

Education, Children and Families Committee

10am, Tuesday, 19 May 2015

Progress on the Implementation of Self-directed Support in Children and Families

Item number	7.15
Report number	
Executive/routine	
Wards	All

Executive summary

[The Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#) came into effect on 1 April 2014, building on the [National \(ten-year\) Strategy for Self-directed Support](#), published in 2010. The overall aim of the strategy and legislation is to offer families the opportunity to exercise as much choice and control as they wish over the way in which their child's care and support needs are met, in order to achieve the outcomes that are important to them.

In June 2014, Audit Scotland produced a report on the progress made by both the Scottish Government and local authorities in implementing self-directed support, based upon an investigation undertaken in the early part of 2014.

In February 2015 an internal Assurance Review report of the Council's Personalisation Programme was published.

This report provides an overview of the first year's operation of self-directed support for children and families in Edinburgh; it responds to the key recommendations by Audit Scotland and the Review Team; and it details the challenges still to be addressed.

Links

Coalition pledges	P1
Council outcomes	CO3
Single Outcome Agreement	SO3

Progress on the Implementation of Self-directed Support in Children and Families

Recommendations

The Council is asked to:

- 1.1 Note the progress being made in implementing the requirements of the [National Strategy for Self-directed Support](#) and the [Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#), in respect of children and families.
- 1.2 Identify the issues that they would like to see covered in future reports concerning the implementation of self-directed support.

Background

- 2.1 The Scottish Government's vision for the future delivery of social care support is set out in '[Self-directed Support a National Strategy for Scotland](#)' published in [2010](#) and the [Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#) which came into effect on 1 April 2014. Draft regulations and statutory guidance relating to the Act were the subject of public consultation during the summer of 2013. The Council's response to the consultation was approved by Corporate Policy and Strategy Committee on 6 August 2013. The Scottish Government published guidance in January 2014.
- 2.2 The [Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#) enshrines the Scottish Government's strategy for self-directed support in legislation and places a number of duties on local authorities. The main duties are set out below:

To have regard to the following principles when carrying out its duties:

- Children, young people and families must have as much involvement as they wish in both the assessment of their needs, and the provision of any support to meet these needs;
- Children, young people and their families must be provided with any assistance that is reasonably required to enable them to express their views about the options available to them, and make an informed choice about these options;
- Local authority employees and representatives must collaborate with the individual in relation to the assessment of their needs and provision of support to meet them;
- Local authority employees and representatives must take reasonable steps to facilitate the principles that a person's dignity and right to participate in community life are respected.

- 2.3 To offer children, young people and families eligible for social care support a choice of four mechanisms, referred to as the four options of self-directed support, through which their care and support needs can be met which meet agreed outcomes:
- Option 1 a direct payment – the money available to meet the child/young person’s needs is transferred to them in order for them to purchase and manage their own care;
 - Option 2 the child/young person requiring support chooses the way in which their support will be provided and asks the Council or a third party to arrange it on their behalf;
 - Option 3 the council chooses and arranges the support;
 - Option 4 the child/young person’s needs and outcomes are met through a mix of the above options.
- 2.4 To provide a child/young person, and their family who will be offered the four options of self-directed support, an estimate of how much the Council thinks it will cost to meet their needs (indicative budget); this is the amount available to them and their social worker, or whoever is supporting them, to plan how their needs will be met and will achieve agreed outcomes.
- 2.5 To facilitate the development of a diverse market with a variety of suppliers offering a wide range of services for families.
- 2.6 The Council must implement the new legislation for all new referrals and all reviews of existing service users taking place after 1 April 2014. Existing service users are being advised of their rights under the self-directed support legislation, as part of the ongoing review process.
- 2.7 The City of Edinburgh Council’s Children with Disabilities Team was in a position to meet the requirements of the legislation for all new referrals from 1 April 2014 with the implementation of a new Funding Allocation System. However, given the scale of the change involved and the transformational nature of that change, the arrangements put in place need to be reviewed and revised in the light of experience, monitoring and evaluation. From 1 April 2014 should therefore be seen as the start of implementation, rather than the point at which implementation is completed.
- 2.8 Audit Scotland’s review of implementation across Scotland included an in-depth study of four councils, including The City of Edinburgh Council. Audit Scotland published its [report on self-directed support on 12 June 2014](#), together with a document setting out issues for councillors to consider and a self-assessment checklist for council officers. The report did not give any indication of progress in individual local authorities, but identified risks and examples of good practice to help councils with the ongoing implementation of self-directed support.

