will be part of our ongoing communication plan
Suggestions page	
Parental focus groups	
Regular monitoring and review of customer satisfaction, compliments, complaints and suggestions	
Pilot information with staff, parent/carers and young people	
Regular engagement with parent carers/families and young people via user groups, events and activities	
You said – we did feedback	

How will support be tailored to need?

Current criteria used by the various agencies and services will be combined into a set of indicators of need. There will be information on where the suitable support will be accessed. The work of combining all of the various services will need to be carried out in stages. The first stage has been supported by an outside agency – IPC, part of Brooks University.

The first stage has been to set out a hierarchy of needs arranged across four tiers. These are set out as “indicators” and are comprised of individual descriptors.

Tier 1, the person would have no particular needs. The Education and Care needs will be none or minimal and any periodic support will be within the remit of what settings provide. This will be set out as universal services – elsewhere, as being what every child, young person or young adult can expect to receive from a setting or service.

Tier 2 sets out identified needs that will be able to be addressed through the setting from within its own resources or local services once the need has been identified. This is the range of provision comprising the Local Offer and will involve the person and family liaising with the setting/service to have some element of additional or differentiated support or provision and have their responsibilities clarified. It may be a young learner requiring some differentiated support or some additional social support for a period of time, as a result of a need being identified. The person’s progress will be monitored against the outcome set for the additional or different support and where this is subsequently met, this support can be ceased.

Tier 3 identifies where the person/family is experiencing long term issues that impact upon the person’s ability to make progress against expected, suitable outcomes, even with suitable support having been implemented, monitored and reviewed. It is increasingly likely the person will require support beyond that which is ordinarily available from within a setting’s own resources, even with advice or involvement from outside agencies. It may be appropriate at this stage to carry out an integrated assessment in order to identify specific outcomes and support needed and to coordinate this through a single plan. The assessment may indicate support that can be accessed from the Local Offer or universal services therefore will not require a plan. However, where additional support above the Local Offer is required, or specialist services are indicated as being necessary, a plan will be agreed and drawn up with the person and family.

Tier 4 sets out descriptors of the most severe and complex needs, for whom multi-agency working is necessary and for whom a clear, coordinated plan is essential as the needs indicate specialist provision is required.

What will be in place is anticipated to be a document that links with the Local Offer for Tiers 1 and 2 in respect of maintained schools. It will have descriptors that indicate typical levels of need at Tier 1 and 2

Tier 3 and Tier 4 combines the current SEN and CHAD criteria of need as “indicators” and makes use of Children’s Safeguarding documentation. The current SEN documentation and CHAD documentation that charts how provision is to be made will remain in place for the time being.

A further stage of the indicators document will be SEN descriptors in more detail so that it will be available to help plot where on Tier 3 or 4 a person’s needs sit.

Support will be proportional to identified need. At Tiers 1 and 2, the setting or service identified as appropriate will decide the outcome and provide the suitable level and type of support. Where the Tier 1 and 2 support is proven to be insufficient and it is deemed necessary for the individual to have a single plan, that document will set out the outcomes to be achieved and the types of support required. The information will be drawn from the advice givers' recommendations and will be set out/tailored in consultation with the young person and their responsible adult (parent/carer).

Where a person requires provision that is specialist and is likely to require a specialist setting, the Local Authority will need to ensure this is provided (and is in line with parental preference unless there is a reason why not). The issue may arise that there is insufficient specialist provision within the home local authority area – either because there are not enough spaces at a local setting or because the LA does not provide the particular type of setting. In such cases, where no local setting can be adapted to be suitable, it becomes necessary to look to make provision at another local authority's setting (OLA). This usually also involves providing transport as the distance is often a factor.

If there is no LA or OLA provision available, either no vacancies or the specialist need is for a residential element, it becomes necessary to look into the independent and non-maintained sector. In all cases, the setting being considered will need to indicate that it can meet the needs of the person. It may be required for the setting to set out how it will make the provision for the person.

There is an SEN Review currently underway that may make a range of recommendations about what provision this LA needs to increase or change. It is noted that there is a particular shortage of specialist ASC placement, which is causing high expenditure.

