

<b>Name of proposal/policy</b>	Review of short breaks provision in Northamptonshire	<b>Budget number (if applicable)</b>	N/a
<b>Service area responsible</b>	Learning Skills and Education; Quality and Performance	<b>Cabinet meeting date</b>	19 October 2017
<b>Name of completing officer</b>	Dr Rachel Sanson	<b>Date EqIA created</b>	18 September 2017
<b>Approved by Director / Assistant Director</b>	Alison Shipley	<b>Date of approval</b>	6 October 2017

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'Due regard' to:

- Eliminating discrimination, harassment and victimisation
- Advancing equality of opportunity
- Fostering good relations

We do this by undertaking equality impact assessments (EqIAs) to help us understand the implications of policies and decisions on people with protected characteristics – EqIAs are our way of evidencing this.

All assessments must be published on the NCC equalities web pages. All Cabinet papers where an EqIA is relevant **MUST** include a link to the web page where this assessment will be published. If you require assistance in getting your EqIA published, please contact [equalities@northamptonshire.gov.uk](mailto:equalities@northamptonshire.gov.uk)

## PART 1

### Description of current provision/policy and main beneficiaries/stakeholders

Northamptonshire County Council currently provides funding for a range of residential and non-residential short breaks. Short breaks are part of a continuum of services which support children in need and their families. They include the provision of day, evening, overnight and weekend activities for the child or young person, and can take place in the child's own home, the home of an approved carer, or in a residential or community setting.

Short breaks for disabled children are now well recognised to be a vital service which help families with disabled children to lead ordinary lives. The importance of short breaks was reflected first through significant investment under the Aiming High for Disabled Children programme and then through the introduction of new legislation, in particular the Breaks for Carers of Disabled Children Regulations 2011.

*What is currently on offer?*

Northamptonshire County Council is committed to ensuring children and young people with disabilities can access and enjoy all the services and settings in their community that their non-disabled peers do. This is achieved by supporting mainstream holiday clubs, after school clubs, nurseries and other provisions to ensure they can provide a safe and fun short break facility for disabled children and young people.

Some children and young people with disabilities however need to access services and provisions at a targeted level. This is usually because they have more complex needs or have other issues which mean that universal or mainstream services may not fit their individual needs.

To meet the more complex needs of those children and young people, we currently provide the following short break services at targeted level across a number of different contracts:

- 11 holiday clubs running across Northamptonshire (in Daventry, Kettering, Northampton, Wellingborough and East Northants) including:
  - Pan-disability activities for children and young people;
  - Clubs specifically for children with Profound and Multiple Learning Disabilities (PMLD);
  - Clubs for children with Autistic Spectrum Disorder (ASD); and
  - Services for those who are visually impaired;
- 4 after school clubs for disabled children and young people ranging across special schools, academies and third sector organisations;
- 7 Saturday clubs for children and young people with disabilities offering the opportunity of enjoyable leisure activities and a rest for parents and carers. Activities cater for a range of disabilities but also include clubs for children with PMLD and for children with ASD;
- 5 youth clubs specifically for young people with disabilities across the county (East Northants, Daventry, Brackley, Wellingborough and Kettering);
- A specialist sitting service to provide qualified child minders as sitters for disabled children and young people in their own home;
- Services are also in place to offer advice and support on Attention Deficit Hyperactivity Disorder (ADHD), on visual impairment and on deaf/hard of hearing children to families in the community;

- We have a contract in place to support siblings of children and young people with Special Educational Needs and Disabilities; and
- In addition we have a contract that provides a sleep service to children and families with ADHD.

All of these services can be accessed directly by parents on behalf of their children.

For children and young people who have a significant complexity of need and/or their family situation is complex, specialist services are available. These services are accessed via a social work assessment and sometimes a Continuing Health Care Assessment, which identifies the need of the child and the family and identifies appropriate services to meet these needs. This may include:

- Personal Assistance;
- Domiciliary Care;
- Direct Payments; and
- Residential Short Breaks.

In particular, residential short breaks are currently run from 3 units across the county:

- The “South Unit” based at John Greenwood Shipman House in Northampton has 6 beds available for children with physical disabilities with an associated learning disability, 4 beds for children with severe learning difficulties and 1 emergency bed;
- The “North Unit” based at The Squirrels in Rushden has 6 beds for children with physical disabilities and an associated learning disability; and
- 82 Northampton Road in Wellingborough has 6 beds for children on the autism spectrum.

Children and young people may spend a specific number of nights at one of the units per month, allowing them to try new activities, meet new people, work on their skills for independence and providing a break for parents and carers.

