Aiming High for Disabled Children
Best practice to common practice
Speech, language and communication are crucial to every child’s ability to access and get the most out of education and life.
Contents

Best practice to common practice
  Introduction 2

AHDC system reform
  The core offer 4
  Disabled children’s services national indicator 4

AHDC work streams
  Parent participation 6
  Short breaks 9
  Transition support programme 10
  Palliative and continuing care 13
  Community equipment and wheelchairs 14
  Disabled Children’s Access to Childcare (DCATCH) 15
  Individual budgets (IB) 16

Wider work streams
  Better communication – the SLCN action plan 18
  Early support 19
  The Lamb Inquiry 20

Who’s who? AHDC delivery partners
  Together for Disabled Children 23
  The National Transition Support Team 23
  Child Health and Maternity Partnerships 24
  National Strategies 24
Best practice to common practice

Introduction

The Aiming High for Disabled Children (AHDC) programme launched in May 2007. Its stated aim is ‘to improve service provision across the board for disabled children and their families, enhancing equality and opportunity for them’.

This document assesses progress to date. It shows how activity on each of the review’s identified areas has progressed and indicates the next phase of work. It shows the difference that AHDC is already making on the ground, and uses examples of best practice that demonstrate what needs to happen everywhere.

However, AHDC is more than a series of work areas, it is an integral part of the government’s Every Child Matters agenda and needs to be seen as an integral part of delivering The Children’s Plan: Building Brighter Futures and the Child Health Strategy Healthy lives, brighter futures.

The programme also looks at the cross-cutting themes crucial to delivery. These include working with:
- the Commissioning Support Programme
- a range of skills sector and workforce agencies to support the original commitments to work with the Children’s Workforce Development Council (CWDC)
- regions to ensure good practice and networking happens at every point of the delivery chain
- parents and disabled children and young people to ensure their voices permeate all that we do

The specific service improvements in AHDC do not encompass all of disabled children’s lives and this is being addressed in three ways.

1 By cross-government working in relation to work programmes impacting on children and young people such as the youth, play and children’s health strategies.

2 By bringing in relevant parts of the wider disabled children’s agenda to ensure added value to the programme. This report, for example, gives information about Early Support and the work of the Lamb Inquiry into parental confidence.

3 By using the disabled children’s services national indicator to measure parental experiences of all services for disabled children – health, social care and education, not simply those developed as part of the AHDC programme.

And lastly AHDC is about partnership. We have selected examples in the report to illustrate some key partnerships; with parents, with children and young people, between statutory agencies and with the voluntary sector. The continued success of AHDC depends on the development and expansion of partnerships at all levels. More than this however, if we can model successful partnership within this programme it will bring about improvement in all services for all children.
Devon see person-centred planning as a key way of ensuring that young people are at the heart of their own plans, and that the voice of even young people with very complex needs will be heard.
AHDC system reform

The AHDC programme includes measures to transform the system of service provision, as well as investment in specific services.

The AHDC system reform covers the core offer and the disabled children’s services national indicator outlined below.

The Core Offer

Underpinning the programme and critical to the system reform necessary for its success is the core offer. Published in May 2008, the core offer sets out five standards for services for disabled children:

- information
- transparency
- assessment
- participation
- feedback.

The purpose of the core offer is to improve access to services by ensuring that disabled children, young people and their families:

- are aware of services available to them in their area
- understand how those services can be accessed
- will undergo only the minimum possible assessment to qualify for services
- are actively involved in the planning and delivery of services in their local area
- are aware of ways in which they can give feedback on their experiences of services.

To help local authorities (LAs) and primary care trusts (PCTs) develop their local approach to the national core offer, Stage 1 core offer implementation materials were published in May 2008.

Stage 2 of the core offer implementation materials, Delivering the core offer, has since been launched on the AHDC website and will continue to be updated regularly with new case studies as practice develops.

Disabled children’s services national indicator

The disabled children’s services national indicator is the critical success measure for the AHDC programme and for PSA12. The national indicator is framed around the core offer standards. It assesses parents’ general experience of services for disabled children (aged 0–19) and service delivery across the health, social care and education service sectors according to the five elements of the AHDC core offer. The national indicator forms part of the local authority national indicator set (NI54) and is also one of the NHS ‘Vital Signs’ indicators (VSC33). As a national indicator it can be included in Local Area Agreements and will be part of the Comprehensive Area Assessment.

What has happened so far?

An initial scoping report on the indicator was carried out by the National Centre for Social Research and published in September 2008. The survey research company BMRB was contracted to carry out the questionnaire.

A steering group was established and a discussion forum was held with LAs and PCTs. The survey was tested with parents to make sure the methodology worked, and further qualitative research with parents has been set in train.