A database is kept of every person requiring a statement and this enables scrutiny by needs type, age, gender, provision given, setting placement, CIC and can be used to identify trends. The same type of database will be developed for EHCP but will be able to be added to in order to capture the wider range of needs (Health and Care).

Key Working

The overall aim of key working is to ensure a personalised approach to the provision of care and support to meet the individual needs of the child or young person and their family.

Families and the young person will have a say in who may provide key working support. The person providing key working support:

- may be a health, education or social care professional or may come from the voluntary, community or independent sector (or it may be provided by the parent carers or young people themselves)
- should be selected according to the specific needs of the child or young person and their families
- is likely to be someone from the team working with the family, who is identified in discussion with the family, who has the skills, training, time and support to ensure that key working is effective and that the family are the pivotal part of all discussions and decision making
- may facilitate some of the required functions to be fulfilled by other members of the team working in partnership with the family
- may undertake all of the functions required by a family themselves when necessary.

The level, intensity, frequency and number of the key working functions that children, young people and their families may require is determined by a number of things, including the complexity of the package of support and the family's resilience and support networks. This is likely to vary over time. The person carrying out the key working may move in and out of this role depending upon the family situation. A different professional may be in a better position to take on key working for example at times of significant change in the life of the child or young person.

From the feedback received through the engagement process, respondents made the following points:

Feedback Received	Response
Could parents choose who their key worker is or have a say in who is assigned to them?	This is not something we could achieve if it was requested – however we will do all we can to ensure that where possible continuity is promoted through team members' knowledge of the child/young person and/or expertise from the area of need of the child/young person will be paramount.
Could parents act as a key worker with training?	No, as we cannot expect parents to be statutory responsible for meeting the outcome of EHC assessment, plan and making financial decisions on behalf of the Council.
Could you buy in a key worker using a personal budget?	Not currently as the key working way of working will be developed into the Lead Professional role.
Would families be able to drop in and out of having a key worker as needed?	Yes, and we would liaise with them as to who would complete this Lead Professional role.
How long will a key worker be assigned to a family for?	This would be flexible depending on the needs of the child/young person.

Feedback Received	Response
What happens if you don't get on with the key worker and the relationship with the family breaks down?	We are committed to this new way of working to be successful. It would depend on the reasons why not – if all avenues have been explored to improve the relationship etc. then a change may have to be considered.
If an issue is identified during pregnancy, can a key worker be assigned prior to birth to support parents?	They could be known to the 0-25 team but an assessment wouldn't start until birth. This would be different if there were safeguarding issues identified.
What difference will key working make to my family and the support we receive?	A consistent service will be offered through a named person who will be office based, even if and when the lead professional is on annual leave or unavailable due to sickness.
How does a key worker differ from key working? What are the advantages and disadvantages of the two models?	A Keyworker is a title of a team member but a Keyworking model helps families use the network of services around them efficiently. Over 70% of respondents agree with this model of intervention. They understand that Lead Professionals will act as key workers as a single point of contact when parents and carers are looking for information and can reduce stress by encouraging everyone who is in contact with a family to work better together as a group. Where families are juggling many appointments and meetings, they may also be able to help by coordinating visits to hospitals and clinics. 'Keyworking', 'Team Around the Child' (TAC) and 'key worker' services are all approaches to improving the way that services are 'joined up'. They aim to achieve better co-ordinated packages of help and advice and to keep parents and carers at the heart of discussion and decision-making about their child. This is particularly important when a lot of different services and people are involved. Keyworking is not a separate, 'add on' service but a core component of working in partnership with families and integrated service provision. It is a natural extension to the work that many practitioners already do with families with children. Keyworking improves outcomes for families and children by viewing service provision from the perspective of the people who use services and making best use of the resources available.
In future, parents wanted key working support to be of a consistently good standard, accessible when they need it, particularly at initial entry into the system, key life stages and crisis points.	This service will offer key working to support a consistently good standard of service. A core value is that it is accessible when they need it, particularly at initial entry into the system, key life stages and crisis points.

Preparation for Adulthood

The aim of the Preparation for Adulthood theme of the 0 to 25 service is that whilst managing expectations and supporting aspirations, young people will be empowered to move into adulthood successfully, including finding work, living independently and participating in their community. There will be a focus on key life skills such as financial management, travel training and preparing for employment.

