

**Early Support and Independent Support Programme Board Meeting  
Thursday 17<sup>th</sup> July 2014, 2pm-5pm**

**Present:**

**Kevin Williams (KW)** – Chair  
**Caroline Allen (CA)**- Orchard Hill College  
**Chris Easton (CE)**- NHS England  
**Christine Lenehan (CL)**- Council for Disabled Children  
**Jane Harrison (JH)**- Early Support  
**Jill Wellings (JW)**- Wolverhampton Council  
**Martin Bull (MB)**- Independent Support  
**Matthew Hopkinson(MH)** – Department for Education  
**Maureen Morris (MM)**- National Network of Parent Carer Forums  
**Patrick Agius (PA)**- Department for Education  
**Peter Ellis (PE)**- Richard House Children's Hospice  
**Toby Price (TP)**- London Borough of Sutton  
**Alice Turner(AT)** – Minutes Secretary, Council for Disabled Children

**Apologies:**

**Daisy Russell** (National Parent Partnership Network), **Liz Hobson** (Local Government Association), **Nic Crosby** (In Control), **Stephen Kingdom** (Department for Education)

**1.1 Welcome and Matters Arising**

Minutes of the last meeting were approved subject to a final check by PA. These will be uploaded onto the CDC website on Tuesday 22<sup>nd</sup> July.

Updates from the group on matters arising were as follows:

- The Code of Practice passed through the House of Commons this morning (Thursday 17<sup>th</sup> July) and is expected to be put before the House of Lords before the end of the session. The date for this has not yet been finally confirmed.
- CL updated the group on the VAT position of the Independent Support (IS) contract. PA and CL agreed to discuss this further outside of the meeting.
- MB confirmed that the IS contract between DfE and CDC ends in March 2015. PA stated that a clear plan for the future beyond this contract should be in place by autumn 2014.

**ACTION: CL will send a summary of the VAT advice that has been offered to CDC and the steps that have been taken so far to DfE**

## **2.1 Overview of June KPI reports for Early Support and Independent Support**

### *Independent Support*

MB gave an overview of the IS June KPI report. Progress has been made rapidly and the majority of the KPIs are on track. The anticipated number of - Independent Supporters will grow from a solid base on 1 September 2014, to a number closer to the estimate in the contract by early 2015. . This is based on the likely demand and growth of activity provided by tenderers in their bids.

The board asked about an exit strategy for IS being considered as part of Phase 2. CL explained that the IS programme was designed with an exit strategy in mind. As IS is a short-term 2 year contract, dependence cannot be built on its availability. The intended outcome of the programme is to have a sustainable system in place after the project and to create a legacy of sustainability. It would be unrealistic to expect Local Authorities (LAs) to continue to meet the costs for all Independent Supporters, once central Government funding expires in 2016.

**ACTION: MB to develop a programme exit plan once the tendering process and contract awarding period has ended.**

### *Early Support*

JH gave an overview of the ES June KPI report. ES work began slowly but co-operation between agencies has improved since the contract began and regional work is picking up pace. Work is progressing and KPIs are on track, things are expected to slow down over summer but from September onwards there will be more activity.

Some of the KPIs require a great deal of activity, for example the 54 workshops that ES are contracted to deliver to young people. JH does not want the programme to be driven by the numbers and wants to ensure that the focus remains on the quality of the support provided. ES is working with the CDC participation team to make sure that the workshop materials for young people are co-produced with young people. CL added that, following a conversation with the DfE, it was suggested that the young people's workshops should also focus on providing support to professionals who work with young people.

JH is confident that the KPIs will be met. There will be a team away day in August where progress will be tracked.

PA explained that the DfE are trying to encourage collaborative working and understand that rigid KPIs can make co-production a challenge. Every effort will be

made to be flexible on KPIs to ensure that working in collaboration with other delivery partners is possible.

CL gave an overview of the priority concerns laid out in the pathfinder readiness surveys. These were:

- Transferring to a new system
- Working on outcomes
- Understanding SEN support
- Joint commissioning and working with health
- Engaging with young people
- Parental expectations
- Early years

CL explained that a 1.5 hour workshop package on these areas of concern will be put together by delivery partners collaboratively. Local areas will then add their local knowledge into the package so that the workshops focus on the specific needs of the region where they are being delivered. This programme of workshops will be available nationally, with more specific individual support delivered where required. These workshops are expected to begin in September.

KW informed the group that the ES contract will be discussed in more detail by the board in September's meeting. CL expressed concern that the immediate need to support the reforms may turn ES into an implementation vehicle. It is important that the essence of ES and its principles are not lost. A number of current Regional Facilitators (RFs) have been asked to put together a piece of work about ES and their thoughts about its future. This will be completed in time to review before the next board meeting.