(1) Improve the health and well being of children and young people
In January 2009, a screening survey was sent out to 360,000 households of school-aged children. This was used to select the sample for the main questionnaire and enabled researchers to ensure that the final sample included families with children with a range of disabilities.

In March 2009, 30 local areas who had included the indicator in their local area agreement (LAA) for 2008–9, or chosen it as a local target, were surveyed. In addition BMRB sent questionnaires to a sample of families throughout England. This enabled the researchers to provide both a national baseline for the indicator and an overall score for each of the 30 areas.

An initial report giving a national baseline and an overall score (a number between 0 and 100) for each of the 30 areas was published in May and gives a parental satisfaction figure for England of 59 out of 100. More detailed reports showing a breakdown by service and core offer standard, with a report for each local area, will be available from the end of June 2009. The reports will be used as the basis for national comparison and, where the indicator is part of an LAA, for target setting. BMRB will be able to analyse the national level data using a range of factors, including ethnicity, age, and nature of child’s disability. We expect that local areas will review the results of the survey with local parents. The first wave of results covers 30 local authority areas and 21 coterminous PCT areas, so the reports will also enable PCTs to judge their performance in relation to the Tier 3 Vital Sign that relates to parents’ experience of services for disabled children.

**What impact has it had?**

Redcar and Cleveland Borough Council were one of the local areas to choose the disabled children’s services indicator. They see it as a key driver for making a difference to the lives of children by delivering services that would help them realise their wishes and aspirations and actively support parents in their caring role. They have developed a new disability strategy and a short breaks strategy. Both strategies were agreed in consultation with families and other stakeholders. In July 2008, Redcar and Cleveland launched a disability newsletter entitled *Family Focus*, which provides information about services. They are also developing a basic service provision that families can access through vouchers without the need for an assessment. Both of these initiatives are designed to meet requirements in the core offer.

They have joined forces with Contact a Family North East in order to facilitate a twice-yearly parents forum, entitled Small Steps = Big Changes, run by parents for parents as a means of ensuring that their voice is heard and their opinions acted upon. They are also facilitating parents’ steering group meetings and an annual parents conference.

Information about services for disabled children and their families can be found online on Redcar and Cleveland Council’s website, the Families Guide website and the new Tuned in website, which is a children and young people’s version of the Families Guide. At the request of parents they are in the process of introducing a texting service that offers a quick way to get information on service developments and events to parents and young people.

Redcar and Cleveland believe that parents are the experts in what their children need. They chose the disabled children’s services indicator because listening to parents helps them to ensure that services are timely and relevant, and that parents and their children receive the support they need.

**What will happen next?**

In summer 2009, the questionnaire will be sent out to all local areas. The results will be available in data reports in autumn 2009.

In summer 2010 the survey will be re-run with a sample made up in part of a panel of previous respondents.
AHDC work streams

Parent Participation

The parent participation work stream is designed to develop the active involvement of parents in service planning and decision-making processes at a local level to ensure that parents are active agents in shaping services.

A total of £5m has been allocated to support parent participation through a programme of grants and support over 2008–9 to 2010–11.

What has happened so far?

In May 2008, the organisation Together for Disabled Children (TDC) was contracted to manage the grant application process and deliver support to parent groups across England. The programme consists of two main elements: parent participation grant funding for groups and support and guidance to enable groups to develop effective participation at a local level.

Of the 150 local authority areas, 147 received grants of up to £3,300 for the period to March 2009 (Phase 1). The grant money was spent in several ways, focusing on the particular needs of the local area. In areas where there was little parent participation taking place, events were held to provide information to families about services and support, and to encourage them to get involved with shaping services. In other areas, the grant was used to bring parent groups together to build on existing parent participation. Some areas used the grant to involve parents from different backgrounds, covering a wide range of experiences, including type of disability and groups who find it harder to get involved. Others developed websites and e-forums so parents who found it difficult to attend meetings could have the opportunity to feed in their views and experiences.

Regional workshops and training sessions enable groups to share materials and resources and learn from other areas’ experiences. The TDC website offers a developing range of materials and resources of value to new and established parents groups.

The deadline for applying for the second phase of grants (Phase 2) was mid-May 2009 and grant payments for this phase have already begun.

What impact has it had?

Oxfordshire Family Voices – getting a parent’s forum started

An initial meeting was organised ahead of the launch of the grant programme to discuss how Oxfordshire should approach parent participation. This was attended by people from organisations and groups that support parents with disabled children; the local authority leads for AHDC; and professionals involved in parent participation. The group agreed to use the grant to reach out to parents and see how they would prefer to get involved.