Providing effective transition planning is vital as a young person approaches leaving school to enable them to achieve their hopes and ambitions for every aspect of their adult life. The service will support young adults to be active citizens in their local community.

Successful preparation for adulthood will ensure that the planning for how best to support young adults begins earlier than in current service provision. The young adult and their family carers will not experience undue delays or uncertainty in planning for their care as they move to access more adult focused services. They will have greater clarity about how their needs will be met and their ambitions achieved as young adults in the 0 to 25 service. The service will smooth out what has traditionally been seen as the complicated and confusing move from children's to adult services.

There will be a comprehensive workforce development plan to support staff to acquire the skills and knowledge needed to deliver advice and support to young adults and their families. The workforce development plan will continue to support the staff beyond the implementation date of the new service.

The majority of respondents from the engagement and consultation process undertaken by the Council (79%) agreed with the proposed approach to preparing for adulthood. There were no responses which disagreed with the proposal. 16% neither agreed nor disagreed and 5% replied don't know.

Feedback from Engagement

From the feedback received through the engagement process a number of points were made about preparing for adulthood. The table below lists the comments with a response.

Feedback Received	Response
Preparing for adulthood needs to start as early as possible, but exactly when it starts needs to be flexible based on the needs and circumstances of the child and their abilities.	The service model will ensure young people and their parents are at the centre of planning for their future and fully involved at all stages. This will include agreeing when active planning for adulthood is best started.
This preparation should be well planned and implemented and phased in gradually. It should focus on the holistic needs of the child and not be focused on one area (e.g. education). It was recognised that change if done badly or suddenly can be disruptive and stressful.	Education, Health and Care Plans for young people will be living documents that evolve to reflect the stage of development of the young person. The plan will be person-centred, aspirational and focused on life outcomes. In the main they will be used from year 9 to inform future provision to successfully support young adults. This approach will mitigate against any undue disruption.

Feedback Received	Response
<p>Preparing for adulthood should fully involve and engage with young adults and their parents. It should be a process of working together with the family not something done to them and should take into account their wishes, expectations and aspirations.</p>	<p>The service will work with parent carers and with young adults to enable young people to co-produce their person centred ECH plan. As such they will be fully involved in developing their plan in a format that is accessible to them. All plans will be aspirational in developing a clear pathway through education into adulthood.</p>
<p>It was recognised that preparing for adulthood also involves changing responsibilities and challenges for parents and that they would welcome more information and advice to support them as well as their child.</p>	<p>The information and advice available will be clearly expressed through the local offer. The range of education, care and health services options available for the young person and their family will be fully explored earlier than is the current case. This will enable the young person and their family to be better informed and equipped for the move into adulthood.</p>
<p>There was a particular need for more information on the broadest range of opportunities, choices and support available, the benefits system, capacity and capability assessments, specialist and out of area support.</p>	<p>As the discussions about the move into adulthood will begin earlier there will be more opportunities to explore with a young adult and their family the most suitable support available so they have choice and control over their lives. This will include when relevant consideration of the impact of the welfare benefit system, access to local services and the application of the Mental Capacity Act if appropriate.</p>
<p>Some respondents were keen to see a young person's advocate or independent adjudicator who could provide support especially through appeals and when second opinions were needed.</p>	<p>The service will be able to access independent advocacy for young adults when required via the generic advocacy service commissioned by the Department from the Care Forum.</p>
<p>There was felt to be a gap in age appropriate service provision and support for young adults and it was hoped that commissioning and the use of personal budgets would help address this.</p>	<p>As the service aim is to enable young adults to have greater choice and control over their lives there will be the opportunity to encourage the use of personal budgets to promote the development of age appropriate services. The information available from ECH plans will be used to inform the planning and commissioning of services based on identified needs.</p>

Comment	Response
<p>Supporting independent living was seen as essential and the following were listed as areas that should be included in preparing young people for adulthood:</p> <ul style="list-style-type: none"> • Budgeting, managing, handling money and shopping • Getting around independently, travel and transport • Forming and managing relationships, socialising and social skills • Housing options, choices and adaptations • Managing a home, cooking and cleaning • Looking after yourself, managing conditions, medication and personal hygiene • Employment advice and options, interview and other employment skills, work placements • Accredited training courses and qualifications • Building confidence and self esteem • Safeguarding and personal safety, considering dangers and preventing exploitation, abuse or fraud 	<p>Young people and their parents will be at the centre of planning for their future and fully involved at all stages. The service will work across agencies to enable access to appropriate advice and support across all of the identified areas opposite as required to enable the young adult to live as independently as possible. The service will have a clear remit around adult safeguarding to ensure that young adults remain safe.</p>