### Description of proposal under consideration/development

Due to a range of short breaks contracts ending and a withdrawal of funding from the Clinical Commissioning Groups for our residential short breaks service, we intend to re-model (through consultation and co-production) and re-commission the short breaks offer in Northamptonshire.

It is essential and legislatively expected that Local Authorities adopt a participatory approach to commissioning decisions in relation to short breaks, involving children, young people and families at every stage in the decision.

Between March and July this year, substantial consultation with stakeholders, children and families took place as part of the 20:20 Vision for SEND in Northamptonshire. This comprised of a series of events and consultative mechanisms which gathered information to co-produce with children, young people and their parents the priorities for improving outcomes for the future.

Northants Parent Forum Group have also undertaken a consultation with parents regarding short breaks. Their report has been presented to the Disabled Children and Young Peoples' Delivery Group for information and will form part of the consultation process.

Building on the results from this, and the 20:20 vision, it is proposed that we undertake a targeted six-week consultation with children, young people and families regarding the principles and features of short breaks they would like see going forwards.

As further models of delivery are co-produced, this EqIA will be updated so that the full impact of any proposals are understood.

**Data used in this Equality Impact Assessment (general population data where appropriate but each EqIA should contain information on people who use the service under consideration – if this is not applicable to your proposal then you probably do not need to do an EqIA)**

Data Source (include link where published)	Please summarise what the data tells us – for example “X number of people use this service, X are male, Y are female etc”																														
Contracts due to expire and therefore under review	<p>We currently have a number of contracts relating to short breaks that are delivering services to children with SEND and their families. These contracts include –</p> <table border="1" data-bbox="808 762 2130 1442"> <thead> <tr> <th>Provider</th> <th>Service</th> <th>Value 2017/18</th> </tr> </thead> <tbody> <tr> <td>Billing Brook School</td> <td>After School Club and Summer Play Scheme</td> <td>£36,000</td> </tr> <tr> <td>Fairfields School</td> <td>After School Club, Saturday Club and Holiday Club</td> <td>£40,900</td> </tr> <tr> <td>Kingsley Special Academy Trust</td> <td>After School Club and Holiday Club</td> <td>£36,000</td> </tr> <tr> <td>Isebrook College</td> <td>After School Club</td> <td>£18,000</td> </tr> <tr> <td>Groundwork Northamptonshire</td> <td>Farm based – After School Club, Saturday Club and Holiday Club</td> <td>£38,000</td> </tr> <tr> <td><i>No contract holder currently</i></td> <td>PMLD East Northants (Raunds) Holiday Club</td> <td>£48,204</td> </tr> <tr> <td>Aspirations Wellbeing</td> <td>Evening Leisure and Sports Club</td> <td>£19,890</td> </tr> <tr> <td>Action for Children</td> <td>Saturday and Holiday Club in Kettering</td> <td>£18,700</td> </tr> <tr> <td>Action for Children</td> <td>Saturday and Holiday Club in Wellingborough</td> <td>£18,700</td> </tr> </tbody> </table>	Provider	Service	Value 2017/18	Billing Brook School	After School Club and Summer Play Scheme	£36,000	Fairfields School	After School Club, Saturday Club and Holiday Club	£40,900	Kingsley Special Academy Trust	After School Club and Holiday Club	£36,000	Isebrook College	After School Club	£18,000	Groundwork Northamptonshire	Farm based – After School Club, Saturday Club and Holiday Club	£38,000	<i>No contract holder currently</i>	PMLD East Northants (Raunds) Holiday Club	£48,204	Aspirations Wellbeing	Evening Leisure and Sports Club	£19,890	Action for Children	Saturday and Holiday Club in Kettering	£18,700	Action for Children	Saturday and Holiday Club in Wellingborough	£18,700
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	Action for Children	PMLD Northampton – Saturday and Holiday Club	£55,000
	Action for Children	PMLD Daventry – Saturday and Holiday Club	£55,000
	Autism Concern	Activity Club for those with Autistic Spectrum Disorder (ASD)	£97,000
	Action for Children	Youth Club in Daventry	£12,000
	Action for Children	Youth Club in Brackley	£12,000
	Olympus Care Services	Youth Club in Northampton for those with ASD	£10,000
	Olympus Care Services	Youth Club in Wellingborough	£20,000
	Right Resolution CIC	Youth Club in Kettering	£20,000
	Northamptonshire Association for the Blind	Services for those with visual impairment	£27,500
	Deaf Connect	Services for those with audio impairment	£21,000
	Action for Children	Support for the siblings of children with SEND	£28,000
	Delos	Support for young people with SEND	£15,000
	Autism Concern	Support Service for families with children with ADHD	£62,500
	Scope	Support Service for families with sleeping issues	£142,802
	Northamptonshire Healthcare Foundation Trust	Residential Short Breaks	£2,638,429
Services delivered by these contracts	<p>In youth clubs, a minimum of 90 children and young people receive a service  In holiday clubs, a minimum of 120 children and young people receive a service  In Saturday clubs, a minimum of 55 children and young people receive a service  In after school clubs, a minimum of 50 children and young people receive a service  In sibling support group programmes, a minimum of 70 children and young people receive a service  In residential short breaks, there are on average 125 children and young people accessing the service</p>		