### **3.1 Reviewing the Outcomes Report from the Evidence and Build phase**

MB gave an overview of the E&B report, focusing on areas he had not covered at the last Board meeting. The reports that came in from the 12 Parent Partnership Services (PPSs) and 13 Voluntary, Community and Private Sector organizations (VCS & Ps) who were contracted in this phase were very varied and interesting. There was wide consultation and the views of young people and parents were well represented, especially in the PPS reports. Case studies provided by the organisations are presented in the report's appendices.

Contracted agencies were asked to report on the best ways to deliver IS. There was no single answer to this question. Different local contexts meant that there was varying demand for the service in each area and a different approach to its delivery was taken by each agency.

The report shows how flexible the role of an Independent Supporter can be. Independent Supporters can be paid or voluntary, part-time or full-time, and there are no specific qualifications required for the role. Most PPSs rely on volunteers. MB noted that there is a benefit to the use of volunteers but that there are also risks associated with the management and retention of a voluntary workforce. Another workforce suggested in the E&B report was students; a tried and tested method used elsewhere in the sector.

The challenges mentioned most frequently in the report included:

- Ensuring that the IS service is consistent nationally
- Managing the expectations of the service
- Guaranteeing the independence of Independent Supporters

These concerns were all discussed later in the meeting.

The report highlights the need for clarity around how the IS service fits in with existing services. It is important that the IS role is understood by its users and partners and that relationships are built quickly between Independent Supporters and other agencies.

The E&B phase report will be published on the CDC website on Tuesday 22<sup>nd</sup> July. CE suggested that the report should also be shared with clinical commissioning groups.

<http://www.councilfordisabledchildren.org.uk/news/july-december-2014/launch-of-the-independent-support-evidence-and-build-report>

CA raised a concern that with the limited funding available to pay Independent Supporter salaries, it may be difficult to attract candidates with the wide range of skills required for the role. MB reassured CA that the organisations contracted to provide the IS service were able to show in their bids that they had the right people management skills and access to volunteers and candidates to provide sufficiently skilled Independent Supporters. CL added that the IS training is provided by CDC and will be consistent for all Independent Supporters. It is important to nurture the Independent Supporters in this process and the RFs can help with this. CL is confident that if the IS service is not adequate in any local area, it will be picked up and reported within a very short time period and can be monitored and improved.

PE spoke about engaging the wider community with Independent Support. He expressed a concern that in his area of work disabled young people are isolated by the over-professionalised nature of palliative care and suggested that Independent Support could encourage communities to take responsibility for young people with special needs and disabilities. PA said that there would be an opportunity to use the evaluation of the programme to look at this further.

The board asked how the success of Independent Supporters would be measured. MB has asked for reports to present evidence of the number of statements that an Independent Supporter has prepared ready to be converted into a plan. CE asked whether there will be a way of measuring service user experience. This will be one of the focuses of the evaluation.

**ACTION: MB to ensure some levels of impact measures are captured in VCS&P task order.**

CA mentioned the importance of pitching the service well to the organisations and agencies that Independent Supporters will be working alongside. Schools and colleges have found the new funding method used to support SEND students a challenging process. CA suggested that Independent Support is presented as a service that will support schools and colleges in this process. CA will provide contact details to key organisations to share the E&B report with.

#### **4.1 Progress on appointment of IS tenders**

MB reported that 125 PPSs were immediately successful in their service agreement bid and a further 19 were successful after further enquiries, resulting in 144 PPS contracts being agreed. CDC will be contacting the 7 remaining PPSs and working with them to encourage them to put in bids.

MB reported that 103 bids were received from VCS&P organisations by the tender closing date of June 25<sup>th</sup> 2014. The tender evaluation panel met over two days to decide which of these bids should be successful. It was decided that 47 tenders should be put through to a clarification stage. Of these, 39 were small, local organisations and 8 were large, national organisations.

The clarification process has helped ensure costs are reasonable and that there is full regional coverage. Tenderers were asked to break down their costs to reflect how many parents and young people would be supported per local authority. This breakdown will allow KPIs to be tailored.

MB asked contracted organisations to predict the number of Independent Supporters they will have in post by September 1<sup>st</sup>, and beyond. The numbers provided are estimates as the roles have not yet all been recruited.

PA stressed the importance of focusing on the number of families supported by Independent Supporters, rather than the number of supporters themselves. KW suggested that the FAQs on the IS website be updated to reflect this.

CE asked how quality of experience of the IS service could be safeguarded. CL said that this was the role of the evaluator who will provide ongoing assessment of the programme, not just feedback in hindsight once the process is complete.

TP introduced himself and declared a potential conflict of interest. TP works with Sutton parent carer forum and Sutton PPS, who have been contracted to provide the IS service in phase 1.