Personal Budgets

Personal budgets will be available to individuals with EHC Plans as an alternative to commissioned services. They offer an opportunity for individuals and their families to exercise increased choice and control over how their agreed outcomes are met. It is proposed that we establish a recognised provider list, maintained by the council, to allow people receiving, or due to receive a personal budget to get support and advice by choosing from a list of providers who adhere to a clear quality framework, including equalities good practice. This approach will potentially benefit people from minority groups who may opt for niche providers who offer something particular in addition to allowing for greater choice and control for all children, young people and their families.

Choosing to take a personal budget or not is an individual decision; the Local Offer and trained workforce which will be put in put will ensure good access to the necessary information, advice and support to enable informed decision making.

Feedback Received	Response
Respondents wanted more information about how it would work in practice, the eligibility criteria, what it could be used for and any restrictions or limitations and whether they would be eligible.	As we develop the personal budget offer more information will be developed to help individuals understand the options available to them. This will be published through the Local Offer and training and guidance will be available to lead professionals in the 0 – 25 Team.
Transparency and the ability to know how much resource was being used to support their child’s needs was welcomed by parents.	Through the EHC Plan, transparency in resource utilisation will be improved for all. This fits directly with the principle of ensuring greater choice and control over how agreed outcomes are met.
There were some concerns about how personal budgets would impact on the budgets for health and schools and affect how much could be spent commissioning universal services or making other services unviable as parents chose other options or providers.	Not all aspects of a support package are suitable for personal budgets, schools will to agree if part of the budget is to be used within school. The use of personal budgets will impact on previously block funded providers but those that respond to customer demand will flourish.
Some respondents felt that the use of personal budgets would make the system more efficient and was more preferable than a one size fits all approach, whilst others were concerned that purchasing lots of individual services would be more expensive as they would not benefit from economies of scale.	The Council and CCG will continue to purchase support those who choose that option. Very often, personal budget holders can be more creative in how they use their funding and make it go further.
There were questions about how personal budgets relate to benefits, direct payments and whether they would be means tested and form part of tax returns.	Direct payments and personal budgets are not means-tested.

Feedback Received	Response
Some parents were concerned that personal budgets were a big responsibility and would be a burden which would mean more work for parents who were already under enough pressure.	No one who does not want a personal budget will be required to take one. In addition the Council is developing approaches which make management of the budget as simple and straight forward as possible for all who choose this route.
The ability for a family to choose and decide on the best way to support their child's needs and to get it flexibly when it suits them was welcomed by parents	The approach taken by the Council allows flexibility, choice and control for all.
It was suggested that parents would need support, training and advice about how to use a personal budget, especially if they had to directly employ people and some would find guidance from a key worker to be beneficial. Comprehensive information in the local offer was seen as essential.	Support, information and advice will be made available both directly by the Council through its local offer and lead professionals in the 0 – 25 Disability Team as well as via a recognised provider list.
Respondents felt that a payment card would be simple and easy to understand and use, whilst keeping records so that expenditure can be easily monitored.	The payment card approach taken by the Council allows flexibility, choice and control for all.
There were questions about how a personal budget would work for young adults post 16/18/25 and what support would be provided to them to help them manage them.	Whilst the value of a personal budget can change, as can the outcomes that it is designed to achieve, the support arrangements have been developed to offer continuity. This offers clear benefits to those young people wishing to take on management of their own personal budget.

Joint Commissioning

Joint commissioning in the context of the 0-25 Disability Service requires local partners to identify outcomes that matter to children and young adults with special educational needs or disabilities and their families and then, working in partnership to plan, deliver and monitor services against those outcomes.

The development of joint commissioning plans are based on a detailed needs assessment which incorporates analysis according to protected characteristics.