Oxfordshire is a large rural authority so a number of meetings were arranged across the county, including some in the evening. These were attended by 44 parents; and
from this a steering group was formed. The majority of parents signing up had not been actively involved before. Together, the parents had children with a wide range of different conditions and disabilities. The parents were motivated to get involved by the opportunity to have a united voice and be able to have a say in the development and delivery of services for their families.

To date the group’s successes have been in setting out a clear vision and the steps required to achieve it. The group members understand that this will require a huge amount of commitment and work. However, they feel supported by the local authority (LA) and share a mutual respect; and both the group and the LA appreciate that the outcome of this work will be to the benefit of everyone. Whilst the LA is extremely supportive and makes sure that the work feeds in to the right level of the LA, they are aware that the success relies on the forum being led and owned by the parents.

What will happen next?

There will be a full analysis of the activities and outcomes of all Phase 1 work to capture the impact of the grants and support on the local engagement of parents. There will also be on-going development of materials and resources to capture good practice and share this across all groups. These will be available from the Together for Disabled Children website.

Phase 2 of the grant programme will provide local areas with £10,000 to build on the work achieved to date. The focus in this phase will be to ensure parent participation is sustainable and embedded in service planning processes across LAs and PCTs. In addition, the next phase needs to address the lack of coordination between the work
The pilot means access to customised mobility equipment and wheelchair skills training that meets their needs in school, at home and at play.
of LAs and PCTs on participation and service planning.

With the introduction of the new indicator for disabled children’s services, local services and parents will be supported to ensure that parents are involved in reviewing the first data sets from the national indicator.

**Short breaks**

At the time of the AHDC review, families with disabled children told the government that their number one priority was regular and reliable short breaks from caring. Children and young people also told us that they wanted more things to do and more places to go. For this reason the majority of the funding for AHDC has been allocated to short breaks. The short breaks funding package is £280m revenue and £90m capital (2008–9 to 2010–11). These sums are supported by money for the same period included in PCT baselines; the recent Child Health Strategy *Healthy lives, brighter futures* confirmed £340m for short breaks, palliative and end-of-life care, wheelchair services and community equipment for disabled children and young people.

**What has happened so far?**

A total of 21 pathfinder areas were launched in April 2008.

The organisation, Together for Disabled Children was contracted to deliver support to pathfinder and non-pathfinder LAs and PCTs.

In preparing to receive the major new funding from April 2009, non-pathfinder authorities have worked over 2008–9 towards meeting nine ‘readiness’ criteria set by the Department for Children, School and Families (DCSF). The great majority of areas have met all nine. A number of pathfinder and non-pathfinder areas are set to play an enhanced role in providing peer support and sector-led improvements by acting as Short Break Champions.

DCSF are tendering for the short breaks programme evaluation and work will begin in summer 2009. Loughborough University have also been appointed to undertake work on the unit costing of short breaks. Both these research programmes will produce guidance for LAs and PCTs.

Short break foster care training and development standards are set to be published in June 2009.

Scoping work on developing an online short breaks marketplace is well advanced in order to provide practical support for increasing capacity in the short breaks market.

A short break workforce recruitment support service has been commissioned from Shared Care Network, aimed at assisting LAs and independent providers to secure the necessary carers required under AHDC.

Pathfinder areas are reporting significant increases in both the range and volume of their provision.

Many local authorities are generating ‘local offers’ in which a minimum level of short break provision is offered to a group of severely disabled children through a self-referral route.

**What impact has it had?**

In Kent, the portfolio of capital projects within the AHDC short breaks transformation programme is a joint venture with the PCTs.

The strategy for disabled children’s services is centred on a ‘hub-and-spoke’ model of provision, underpinned by a belief that children across the county should receive equitable services, based in their local community, which promote inclusion into mainstream provision wherever possible. Kent also recognise the important role of shared care in meeting the Full Service Offer, and are adapting a number of identified foster homes across the county. The
Aiming High for Disabled Children

The authority is well advanced in developing resource centres as multi-agency ‘hubs’ capable of providing short break provision.

The programme comprises the following:
- building a new Ashford multi-agency assessment centre and day facility
- upgrading two overnight break units, currently used by health services, which will form part of the ‘hubs’ in Maidstone and Dartford
- modifying the overnight break unit in Ashford, to improve the air quality and enable physically disabled children to access breaks there
- providing a toy library for families accessing short breaks in East Kent
- upgrading three properties to develop transition units for young people to acquire independence skills
- providing equipment to enable the county-wide portage service to provide short breaks for families
- adapted transport for use by the resource centres and foster families to transport children to and from short breaks services.

What will happen next?
The government, TDC and the Council for Disabled Children (CDC) are developing a number of guidance documents, including guidance on:
- the legal framework for short break provision and associated assessment, planning and review arrangements
- the use of eligibility criteria
- market development and workforce planning.