In addition to these children, young people their families can access support around visual and audio impairment, ADHD, SEND more widely and sleep services.

Joint Strategic Needs Assessment of Children and Young People in Northamptonshire, January 2015

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=758>

Locality profiles:

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=759>

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=760>

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=761>

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=762>

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=763>

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=764>

<http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=765>

The JSNA includes demographic data and locality profiles – and specific info on perinatal depression (pp.38-39), children’s mental health (p.99-101) and self-harm (p.102).

According to the Children’s and Young People’s Mental Health and Wellbeing Profile (2014) 9.2% of children aged 5-16 have some form of mental disorder; this compares favourably with the 9.6% estimate for England. The report says that the prevalence of emotional disorders in 5-16 year olds is 3.6% (England value 3.7%), conduct disorders 5.5% (England value 5.8%) and hyperkinetic disorders 1.5% (England value 1.5%).

There are 103,453 children aged 5-16 in Northamptonshire and by applying the above prevalence rates, the following estimated numbers of children by locality could have different forms of mental disorders:

District	Population 5-16	Prevalence of emotional disorder	Prevalence of conduct disorder	Prevalence of hyperkinetic disorder
Corby	9,542	344	525	143
Daventry	11,336	408	624	170
East Northamptonshire	13,307	479	732	200
Kettering	13,949	502	767	209
Northampton	31,104	1120	1711	467
South Northamptonshire	13,030	469	717	195
Wellingborough	11,185	403	615	168
<b>Northamptonshire</b>	<b>103453</b>	<b>3724</b>	<b>5689</b>	<b>1552</b>

As indicated in Future in Mind, the last UK epidemiological study suggested that less than 25% – 35% of those with a diagnosable mental health condition accessed support.

The JSNA highlights further information taken from social care initial assessment, which allows the practitioner to tick any/all factors identified at the end of the assessment, and shows that 11% (634)

	<p>of initial assessments completed from April to November 2014 identified mental health in the child/young person as a risk factor. This locally evidences the national view that 1 in 10 children need support with mental health problems.</p> <p>The ambition to reduce wait times will enable services to reach more young people earlier. In addition, the development of self-referral routes will allow children and young people to access services directly themselves, rather than having to disclose to a GP or teacher, for example, first.</p> <p>In addition we are aligning the Emotional Wellbeing and Mental Health pathway with the County's Early Help pathway. In this way we hope to be able to respond to multiple presenting needs and ensure that children and families receive the range of support required at the earliest stage possible.</p>
<p>Health needs of children and young people in Northamptonshire, with emphasis on mental health, March 2015</p> <p><a href="http://www.northamptonshireanalysis.co.uk/resource/view?resourceId=653">www.northamptonshireanalysis.co.uk/resource/view?resourceId=653</a></p>	<p>This report focuses on the health needs of children and young people in Northamptonshire, and pays specific attention to mental health issues. In particular it includes a section on disabilities and learning disabilities (please see pp.122-128).</p> <p>The report sets out the scale of C&amp;YP with disability, including learning disability, in Northamptonshire:</p> <ul style="list-style-type: none"> <li>• 1070 primary school children with statements</li> <li>• 1275 secondary school children with statements</li> <li>• 3590 children with Special Educational Needs</li> <li>• 916 children with Autistic Spectrum Disorder known to schools</li> <li>• 2442 children with learning difficulties known to schools</li> <li>• 879 children with learning difficulties estimated to have a mental disorder</li> </ul> <p>In addition, in September 2013 Northamptonshire reviewed those C&amp;YP with disabilities classified as children in need (CIN). 440 were logged as having a disability. The most frequent diagnoses were of autism or Aspergers syndrome and a classification of special educational need.</p> <p>The description of these disabilities includes the information shown below:</p>