Feedback Received	Response
<ul style="list-style-type: none"> • Respondents recognised the need to make sure that systems and resources are in place to support the commissioning process especially information sharing and the identification of needs. • Flexibility and choice are important. • Respondents were keen to see value for money and quality in commissioning. • There were questions about how commissioning would work across, education, health and social care and how existing contracts would be affected by commissioning, how it would be phased and the arrangements for any transition period. • Some respondents had concerns about funding reductions, blurred responsibilities, overlap and duplication, whilst others saw commissioning as an opportunity to provide more flexible and joined up services. 	<p>A Joint Commissioning statement will be published on our Local Offer outlining our approach over the next 12 months. Commissioners already work closely together and in some instances already jointly commission services. Joint commissioning priorities will in part be influenced by the timescales associated with existing contracts. Within our approach to joint commissioning it will be important to ensure that a more diverse and vibrant market does not allow for some providers to fail to respond the needs of individuals from minority communities.</p>
<ul style="list-style-type: none"> • Involvement of families and service users are critical to identifying needs and priorities and getting feedback on the quality of services provided. It was felt that services needed to consider the needs of the child and family holistically. • Some respondents were concerned about managing expectations and demand. 	<p>Effective commissioning can only deliver outcomes when people who use services and their families / carers are involved through co-production. This is already recognised in South Gloucestershire. The Commissioning theme group as part of the 0 – 25 Disability Service has parent/carer representation.</p>

Feedback Received	Response
<ul style="list-style-type: none"> • There were questions about how the performance of providers would be monitored and how poor performance would be tackled and dealt with • It was felt that transparency about the commissioning process, criteria, thresholds, resources, outcomes and performance was important if people were to have confidence in it. 	<p>Commissioners have robust quality and performance mechanisms in place, these arrangements are continually being reviewed. There is an increased focus on building user feedback into quality monitoring.</p>
<ul style="list-style-type: none"> • Respondents wanted access to good information about what is available, provided and alternatives 	<p>The local offer is designed to address the need for the provision of good information and guidance</p>

Services, staffing and resources

This issue was covered as part of the consultation conducted. The following comments were received:

Feedback Received	Response
<p>It was felt that the views of parents are not listened to and their experience as experts in their child is not appreciated by some professionals. They described the process as something that is done to families rather than fully involving them.</p>	<p>We recognise this has been the case. We have worked very closely with SGPF to ensure the development of the EHC assessment documentation and single plan is person centred and does fully involve families. This will be tested with a small group of children and young people commencing in May 2014 and outcomes will influence equalities approaches. Where appropriate.</p>
<p>Some respondents commented that support is very reactive rather than proactive and that more needs to be done to support early intervention. There were also comments about how the needs of the child and family are not considered holistically, rather each service tends to look at their part in isolation, resulting in opportunities being missed</p>	<p>The Government have recognised this in the development of the Children and Families Bill. As a direct result, our services will be re-structured to bring together a new 0 – 25 Service, providing high quality coordinate Children, Young People and Family centred services which respond to needs and adopt a preventative and early help approach.</p>
<p>Respondents recognised that the system is really complicated and that more information could be provided to help people through it. Some people commented that it was an uphill and constant battle to get the support that they need and that some people have given up.</p>	<p>Through the Local Offer, this point will be directly addressed and will be available to all.</p>
<p>There were concerns about staff capacity, high workloads and unmanageable caseloads which would make implementing the changes difficult.</p>	<p>The 0-25 service will have increased staffing capacity and administrative resources. The service will work to complete assessments in a reduced time from 26 to 20 weeks.</p> <p>The new service will be more effectively co-ordinated as we will be now one team and have a joined up ICT system which works across education, health and care.</p>
<p>There was a general call for more training for staff to support the introduction of the new system and for better knowledge and awareness of specific conditions and how to identify, manage and deal with them (particularly in schools and early years settings).</p>	<p>This work has already started, Plans have been developed to implement a training and development plan before the 0-25 service will commence in September 2014.</p>

Section 4 – Analysis of Equalities Issues Emerging

Vision and Core Principles

There are no equalities issues emerging which indicate any potential for adverse impact in this area. In addition, it is noted that the vision and core principles offer the opportunity to advance equality of opportunity for all through the clearly stated desire to ensure that the new 0 – 25 Disability Service is person centred and inclusive for every child and young person with a special educational need or disability.