Regulations and statutory guidance will be developed to accompany the new duty on local authorities to provide short breaks.

TDC will support all areas to work towards meeting the short breaks Full Service Offer. DCSF will explore how they can adjust the regulations and national minimum standards governing the provision of children’s homes and foster care to ensure that the requirements reflect the nature of short break provision.

Transition Support Programme

Disabled young people, aged 14 to 19, and their families need improved support from local agencies working together. The Transition Support Programme (TSP) has been developed to make sure local areas work on improving practice in every aspect of transition – to raise the standards of support received by disabled young people in their transition to adulthood.

It is a three-year programme with £19m of funding between 2008–9 and 2010–11. The programme consists of two main elements: a national transition support team (NTST), providing overall leadership and programme management; and support for change at the local level. National Strategies and the Child Health and Maternity Partnership will be working with local areas to improve the process of transition for disabled young people and their families.

What has happened so far?
Each local area received £10,000 in 2008–9 to engage with young people and assess their current support across services for transition; and 13 local areas received an additional £37,500 to extend their practice.

All areas completed a self-assessment questionnaire, which helped to form an understanding of their support needs, and were then matched to one of three tailored offers of support to help them improve their processes and the experience of disabled young people.

Offer 1:
Direct grant and NTST support to develop best practice and drive change in other areas.
Offer 2:
Regional advisor support days to help areas benefit from networks and best practice.

Offer 3:
Regional advisor support days to move practice on from minimum standards.

Universal support, to all local areas, covers access to information and advice on transition from the national transition support team; focused network support; and £10,000 to engage with young people and build the questionnaire into their planning process.

What impact has it had?
Devon received additional grant funding in year one of the TSP and has started a range of activities to improve transition for disabled young people locally.

It has developed an integrated commissioning strategy for the transition of all young people with additional needs. The aim of this strategy is to provide all the information that adult services and providers need to design and commission services that best meet the needs of the young person.

Devon has also developed a Young Commissioners programme, an accredited training scheme that equips young people with the skills to become involved in all aspects of the commissioning process.

A virtual transition team has been set up. There is a solid networking system now in
place to share information and ensure that young people are cross-referred within the team where appropriate.

Devon has increased the capacity of the Advocacy project, which supports the involvement of young people in their individual transition plans and ensures that their voice is heard in reviews. The project also advocates to services as a whole on behalf of young people, and can voice their issues on a wider platform.

Devon sees person-centred planning as a key way of ensuring that young people are at the heart of their own plans, and that the voice of even young people with very complex needs will be heard.

Devon chose National Indicator 146\(^{(2)}\) to help improve the opportunities for people with learning disabilities to access paid employment. This is being supported by a development group working in partnership with Connexions to look at ways to increase the employment opportunities for young people with learning disabilities.

What will happen next?
In year two of the TSP the regional support agencies – the National Strategies and Child Health and Maternity Partnership – will work with local areas to develop support for disabled young people in transition. Local areas will be supported to move practice on from minimum standards, to help benefit from networks and to develop best practice and drive change in other areas. Every local area will receive some level of funding, access to the regional hubs and a range of networking opportunities.

Palliative and continuing care
Most of the children who have life-limiting conditions, or who require palliative care services, will be disabled children. To better meet their needs, the Department of Health has published England’s first national palliative care strategy, Better Care: Better Lives. The strategy aims to improve outcomes and experiences for children, young people and their families living with life-limiting and life-threatening conditions.

Better Care: Better Lives responds to the independent review of palliative care services led by Professor Sir Alan Craft and Sue Killen, published in May 2007.

What has happened so far?
The hospice and hospice-at-home grant has been extended by two years and £20m, so that the total will be £47m over the period 2006/07 to 2010/11. The grant is time-limited and is intended to help providers establish sustainable services for children and their families.

The £340m confirmed for PCT allocations in the Child Health Strategy Healthy lives, brighter futures included £30m for palliative and end-of-life care services. The other services covered by the £340m (short breaks, wheelchair service and community equipment) also provide significant help to children with palliative care needs and their families.

The Consultation on a National Framework for Assessing Children’s Continuing Care ended in December 2008 and the new framework will be published shortly.

What impact has it had?
East of England strategic health authority (SHA) have led the development of regional and local palliative care networks, following the launch of Better Care: Better Lives. The local networks are led by local commissioners and involve practitioners from across the services providing palliative care in the local area. The work of the networks links into SHA/Government Office activity taking forward AHDC and Post-Darzi\(^{(3)}\) work.