<b>Disability Description</b>	<b>Total</b>
Behaviour – a condition entailing behavioural difficulties includes Attention Deficit Hyperactivity Disorder (ADHD).	15
Communication – speaking and/or understanding others.	11
Consciousness – seizures.	6
Diagnosed with autism or Asperger Syndrome – diagnosed by a qualified medical practitioner as having classical autism or Asperger syndrome.	189

Needs Assessment Report: Mental Health of Children and Young People, February 2015



Report on mental health in children in N

This report, building on the JSNA, outlines what we know (and gaps in knowledge) about children and young people's emotional wellbeing and mental health in Northamptonshire; including identification of specific risk factors and their prevalence across the county.

Specific risk factors that are identified are:

- Risk Factor 1: Children living in poverty
- Risk Factor 2: families where parents are unemployed
- Risk Factor 3: families where parents have low educational attainment
- Risk Factor 4: who are looked after by the Local Authority
- Risk Factor 5: children with disabilities (including learning disabilities)
- Risk Factor 6: from Black and other ethnic minority groups
- Risk Factor 7: who are lesbian, gay, bisexual or transgender (LGBT)
- Risk Factor 8: who are in the criminal justice system
- Risk Factor 9: who have a parent with a mental health problem
- Risk Factor 10: who are misusing substances
- Risk Factor 11: who are refugees or asylum seekers
- Risk Factor 12: in gypsy and traveller communities
- Risk Factor 13: who are being abused or neglected
- Risk Factor 14: being a young carer

Greater and quicker access to services will enable a more robust access route to those who are often traditionally hard-to-reach. If we can get the right support in place more quickly it means that we can ensure that specific risk factors do not impede a swift resolution for those young people.

Cost template for ASD / ADHD (part of local plan submission)

National epidemiology is 1% of total population with ADHD/ASD. There were 155,575 CYP aged 17 or under in Northamptonshire (April 2013) and so approximately 1,550 Northamptonshire children have a diagnosable neuro-developmental condition. Currently in excess of 1,000 children and young people are referred per annum but less than a quarter ends up with a diagnosis. So whilst perhaps 250 CYP are diagnosed, and need support, a further 750 may have traits and need some support. As at 1<sup>st</sup> August, there were 304 CYP awaiting assessment:

Wait time	No. of CYP
0 – 3 months	49
3 – 6 months	76
6 – 9 months	85
9 – 12 months	55
12 + months	39

<http://www.autism.org.uk/about-autism/myths-facts-and-statistics/>

According to the National Autistic Society (NAS), the latest prevalence studies of autism indicate that 1.1% of the population in the UK may have autism. This means that over 695,000 people in the UK may have autism, an estimate derived from the 1.1% prevalence rate applied to the 2011 UK census figures.

The prevalence rate is based on two relatively recent studies, one of children and the other of adults. The prevalence study of children, (Baird G. et al., 2006) looked at a population in the South Thames area. The study of adults was published in two parts, Brugha et al (2009), and The NHS Information Centre, Community and Mental Health Team, Brugha et al (2012). This is the only known prevalence study to have been done of an adult population.

NAS also points to issues of co morbidity that must be considered and sets out that between 44% and 52% of people with autism may have also have a learning disability.

Fombonne et al (2011), in their research review of 14 prevalence studies that mentioned IQ, found a range of 30% to 85.3%, with a mean of 56.1%, of people without learning disabilities.

Emerson and Baines (2010) in their meta-analysis of prevalence studies found a range of people with learning disabilities and autism from 15% to 84%, with a mean of 52.6%.

NAS suggests that five times as many males as females are diagnosed with autism. The proportion of males as opposed to females diagnosed with autism varies across studies, but always shows a greater proportion of males. Fombonne et al (2011) found a mean of 5.5 males to 1 female in their research review. Baird et al (2006) found a male to female ratio of 3.3:1 for the whole spectrum in their sample. The Adult Psychiatric Morbidity Survey looked at people in private households, and found a prevalence rate of 1.8% male compared with 0.2% female, (Brugha et al, 2009).

However, when they extended the study to include those people with learning disabilities who had been unable to take part in the APMS in 2007 and those in communal residential settings, they found that the rates for females were much closer to those of the males in the learning disabled population (The NHS Information Centre, Community and Mental Health Team, Brugha et al., 2012).

NAS note that autism spectrum disorders are under-diagnosed in females, and therefore the male to female ratio of those who have autism may be closer than is indicated by the figure of 5:1.