TP highlighted that working effectively in partnership with local authorities (LAs) is crucial to the success of an Independent Supporter. TP mentioned the importance of marketing the IS service to LAs to ensure that they co-operate and work collaboratively with Independent Supporters. MB informed the board that bids for phase 1 of IS required a reference from an LA (or if multiple bids at least 1 LA). CL mentioned that it would be a good idea to put together a piece of work to help Independent Supporters broker good relationships with LAs and that this work should be endorsed by the Association of Directors of Children's Services (ADCS). CE recommended that an effort should also be made to secure good relationships between Independent Supporters and CCGs. MB agreed to include the services that IS agencies should build relationships with in a footnote within their contracts.

**ACTION: CL to put together materials to help Independent Supporters broker relationships with LAs**

The board discussed evaluating the success of Independent Supporters. MB intends to measure the number of cases an Independent Supporter is involved with where statements are transferred to EHC plans, and compare this with the predicted numbers recently provided by organisations in the tender clarification process. CL mentioned that alongside support for young people with EHC plans, it is important to provide support for those young people with SEN who will not be eligible for plans. Workshops are being developed on this subject and MB suggested that the IS FAQs mention this.

JW was concerned that the cases where Independent Supporters are involved with supporting movements from statements to EHC Plans did not fully reflect their role. For example, they may be involved in supporting parents and young people in a

panel meeting , at which point a plan can be rejected. MB and JW will discuss this further outside of the meeting.

**ACTION: MB & JW to discuss best ways to measure Independent Supporters' success**

MB and PA agreed it would make most sense to publish the list of all agencies contracted in IS phase 1 on the CDC website on Tuesday 22<sup>nd</sup> July, to ensure as much detail as possible is provided (although the full details would not be available at that time). The E&B phase report will also be published on this date.

**List of IS agencies:**

<http://www.councilfordisabledchildren.org.uk/news/july-december-2014/agencies-selected-to-deliver-independent-support-in-local-areas>

**5.1 Appointing the evaluation sub-group for IS**

MB confirmed that the evaluation sub-group, which would report to the board, will meet approximately four times a year and asked members of the board if they would be interested in joining this group.

Maureen Morris, Chris Easton, Jane Harrison and Kevin Williams volunteered to join the sub-group. They will join staff from CDC and DfE.

**6.1 Feedback from disabled**

**young people**

Prior to the board meeting, KW met with two disabled young people to discuss their views and concerns about IS. Notes from the meeting had been distributed and the young people's concerns and ideas were discussed by the board.

The young people that KW consulted questioned how IS could be developed reflecting the concerns of disabled young people with disabilities different to the ones they themselves had. They had suggested consulting with the specialist disability groups. On Tuesday 22<sup>nd</sup> July a list of the organisations that have been contracted in phase 1 will be published on the CDC website, along with their contact details. Local agencies, including specialist disability organisations, will be encouraged to contact and collaborate with the recently appointed IS agencies. CL suggested including workshops on IS in the next CDC meeting in the autumn as most specialist disability charities are CDC members and can be encouraged in this meeting to work with IS agencies to ensure that all disabilities are provided for by the service.

**ACTION: IS workshops to be included in the next CDC Council meeting**

Another question posed by the young people was how those with SEN who are not going through an EHC Needs Assessment or eligible for an EHC plan will be supported. PA reminded the board that while the focus of IS will be in relation to EHC Needs Assessments and Plans, they will only provide a part of the support that will be available locally to children, young people and parents. Local authorities remain under a duty to provide information, advice and support to parents of children with SEN and this duty has been extended under the Children and Families Act 2014. Local IAS services will need to expand to offer support directly to children and young people with SEN and disabilities. CL added that a new member of staff has been recruited by NPPN to focus on the service IASs can provide for young people.

The young people were concerned that Independent Supporters would be unwilling to challenge local authorities. Their concerns were similar to the challenges raised in the E&B report over the independence of Independent Supporters. CL assured the board that the IS service will be independent and that funding for Independent Supporters does not come from the LA but from central Government , via CDC.

The final question asked by the young people, that was not discussed in detail elsewhere in the meeting, was around what support is provided for disabled young people after they reach the age of 25. CL confirmed that there is no IS for those over 25 years of age. Preparing for Adulthood (PfA) has published guidance on the cross over between the Children and Families Act and the Care Act which explains what support there is available for those with disabilities who are over the age of 25. CL also referred to the Mental Capacity Act briefing; CDC have asked PfA to clarify what is offered to 19-25 year olds in this Act. After September a piece of work will also be done on what is offered to 19-25 year olds under the Care Act.

### **7.1 Quality Assurance for Early Support and Independent Support**

This had been widely covered during discussions about evaluation throughout the meeting.

### **8.1 AOB**

No other business was raised. The meeting closed at 5pm.

Date of next meetings: Monday 15<sup>th</sup> September 2014 1pm- 5pm  
Thursday 13<sup>th</sup> November 1pm- 5pm