How will this new service be different

This aspect of the proposed new service displays that equality of opportunity is integrated throughout the service activity, evidencing that:

- The single EHC Plan will be specific to individual needs, focussed specifically on outcomes. The principle of identifying and delivering against individual needs fits particularly positively in respect of equalities, as the core purpose of equality is that of treating individuals according to their needs.
- Close cooperation between all the services that support children, young people and their families ensures that service users have a voice in the identification of gaps in provision and therefore have a positive influence on continuous improvement and development.
- The Local offer has a strong focus on accessibility, clarity and understanding of what is available. This will enhance children, young people and their family's ability to ensure their own independence, choice, and control.
- EHC Plans will give new rights and protections to 16-25 year olds in further education and training comparable to those still in school. Implementation of this will assist young people to prepare for adulthood and will support them to meet their aspirations.
- Transition planning will be integrated within the EHC Plan in co-production with service users ensuring a more effective process for children and young people.

Who is the service for?

The service is for all children and young people aged 0-25 with special educational needs or disabilities and their families who meet the eligibility criteria for an EHC assessment and not just for those children and young people who have a statement of special educational needs. The SEND Green Paper published in 2011 was clear that under the proposed new system: *"...all children who would currently have a statement of SEN or learning difficulty assessment would be entitled to a new single assessment process and 'Education, Health and Care Plan' to identify their support needs"*. The Children and Families Act has not changed the definition of a special educational need. Under the Act the legal definition of when a child requires an Education Health and Care Plan is the same as that for a statement under the Education Act 1996. Therefore no child or young person should lose their statement or Learning Difficulty Assessment and not have it replaced with an EHC plan simply because the system is changing.

There are statistically more boys and young men affected by disability than girls and young women. Autism is anecdotally more prevalent in South Gloucestershire. The new service will ensure that mechanisms for monitoring the outcomes in relation to:

- boys
- girls
- ethnicity
- impairment/disability type
- age

are in place in order that checks can be made in respect of success.

How will support be tailored to need?

Support will be proportional to identified need and the hierarchy of needs arranged across the four tiers, set out as “indicators” comprised of individual descriptors provides a structure for this work.

In addition, the monitoring and scrutiny of data in respect of every person requiring a statement by needs type, age, gender, provision given, setting placement, CIC will be used to identify trends and plan appropriate actions. The same type of monitoring will be developed for EHCP and will be extended in order to capture the wider range of health and care needs.

Key Working

The impact of the Key Worker and Keyworking model is anticipated to have a positive impact due to ensuring a personalised approach to the provision of care and support to meet the individual needs of the child or young person and their family.

The Local Offer

The Local offer will provide clear, comprehensive and accessible information about the support and opportunities that are available, and make provision more responsive to local needs and aspirations by directly involving children and young people with SEN, parents and carers, and service providers in its development and review.

The proposed approach to the local offer was supported by 85% of respondents in our engagement exercise.

Feedback and ongoing engagement with users and professionals will support the implementation and on-going development of our Local Offer and we will ensure this is available and co-ordinated through a range of methods; face to face, telephone, and written in addition to the development of our online feedback routes.

We will also find ways for people who cannot access or use the internet to know what help there is:

- Developing the service to ensure that information is co-ordinated from the different agencies/ professionals
- Information will be available/ accessed via our One Stop Shops, Libraries and Locality Hubs.
- Annual focus groups /engagement events and activities will inform the on-going development.
- Regular user feedback will support the continual improvement.

Preparation for Adulthood

The proposed 0 to 25 service model is seen to have a positive impact on the delivery of services to young adults and their family carers for the following reasons:

- joining up of services, which will provide more efficient and effective support to young adults and families.
- the service will work with individuals to holistically assess their eligible education, health and care needs. As such the service will fully take into account and address any identified equality issues for the young adult and their family.
- the service model will allow for the planning for the move to adulthood to begin earlier than at present and to be a consistent feature in developing the individuals ECH plan as they progress through their developmental life stages.
- The service will smooth out the move from children's to adult services, making the process more meaningful and better planned for young adults

There is no evidence to suggest that there will be any negative impact on the protected characteristics of gender or race.

The corporate equality policies and procedures are sufficiently robust to support practitioners in the service to respond to individual service users circumstances ensuring that any equality issues are fully addressed so as to prevent disadvantage.