Further analysis

Children with disabilities face a range of inequalities, including access to services, health outcomes and educational attainment.

It has been estimated that between 3 and 5.4% of children have a disability (<http://www.ucl.ac.uk/ioe/departments-centres/centres/thomas-coram-research-unit>), in Northamptonshire this would equate to between 6,551 to 11,792 children (based on ONS Mid-Year Estimates, 2015).

	Total Population	Lower Estimate (3%)	Upper Estimate (5.4%)
0 to 4	47,168	1,415	2,547
5 to 9	47,739	1,432	2,578
10 to 14	41,971	1,259	2,266
15 to 19	42,024	1,261	2,269
20 to 24	39,473	1,184	2,132
Total	218,375	6,551	11,792

<https://www.northamptonshireanalysis.co.uk/advanceddataviews/view>

For those with a Statement or an EHCP, and those at the SEN stage without a Plan, a Primary Need will be identified for each of these children / young people. In some cases 'secondary' or 'SEN' can be identified. The SEN types are listed below, in descending order with the number and percentage of children and young adults with a SEN or EHCP with that particular primary type in Northamptonshire, January 2016:

- Speech, Language and Communication Needs (SLCN) 23.8% (1,514)
- Moderate Learning Difficulty (MLD) 21.5% (1,384)
- Behavioural, Emotional and Social Difficulties (BESD) 19.1% (1,212)
- Specific Learning Difficulty (SpLD) 10.5% (669)
- Autistic Spectrum Disorder (ASD) 7.9% (504)
- Physical Disability (PD) 2.9% (183)
- Hearing Impairment (HI) 1.9% (118)
- Severe Learning Difficulty (SLD) 1.6% (102)
- Multi-Sensory Impairment (MSI) 1% (90)
- Visual Impairment (VI) 1% (61)
- Profound and Multiple Learning Difficulty (PMLD) 0.4% (26)

For further information regarding Northamptonshire demographics, please visit Northamptonshire Analysis:

<http://www.northamptonshireanalysis.co.uk/>

Tick the relevant box for each line by using a capital 'P' to make a <input type="checkbox"/>	Based on the above information, what impact will this proposal have on the following groups?			
	Positive	Negative	Neutral	Unsure
Sex			✓	
Gender Reassignment			✓	
Age				✓
Disability				✓
Race & Ethnicity			✓	
Sexual Orientation			✓	
Religion or Belief (or No Belief)			✓	
Pregnancy & Maternity			✓	
Human Rights (Please see articles in toolkit)				✓
Other Groups (rural isolation, socio-economic exclusion etc)				✓

Initial impact	
Explain your findings above	Actions identified to mitigate, advance equality or fill gaps in information
Because the consultation will inform the service redesign, it is difficult to be certain of the impact at this stage, although by its nature an service redesign will have an impact on children and young people (with disabilities), their parents, carers and families.	Short breaks review will ensure that the views of children and young people, parents and carers and other stakeholders are taken into account and inform the service redesign.

Do you need to undertake further work (e.g. consultation, further equality analysis) based on the impact and actions identified above? If yes, set this out below and then carry out the work and complete Part 2
<p>Consultation and engagement will include:</p> <ul style="list-style-type: none"> <li>• A survey for children and young people, devised by the young people from Shooting Stars;</li> <li>• A survey for parents and carers, to be agreed by the Northamptonshire Parents Forum;</li> <li>• Attendance at established meetings, groups and fora to field opinions, concerns and ideas;</li> </ul>

- Targeted engagement with families currently using the services; and
- Social media engagement to gain wider viewpoints and provide transparency.

In addition, we will establish or utilise existing focus groups enable co-production throughout the process of review, design and re-commissioning.

The consultation is schedule to run for a 6-week period, from 9.00am on Thursday 26th October to 5.00pm on Wednesday 6th December 2017. The views of children and families will then be collated and used to inform service design going forwards. It is hoped that Delegated Authority to make the relevant decisions regarding model of delivery and re-commissioning will be granted by Cabinet.

All opportunities and findings will be detailed on the Local Offer web pages to enable as wide a participation as possible and to ensure that we are transparent in our plans.

Short breaks review will ensure that the views of children and young people, parents and carers and other stakeholders are taken into account and inform the service redesign; and the EqlA will be updated when we have more information (following consultation) on what our families want to see.

**PART 2 – if required**

<b>Consultation, follow up data and information gathered from actions identified above</b>	
	<b>What does this information tell us?</b>
TBC	

<b>Final impact analysis (taking the findings from Part 2 into account) – including review date if required</b>
TBC