

Wiltshire Council

Health and Wellbeing Board

12 September 2013

Subject: Disabled Children's Charter for Health and Wellbeing Boards

Executive Summary

This paper sets out the background to the Disabled Children's Charter for Health and Wellbeing Boards, the commitments this would place on the Board, the evidence required to demonstrate the commitment was being met and the benefits of signing the Charter.

Proposal(s)

It is recommended that the Board:

- i. Considers the commitments on Health and Wellbeing Boards that elect to sign the Charter.
- ii. Considers signing up to the Charter.

Reason for Proposal

Health and Wellbeing Boards are encouraged to sign the Charter. Parent Carers will be able to access information about whether their local Health and Wellbeing Board is a signatory and the steps that have been taken to meet Charter commitments.

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Wiltshire Council

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Purpose of Report

1. This paper sets out the background to the Disabled Children's Charter for Health and Wellbeing Boards, the commitments this would place on the Board, the evidence required to demonstrate the commitment was being met and the benefits of signing the Charter. The Health and Wellbeing Board is being asked to consider signing the Charter. A copy of the Charter is attached at Annex 1.

Background

2. Nationally, children and young people with disabilities and their families' access services across multiple agencies, and often experience poor integration across health, social care and education services and a lack of coordinated commissioning. This results in poor outcomes, significant inequalities and considerable distress for children and families, and additional financial costs.
3. The Disabled Children's Charter for Health and Wellbeing Boards has been created by Every Disabled Child Matters (EDCM) and The Children's Trust, Tadworth and was developed to support Health and Wellbeing Boards meet their responsibilities towards children and young people with disabilities, specialist educational needs (SEN), and health needs, and their families.
4. Health and Wellbeing Boards are being encouraged to sign the Charter. The Charter sets out a public vision for improving the outcomes experienced by children and young people with disabilities. Parent carers will be able to find out if their Health and Wellbeing Board is a signatory and the steps their Health and Wellbeing Board has taken to meet its Charter commitments.
5. The Charter is aligned with current SEND legislation changes. The draft Children and Families Bill contains clauses for promoting integration between special educational provision, health and social care provision, making joint-commissioning arrangements, keeping education and care provision under review, and producing a Local Offer for children and young people with SEN and disabilities.
6. These new duties on local authorities have a clear relevance to the functions of the Health and Wellbeing Board to encourage integrated

working, promote close working and undertake a Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWS). This is particularly important as Clinical Commissioning Groups will be under a new duty to secure specific services in education, health and care plans for children and young people with SEN and Disabilities.

Main Considerations

7. Commitments on Health and Wellbeing Boards

7.1 The Charter has seven commitments and within a year of signing the Charter the Health and Wellbeing Board will be required to demonstrate how these commitments have been met.

7.2 Commitment 1: We have detailed and accurate information on the disabled children, young people and their families living in our area, and provide public information on how we plan to meet their needs

7.2.1 To fulfil this commitment the expectation would be that a Health and Wellbeing Board would be able to provide evidence that:

- information collected informs the JSNA process,
- a quality assurance process ensures that information and data used to inform commissioning is sufficiently detailed and accurate,
- the JSNA will be used to assess the needs of local children and young people with disabilities , and their families,
- information on any hard to reach groups is sourced, and action taken to address any gaps of information,
- children and young people with disabilities and their families are strategically involved in identifying need, and their experiences inform the JSNA process.

7.3 Commitment 2: We engage directly with disabled children and young people and their participation is embedded in the work of our Health and Wellbeing Board

7.3.1 To fulfil this commitment the expectation would be that a Health and Wellbeing board would be able to provide evidence:-

- of the way in which the Health and Wellbeing Board or its sub groups have worked with children and young people with disabilities in the JSNA process, and next steps for JSNA engagement,
- of the way in which the Health and Wellbeing Board or its sub groups have worked with children and young people with disabilities in the preparation and delivery of the Joint Health and Wellbeing Strategy (JHWS), and next steps for JHWS engagement,
- of partnership working with any local groups of children and young people with disabilities.