Personal Budgets

No individuals should be adversely affected by the increased availability of Personal Budgets. The evidence suggests that those who have the potential to benefit the most are those who have not been satisfied with the traditional offer of support, often those from equalities groups / minority communities.

Joint Commissioning

With effective joint commissioning arrangements in place there should be no adverse effect on those with protected characteristics. Strong and robust commissioning approaches are designed to ensure maximum benefit is achieved from available resources and that the needs of the entire community are understood, that people who use services are actively involved in the planning, delivery and monitoring of services. Joint commissioning offers further benefits by ensuring the better alignment of resources across organisations and the avoidance of duplication of effort.

Services Staffing and Resources

We have worked very closely with SGPF to ensure the development of the EHC assessment documentation and single plan is person centred and does fully involve families. This will be tested with a small group of children and young people commencing in May 2014 and outcomes will influence equalities approaches where appropriate.

SECTION 5 - EqIAA OUTCOME

Outcome	Response
Outcome 1: No major change required.	<input type="checkbox"/>
Outcome 2: Adjustments to remove barriers or to better promote equality have been identified.	<input checked="" type="checkbox"/>
Outcome 3: Continue despite having identified potential for adverse impact or missed opportunities to promote equality.	<input type="checkbox"/>
Outcome 4: Stop and rethink.	<input type="checkbox"/>

Reasons and Justification

The new 0 – 25 Disability Service brings services together in one place in order to implement the new EHC Plan. The SEND Green Paper published in 2011 was clear that under the proposed new system: “...all children who would currently have a statement of SEN or learning difficulty assessment would be entitled to a new single assessment process and ‘Education, Health and Care Plan’ to identify their support needs”. This means that no child/young person will be negatively impacted through any reduction/change in service.

The new 0 to 25 EHC Plan will give new rights and protections to 16-25 year olds in further education and training comparable to those still in school. Implementation of this will assist young people to prepare for adulthood and will support them to meet their aspirations. This is expected to result in a positive impact in respect of the protected characteristic of “Age”.

There will be a joined-up focus on outcomes for children and young people from education, health and care working towards their health, education and care needs and planning for a clear pathway through education into adulthood, including finding employment, living independently and participating in their community.

There will be increased choice, opportunity and control for parents and young people including a greater range of schools and colleges for which they can express a preference and the offer of a personal budget and direct payments for those with an Education, Health and Care Plan. Working to achieve this will give families a greater say in the services their families will receive.

There will be increased inclusion through co-production as a result of the ‘team around the child’ process. A skilled lead-professional will provide knowledge and guidance around the local offer as well as eligible services accessible which will enable children and young people to meet their desired outcomes.

The impact of the Key Worker and Keyworking model is anticipated to have a positive impact due to ensuring a personalised approach to the provision of care and support to meet the individual needs of the child or young person and their family.

The council has in place a full complement of equality policies and procedures corporately which are sufficiently robust to support practitioners in the service to respond to individual service users circumstances ensuring that any equality issues are fully addressed so as to prevent disadvantage.

However, Section 6 of this EqIAA, presents a range of actions for implementation. The 0 – 25 Disability Service is a new service and as such, progress will need to be closely monitored in order to analyse any equalities impacts emerging on an on-going basis. A formal analysis of data will be conducted and made available by September 2015 as set out in the action plan.

It is important to note that equality is not about ‘treating everyone the same’; it is about treating people differently and in accordance with their needs. The definition of ‘need’ cannot be applied in a ‘sweeping’ or ‘broad brush’ manner to all people by virtue of their sharing of a particular protected characteristic (e.g. ethnicity, disability, age etc.). As such, the central drive of the new service, which is to ensure a personalised approach to the provision of care and support to meet the individual needs of the child/young person and their family, supported by the council’s corporate policies and procedures in respect of equality of opportunity, is anticipated to result in positive impact for all service users regardless of protected characteristics. The success of this will be closely monitored via the implementation of the action plan shown in Section 6 of this EqIAA shown overleaf.