The work plan of the networks links into the objectives set out in Better Care: Better Lives

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\(^{(2)}\) Adults with learning disabilities in employment
\(^{(3)}\) High Quality Care For All: NHS next stage review, final report
Aiming High for Disabled Children

and has involved services identifying gaps in service provision. In Norfolk, this partnership work has led to East Anglia Children’s Hospices becoming involved in the provision of short breaks to children and young people using local AHDC funding.

What is happening next?
The Department of Health, working with the DCSF, is considering what support it can give to service providers as they take forward the recommendations in Better Care: Better Lives. This will include working with hospice and hospice-at-home providers to identify what further help they might need to enable them to deliver services sustainable beyond the end of the specific grant funding.

Community equipment and wheelchairs

In the Disabled Children’s Review one of the areas identified as particularly important to improving outcomes for disabled children, young people and their families was the provision of appropriate equipment and wheelchairs. These are seen as vital in order to maximise mobility and communication, make it less physically tiring to care for a disabled child, and prevent the deterioration of conditions.

Equipment, from wheelchairs to communications aids, is essential to help disabled children and young people access school, leisure and other services, and to facilitate independent living. Good quality equipment services can also enable independent living in the community at low cost, compared to longer hospital stays.

What has happened so far?
PCT baselines now include £340m for the period 2008–9 to 2010–11, for short breaks, palliative care, and community equipment and wheelchair services for children.

The Child Health Strategy Healthy lives: brighter futures announced the setting up of a partnership between the children’s mobility charity Whizz-Kidz, the London SHA and PCTs in London to improve the provision of wheelchairs for children there.

The Department of Health has commissioned the development of a procurement strategy for children’s community equipment.

What impact has it had?
A partnership between Whizz-Kidz and Tower Hamlets PCT developed a commissioning model for children’s equipment. The pilot project has given local disabled children and young people access, for the first time, to customised mobility equipment and wheelchair skills training that meets their complete needs in school, at home and at play. The partnership provides advice, equipment and support from a child’s early years right through the transition to adulthood, enabling them to live more independently in the future.

In 2007, Whizz-Kidz and Tower Hamlets Wheelchair Services worked together to quantify the local need, and collectively identified children under the age of 18 who were currently unable to access a wheelchair that met their clinical, educational and social needs. In April 2008, following a year of partnership working, the PCT invited Whizz-Kidz to become the lead provider of the wheelchair service for children and young people in Tower Hamlets.

What is happening next?
The project to improve the commissioning and provision of wheelchair services for children in London will:

- build on the recent experiences in Tower Hamlets to develop a PCT operating model
- develop a plan for strategic health authority-wide roll-out.

This work will sit alongside Department of Health work looking at wheelchair services more widely, covering adults and children.
Disabled Children’s Access to Childcare (DCATCH)

The Disabled Children’s Review identified the importance of childcare provision in improving outcomes for disabled children and their families through facilitating parental employment, reducing family stress, and increasing a child’s social and educational development.

Survey evidence shows that families with disabled children find it harder to find appropriate childcare. There was a strong case for further intervention to encourage better access to childcare for disabled children which the DCATCH pilot projects hope to achieve. The DCATCH funding package is £35m (2008–9 to 2010–11).

What has happened so far?
The first wave of pilot projects (Phase 1) was launched in September 2008. Funding went to Barking & Dagenham, Bradford, Camden, Cornwall, Luton, Northumberland, Nottinghamshire, Oxfordshire, Sefton and Solihull. Each area has a different focus for their work and the range includes specialist training for childminders and nursery workers on how to care for and educate disabled children; and parent champions to explain and promote the needs of BME (Black and minority ethnic) disabled children.

All LAs have new duties to secure a sufficient supply of childcare in their area, with a particular focus on the provision of childcare for disabled children.

What impact has it had?
Northumberland aims to increase the numbers and skills of childcare providers able to offer the level of support needed by children and young people with complex needs and challenging behaviour.

The project works through three children’s centres, situated next to special schools and based in the north, west and south east of the county. These three children’s centres will develop into centres of excellence for disabled children. They will act as ‘hubs’ for their localities, providing resources, which can be used by parents, carers, childminders and childcare settings; training staff and private, voluntary and independent providers; and employing support staff to work alongside children to enable them to attend mainstream settings.

What will happen next?
For Phase 2, ministers have decided to work directly with Revenue & Customs (HMRC) via the Childcare Affordability Programme to look at ways in which more support can be given to London families with disabled children through the childcare element of the working tax credits as they start work or return to work. The details of this work are being developed.

The evaluation of the childcare affordability pilot project, together with the continued learning from the ten Phase 1 pilot projects, will inform the development of Phase 3 of the DCATCH programme.

The evaluation contract for DCATCH will be awarded in summer 2009.