7.4 Commitment 3: We engage directly with parent carers and their participation is embedded in the work of our Health and Wellbeing Board

7.4.1 To fulfil this commitment the expectation would be that a Health and Wellbeing board would be able to provide evidence:-

- of the way in which the HWB or its sub groups have worked with parent carers of disabled children in the JSNA process, and next steps for JSNA engagement
- Evidence of the way in which the HWB or its sub groups have worked with parent carers of disabled children in the preparation and delivery of the JHWS, and next steps for JHWS engagement
- Evidence of partnership working with local parent groups, including the local Parent Carer Forum(s)

7.5 Commitment 4: We set clear strategic outcomes for our partners to meet in relation to disabled children, young people and their families, monitor progress towards achieving them and hold each other to account

7.5.1 To fulfil this commitment the expectation would be that a Health and Wellbeing board would be able to provide evidence:-

- on the status of outcomes for local children and young people with disabilities based on indicators such as the NHS Outcomes Framework, the Public Health Outcomes Framework, etc.
- on the strategic direction the Health and Wellbeing Board has set to support key partners to improve outcomes for disabled children and young people.

7.6 Commitment 5: We promote early intervention and support smooth transitions between children and adult services for disabled children and young people

7.6.1 To fulfil this commitment the expectation would be that a Health and Wellbeing board would be able to provide evidence:-

- of the way in which the activities of the Health and Wellbeing Board help local partners to understand the value of early intervention
- of the way in which the activities of the Health and Wellbeing Board ensure integration between children and adult services, and ensure a positive experience of transition

7.7 Commitment 6: We work with key partners to strengthen integration between health, social care and education services, and with services provided by wider partners

7.7.1 To fulfil this commitment the expectation would be that a Health and Wellbeing board would be able to provide evidence:-

- of the way in which the Health and Wellbeing Board is informed by those with expertise in education, and children's health and social care

- of the way the Health and Wellbeing Board engages with wider partners such as housing, transport, safeguarding and the youth justice system
- of steps taken to encourage integrated working between health, social care, education and wider partners in order to improve the services accessed by children and young people with disabilities and their families

7.8 Commitment 7: We provide cohesive governance and leadership across the disabled children and young people's agenda by linking effectively with key partners

7.8.1 To fulfil this commitment the expectation would be that a Health and Wellbeing board would be able to provide evidence:-

- on information links to other local integration forums which set strategic direction for disabled children's services, e.g. the local children's trust arrangements, the local safeguarding board, the learning disability partnership board, the school forum, etc.
- of how the JSNA and JHWS is aligned with other arrangements, such as: reviewing and commissioning of SEN services via the High Needs Block; safeguarding arrangements; child poverty strategies, etc.

8. Benefits of signing the Charter

8.1 The benefits of signing up to the Charter include:-

- publicly articulating a vision for improving the quality of life and outcomes for children and young people with disabilities, and their families
- understanding needs of children and young people with disabilities, and their families and how to meet them
- having greater confidence in integrated commissioning on the needs of disabled children, young people and their families
- supporting a local focus on cost-effective and child-centred interventions to deliver long-term impacts
- building on local partnerships to deliver improvements to the quality of life and outcomes for children and young people with disabilities, and their families
- developing a shared local focus on measuring and improving the outcomes experienced by children and young people with disabilities, and their families

Safeguarding Considerations

9. None

Public Health Implications

10. None.

Environmental and Climate Change Considerations

11. None.

Equalities Impact of the Proposal

12. The Charter aims to ensure support for some of the most vulnerable in society.

Risk Assessment

12.1 Risks that may arise if the proposed decision and related work is not taken

1. Reputational risk to the H&WBB if Charter not signed. As a national champion Pathfinder for the Children and Families Bill Wiltshire is expected, both locally and nationally, to lead the way in supporting developments and improvements in services for children and young people with special educational needs and disability.
2. The benefits of signing the Charter will not be realised.

12.2 Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks

- | Risk | Action to mitigate the risk |
|-------------------------------------|--|
| 1. Commitments may not be delivered | Ensure suitable arrangements are in place to deliver |

Financial Implications

13. None identified.

Legal Implications

14. None identified.

Options Considered

15. No other options considered.

Conclusions

16. The H&WBB is asked to consider the commitment required by the Charter and to give consideration to signing.

Background Papers

Published documents: For further information about the Charter, including key resources that can support the delivery of commitments and the statutory drivers that underpin each commitment, please go to

<http://www.edcm.org.uk/campaigns-and-policy/health/health-and-wellbeing-board>

The following unpublished documents have been relied on in the preparation of this report:

None

Appendices

Appendix 1 The Disabled Children's Charter