SECTION 6 - ACTIONS TO BE TAKEN AS A RESULT OF THIS EqIAA

Action	Responsibility	Timescale
<p>The new service will ensure that mechanisms for monitoring outcomes in relation to:</p> <ul style="list-style-type: none"> • gender • ethnicity • impairment/disability type • age <p>are in place in order that checks can be made in respect of success.</p>	Denise Porter	First set of disaggregated data available by September 2015
<p>Parents and carers have indicated a range of support they will need to support them through the assessment process. The new service will ensure that mechanisms for monitoring satisfaction in relation to:</p> <ul style="list-style-type: none"> • gender • ethnicity • impairment/disability type • age <p>are in place in order that checks can be made in respect of success.</p>	Denise Porter	First set of disaggregated data available by September 2015
<p>Training has also been requested by staff working in this area, and this will be provided through a variety of routes including training and professional development, guidance documents and via managers.</p>	Nick Thorne	Training for staff has been developed and will commence in June.
<p>A self-assessment form has already been developed as an initial first step in the EHC assessment process and information will also be developed to support parents and carers. The self-assessment form will be available from September 1st 2014 and will be published in our Local offer. All referral into the service will be asked to complete this form.</p>	Kevin Lacey	1 st September 2014
<p>Protocols between agencies will be developed as to who would have access to the information contained within the assessment, how it would be used and data security. As an authority we already have data sharing protocols with key partners and specific elements not covered by these protocols will be addressed working towards a September 2014 timeline.</p>	Kevin Lacey	September 2014
<p>Our ICT service will develop a robust ICT solution with all of the agencies involved in the integrated EHC assessments and the single plan to ensure multi-agency data sharing and communication between professionals in the future. Our ICT solution will endeavour to allow previous assessments to be accessed by the Lead Professional who will be working directly with children, young people and their families.</p>	Kevin Lacey	A full ICT system in place that allows collaboration by January 2015

Action	Responsibility	Timescale
<p>Assessments will reduce from 26 weeks to 20 weeks and the new service will ensure that mechanisms for monitoring success in achieving this in relation to:</p> <ul style="list-style-type: none"> • gender • ethnicity • impairment/disability type • age <p>are in place in order that checks can be made in respect of success.</p>	Mark Nesden	First set of disaggregated data available by September 2015
<p>Local Offer feedback will ensure that mechanisms for monitoring satisfaction in relation to:</p> <ul style="list-style-type: none"> • gender • ethnicity • impairment/disability type • age <p>are in place in order that checks can be made in respect of success.</p>	Lynne Kingdon	First set of disaggregated data available by September 2015
<p>Preparing for adulthood team will monitor how successful the service is by means of an annual service user satisfaction survey. The service will also run an annual event with service users and family carers where there will be an opportunity to consider how well the service is achieving its aims and objectives and to help identify where the service might make improvements.</p>	Kenny Braidwood	First set of disaggregated data available by September 2015
<p>We have worked very closely with SGPF to ensure the development of the EHC assessment documentation and single plan is person centred and does fully involve families. This will be tested with a small group of children and young people commencing in May 2014 and outcomes will influence equalities approaches where appropriate.</p> <p>An EqIAA will be conducted in respect of this trial and learning identified and used to inform changes as appropriate.</p>	Mark Nesden	September 2014

Action	Responsibility	Timescale
Develop needs descriptors for pre-school children.	EYISS – Paula Young and, EPS – Simon Jones	January 2015
Continue to develop closer links with the FE Sector and other local authorities in the region to coordinate work with this sector.	Christine Jamrozy	Ongoing

SECTION 7 – EVIDENCE INFORMING THIS EqIAA

Sources of evidence used for the EqIAA are:

- 0 to 25 SEN and Disability Service Engagement Report (South Gloucestershire Council, 2014)
- 0 to 25 SEN and Disability Service Consultation Paper (South Gloucestershire Council, 2013)
- South Gloucestershire Council data relating to children and young people with SEN
- The Preparing for Adulthood programme (PfA) see <http://www.preparingforadulthood.org.uk/>
- Data and performance information from South Gloucestershire
- Feedback and sample documents used from SEND Pathfinders
- South Gloucestershire Council staff consultation results.
- The SEND Green Paper published in 2011.
- The Children and Families Act
- Education Act 1996
- Children and Families Bill
- Chronically Sick and Disabled Persons Act
- Care Act
- Carers and Disabled Children Act