Individual budgets (IB)

In order to increase flexibility and choice in the provision of services, AHDC included a commitment to pilot individual budgets for disabled children. The six pilot sites will feed into the national pilot programme, which has been set up to establish whether an IB:

- enables disabled children and their families to have more choice and control over the delivery of their support package
- improves outcomes for some, or all, disabled children and their families.

What has happened so far?
In April 2008 the DCSF commissioned Individual Budgets for Families with Disabled Children – A scoping study, which was...
published in October 2008 and identified a range of factors for a successful IB programme.

In March 2009 a small number of local authorities along with their PCT partners were invited to apply to pilot IB for families with disabled children. Six sites were selected: Coventry, Derbyshire, Essex, Gateshead, Gloucestershire and Newcastle. Each site will offer IBs to a target number of families with disabled children. While offering IBs to the full range of eligible children and families, each site will also have identified a beneficiary group upon which they wish to focus. The groups are:
- children coming out of early support
- young people in transition
- newcomers to the social care system.

The IB pilots will run from April 2009 until March 2011; with a possible extension to March 2012, subject to available funding. Piloting local authorities will receive between £200,000 and £280,000 in grant funding over the two years to deliver the pilots.

SQW Consulting consortia has been appointed to evaluate and support the pilots. The team includes Ipsos MORI, iMPOWER and Helen Sanderson Associates (HSA).

**What will happen next?**

Good practice and feedback from the pilot sites will be published in quarterly updates, starting in late June 2009, on the AHDC homepage: www.dcsf.gov.uk/ecm/ahdc.

SQW Consulting and Ipsos MORI have been commissioned to evaluate the pilots and ensure that robust lessons are learned to inform future policy. iMPOWER and HSA will provide dedicated support to pilot areas.
Underpinning the programme and critical to the system reform necessary for the programme’s success is the core offer.
Aiming High for Disabled Children

Wider work streams

Better Communication – the SLCN plan

Speech, language and communication are crucial to every child’s ability to access and get the most out of education and life. Children with speech, language and communication needs (SLCN) are amongst the most vulnerable and most in need of effective support to reach their potential.

Following the review of services for children and young people with SLCN by John Bercow MP, the government published Better Communication: An action plan to improve services for children and young people with speech, language and communication needs. The Action Plan, Bercow Report and updates on progress are available at http://www.dcsf.gov.uk/slcnaction.

The Action Plan provides details of a range of initiatives across government to improve services for children and young people with SLCN, culminating in the National Year of Speech, Language and Communication in 2011–12. This includes up to:

- 20 local area pathfinders to develop good practice guidance and a supplemental joint commissioning framework on SLCN
- £1.5m invested in grants to the alternative and augmentative communication sector
- £1.5m invested in a research programme looking at SLCN over the next three years.

To provide ongoing support to the delivery of these initiatives over the next three years, the government will form a Communication Council and appoint a Communication Champion.

What has happened so far?

So far there has been activity to:

- tender for an organisation to support the communication council and communication champion
- request applications from local area commissioners to take part in the pathfinders
- tender for an organisation to lead the SLCN research programme
- request applications for grants to organisations in the alternative and augmentative communication sector
- develop a project with the Communication Trust to provide training materials for those with young people with SLCN who are in contact with the justice system.

What is happening next?

The organisation leading the SLCN research programme will be selected and begin work in June/July 2009.

The organisation that will support the Communication Champion and Communication Council will be selected in mid July. Following this, we will openly advertise the role of the Champion as part of a recruitment exercise that will start before the end of July 2009.

The areas selected to be SLCN Commissioning Pathfinders will be announced in June/July 2009 and start work. The first organisations in the alternative
and augmentative sector to receive grants from Becta will be announced in June/July 2009.

**Early support**

Early Support (ES) is a national programme, that improves the way in which services for young disabled children in England work together and how services engage with families. It began as a DCSF funded pilot project in 2002 with a specific focus on working with parents of disabled children aged 0–5 and with local authorities; to improve the planning, coordination and delivery of services for disabled children and their families. Until the transition back into the DCSF, the programme was managed by a team based at the Royal National Institute for Deaf People.

**What has happened so far?**

Since 2002, the government has invested a total of around £16m to support the roll-out of ES. The aim was always to build and strengthen LA capacity so that ES was embedded and cascaded across the country.

Since May 2006, the programme has received around £5m to mainstream and consolidate use of ES across England. Progress in engaging LAs has been encouraging. The latest performance information shows that:

- 31 LAs (21 per cent) have well-established systems based on ES, with stable key worker services
- 100 LAs (67 per cent) are in the process of implementing ES
- 13 LAs (9 per cent) are just starting to implement the approach
- only LAs (4 per cent) are not yet implementing the approach.

**What impact has it had?**

Since September 2007, ES has been rolling out across Cornwall led by a team of three, comprising an ES development coordinator (full-time) and two ES coordinators (working half-time) sitting within the Information Sharing and Assessment (ISA) team. ES coordinators are locally based and work across agencies in their areas, offering support and advice on using the ES approach and materials.

The close partnership that the ES coordinators have established with the ISA team has been an essential component in the successful roll-out of the ES approach in Cornwall. Not only do they have access to six full-time ISA admin support assistants who convene ES Team Around the Child (TAC) meetings and send out Family Service Plans and so on, but they are also able to monitor, for example, how well the ES approach has been adopted by accessing monthly metrics showing the number of TACs held, who initiated ES with families and who has taken on the role of lead professional.

At present, over 200 families in Cornwall are having services for their disabled child or young person coordinated by using ES materials within an ES approach. The ES coordinators also deliver ES training on awareness raising as part of the rolling programme of ISA training that is offered to all practitioners from statutory, non-statutory, voluntary and community sectors.

**What will happen next?**

There are clear synergies between the Aiming High for Disabled Children programme and ES. The inclusion of ES in the programme should provide further impetus to ES. In return, the strengths of ES will help to inform the development of the AHDC programme. There is evidence that this is already occurring. In some areas that had initially been slow to engage with ES, it is clear that the AHDC programme is triggering a development of integrated services for disabled children and young
Aiming High for Disabled Children

people of all ages that includes ES for the under-fives.

A range of support will be available to LAs and PCTs to assist them in mainstreaming the ES programme through:

- the engagement of regional field forces – such as Government Offices, Children’s Services Advisors, Together for Children and Together for Disabled Children, and National Strategies
- online support – the website is the main portal for information, advice and guidance to both parents and professionals; information and guidance about the use of Early Support will continue to be available online
- materials – the success of ES has triggered a rising demand for programme materials from parents and practitioners; the DCSF is committed to continued access to the ES materials in print format
- use of ES training materials – all of them have been updated and distributed to ES approved trainers and capacity builders for onward cascade
- inclusion in the AHDC programme – the ES programme will benefit from the coherence of being part of the wider AHDC programme and will be built-in to the national communications programme that helps to deliver change across the whole AHDC programme.

We will be building on the experience and good practice by using the ES principles to develop other AHDC programmes. Good practice from ES will play a full part in the refresh of the core offer implementation materials that will inform the development of the whole programme.

Lamb Inquiry

The Lamb Inquiry was established as part of the government’s response to the House of Commons Education and Skills Committee Report Special Educational Needs: Assessment and Funding. The Inquiry, under the chairmanship of Brian Lamb, the chair of the Special Educational Consortium, is investigating a range of ways in which parental confidence in the special educational needs (SEN) assessment process might be improved.

What has happened so far?
The Inquiry started its work in March 2008 and has brought together a group of expert advisors who reflect a range of interests and opinions. A broader reference group of professionals and parents brings a wide range of evidence and extensive networks to the process of evidence gathering.

The main source of evidence for the Inquiry is eight local authority projects that are each exploring ways of improving parental confidence. These projects started in September 2008 and run for the school year up to July 2009.

Based on meetings with parents in autumn 2008, several areas affecting parental confidence have been identified, which required immediate attention:

- a lack of compliance with SEN and disability requirements
- gaps in information for parents
- a lack of focus on outcomes for disabled pupils and pupils with SEN
- the need for SEN issues to be considered in all policy development.

These have been drawn to the attention of the Secretary of State for Children, Schools and Families.

What impact has it had?
The Secretary of State acted on these concerns.

- The Lamb Inquiry was asked to oversee a comprehensive examination of the SEN and disability information requirements on schools and local authorities.
- To ensure that high aspirations are held for all children, the DCSF launched a new £31m pilot project, Achievement for All, to
demonstrate best practice in improving outcomes for children with SEN.

To ensure that SEN is embedded in policy development, the DCSF is investing £7m over two years in a number of areas, including work with the National College for School Leadership to embed high aspirations for children with SEN in school leadership training.

At the end of April 2009, Brian Lamb reported back to the Secretary of State following his SEN and disability information review. His recommendations seek significant changes in four areas:

- communication and engagement with parents, rather than standard information
- a reduction in the specific SEN requirements in favour of covering SEN and disability in information for all children and parents
- an increased focus on outcomes for disabled pupils and pupils with SEN
- tighter quality assurance and accountability for meeting streamlined information requirements.

To promote better communication with parents, the Inquiry recommended the extension of the principles of the core offer to provide a framework for engagement by schools and children’s services with parents of children with SEN.

The Secretary of State has agreed to the Inquiry recommendations and has asked for further advice in two areas where the Inquiry raised concerns:

- whether SEN and disability are given sufficiently high priority within the inspection framework and whether changes are needed, including to legislation, to strengthen this
- whether statements of SEN are clear, make sense to parents and contribute to improved outcomes for children with special educational needs and disabilities.

**What is happening next?**

The Inquiry will review these two further areas and report back to the Secretary of State in July 2009.

The open call for evidence for the Inquiry runs until 10pm on 30 June 2009.

Each of the eight local authority projects is being evaluated and will report in early August 2009 on their impact on parental confidence.

A final report on parental confidence in the SEN system will be submitted to the Secretary of State in September 2009.
Aiming High for Disabled Children

Short break pathfinder areas are reporting significant increases in both the range and volume of their provision.
Who’s who?
AHDC delivery partners

Together for Disabled Children

Together for Disabled Children (TDC) is the national delivery agent supporting local authorities and PCTs in two elements of the AHDC programme – transforming short break services for families with disabled children, and improving parental engagement in disabled children’s service planning and delivery.

TDC is a partnership between Serco Education and Children’s Services and national charity, Contact a Family.

It provides local areas with a named advisor offering bespoke and proportionate support. This includes support via resources such as regional networks and the website; support for planning, problem resolution, and sharing of good practice; and for joint working between authorities and PCTs. A parent advisor provides support for parent forums and facilitates activities to engage parents in the planning and commissioning of services.

TDC is also the national facilitator for the Disabled Children’s Access to Childcare (DCATCH) pilot project, supporting 10 local areas to use innovative thinking and practical improvements to enhance access to childcare for families with disabled children. This work is supported by their sister organisation Together for Children, which is the national delivery agent for Sure Start Children’s Centres.

More information on TDC can be obtained from:
www.togetherfdc.org
0121 683 2068 (Helpline)
Rita Wiseman, director for delivery support, 0773 889 8546 or rita.wiseman@togetherfdc.co.uk

More information on DCATCH can be obtained from:
Duncan Craig, regional programme lead, 0773 889 3663 or duncan.craig@togetherforchildren.co.uk

The National Transition Support Team

The National Transition Support Team (NTST) coordinates the work of the Transition Support Programme (TSP) and supports its delivery at a national, regional and local level. The TSP is a national government programme to support disabled young people in their transition to adulthood.

NTST is led by the Council for Disabled Children (CDC), working with partner agencies National Strategies and the Child, Maternity and Health Partnership. NTST will raise the profile of transition across specialist and universal services to promote disabled young people having the same rights and opportunities as all young people.

The team will work with local areas to develop practice examples, address areas in need of further work and disseminate their
Aiming High for Disabled Children

learning across regions and nationally. The participation of young people is integral to the work of the team.

More information can be obtained from the national transition support team:
020 7843 6348
TSP@ncb.org.uk

Helen Wheatley, programme director
020 7843 6446 or
hwheatley@ncb.org.uk

To access resources, to sign up for regular news and updates, and to practice in discussion forums, visit the website:
www.transitionsupportprogramme.org.uk

Child Health and Maternity Partnerships

Child Health and Maternity Partnerships (CHaMP) is a partnership between the Department of Health and the NHS. It delivers local service improvement support across the whole Children and Young People’s agenda, working with health, social care, education and voluntary sector colleagues. CHaMP is a delivery partner for the Transition Support Programme. This is done both through regional coordination and detailed bespoke work, supporting the development and delivery of action plans that will improve local processes for transition in all areas.

More information can be obtained from:
Linda Parker, linda.parker@swdc.org.uk

The National Strategies Transition Support Programme consultant team

The National Strategies (SEN/LDD team) works with the national transition support team and delivery partners to provide regional advisory support to local areas in developing local transition processes for disabled young people as they move into adult life. The National Strategies team focuses its support on local areas that identified themselves, through their responses to a self-assessment questionnaire, as in need of a high level of support to develop local transition support practice up to, and beyond statutory compliance and minimum standards.

There are five Transition Support Consultants.

The team consultants and the regions they cover are listed below:

Michael Dishington, North West, North East
(michael.dishington@nationalstrategies.co.uk)

Jane Shepherd, Yorkshire & Humber, East Mids
(jane.shepherd@nationalstrategies.co.uk)

Lyn Frith, West Midlands and South West
(lyn.frith@nationalstrategies.co.uk)

Karen Castle, East, London North
(Karen.castle@nationalstrategies.co.uk)

Steve Cochrane, South East, London South
(steve.cochrane@nationalstrategies.co.uk)

Dave Dickinson
(david.dickinson@nationalstrategies.co.uk)
senior director responsible for team coordination
The continued success of Aiming High for Disabled Children depends on the development and expansion of partnerships at all levels.

To find out more about Aiming High for Disabled Children www.dcsf.gov.uk/ecm/ahdc