- 2.9 A briefing based on the checklist for councillors was produced in June 2014 and circulated to members of the Health, Social Care and Housing, Children and Families and Corporate Policy and Strategy Committees.
- 2.10 In August 2014, all 32 local authorities were asked to complete a 'stock take' survey detailing:
- how the resources provided to each authority by the Scottish Government to implement self-directed support have been utilised;
 - priorities for future investment should further funding be made available;
 - how councils are responding to the Audit Scotland report;
 - details of the monitoring and evaluation arrangements each council has in place;
 - the perceived facilitators for and barriers to successful implementation of self-directed support.
- 2.11 In February 2015 a report was also delivered from an internal scheduled Assurance Review of the Personalisation Programme. This was undertaken at a critical stage boundary of the Personalisation Programme between the completion of Phase 1 (readiness), and the next phase, embedding self-directed support (through the key themes of sustaining change, systems capability and monitoring progress).
- 2.12 The review provided an opinion on the implementation of Phase 1 and the readiness for Phase 2. Overall the review team found that the Personalisation Programme had 'laid good foundations', that there was 'confidence in delivery' and 'a positive continual improvement culture in the programme' and a 'desire to enhance and embed the changes within the organisation'. Appendix 1 details the Priority Recommendations.
- 2.13 This report draws upon both the findings, recommendations and checklists produced by our internal Assurance Review Report as well as Audit Scotland and the response to the Scottish Government stock take.

Main report

Overall approach to implementing personalisation and self-directed support

- 3.1 The Council's strategic approach to the implementation of self-directed support has been to take the opportunity to carry out a wider review of the way in which social care to individuals and families of all ages is provided in Edinburgh. This approach has involved considering not only the requirements of the [National Self-directed Support Strategy](#) and [Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#), but also wider considerations, for example the recommendations of the [Christie Commission on Public Sector Reform](#).

- 3.2 Over the last year, delivery of the changes required for personalisation and self directed support has been taken forward through a programme approach led by Health and Social Care on behalf of The City of Edinburgh Council. It has involved Children and Families, Finance and Legal services, partners from the third and independent sectors and people who use social care services. The Personalisation Programme has had 9 separate workstreams, each of which has been dealing with a key aspect of the agenda.
- 3.3 Children and Families has its own workstream as well as involvement in the other eight (Prevention, New Models of Delivery; Market Shaping; Financial Frameworks; Communication and Engagement; Network to Shape our Future; Workforce and Organisational Development and Supporting Infrastructure), ensuring that the interests of children and families are fully taken into account.
- 3.4 The [Audit Scotland report](#) recognises that councils have a substantial amount of work to do to implement the cultural and practical changes required for self-directed support over the next few years. The report includes a number of themes:
- operational delivery;
 - partnership working;
 - managing the budget;
 - effective leadership;
 - clear plans for implementation;
 - careful assessment and management of risks;
 - monitoring and evaluation.

Operational delivery

- 3.5 To date, two new training modules have been developed and delivered city-wide to staff, namely the Self Directed Support: Introduction to The Social Care (Self Directed Support) (Scotland) Act 2013 – Implications for Practice (which was developed and delivered in conjunction with Social Work Scotland), and Self Directed Support: Personalisation, Outcomes and Support Planning - Putting it into Practice.
- 3.6 An appointed Implementation Officer has been providing staff drop-in sessions on a regular basis which gives social workers the opportunity to discuss individual cases, and has also supported social workers on visits to assist in talking through the new legislation with families.
- 3.7 Increasingly, those children, young people and their families who are eligible for self-directed support have an outcome focused assessment, are offered the four options of self-directed support and have as much involvement as they wish in the planning, arranging and managing of services to meet their needs and agreed outcomes.

3.8 Between 1 April 2014 and 31 March 2015:

- 95 children (73 existing users and 22 new referrals) were assessed by the Disability Team and reviewed using the new Funding Allocation System tools.
- 53 children (45 existing users and 8 new referrals) have agreed support plans detailing how their eligible needs and agreed personal outcomes will be met (Appendix 2 gives 2 recent examples).
- The Disability Team has a Key Performance Indicator in place which stipulates that all existing service users will have been transferred to one of the four options of self directed support within a period of three years from the implementation of the Social Care (Self-directed Support) (Scotland) Act 2013, as per the table below:

Percentage of children who were receiving a service before 1 April 2014 to have a self-directed support (SDS) plan.		
April 2015	April 2016	April 2017
23%	56%	100%
<i>The target is 100% of all children, who have been assessed, to have an SDS Support Plan in place by April 2017.</i>		

- 3.9 The number of children who were receiving a service as of 1 April 2014 was 238. 26 of those children have since made the transition to Health and Social Care. Therefore, to date 21% of children who were previously receiving a service now have an operational self-directed support plan. This is only 2% below this year's target KPI, however the inaugural Funding Allocation Panel did not take place until 10 July 2014. This figure has therefore been achieved in 9 months.
- 3.10 Preferences of delivery have been recorded for all 53 children who have an agreed support plan. 27 of whom have opted to receive direct payments (Option 1), 2 to be supported through an individual service fund (Option 2), 11 to have their support selected, arranged and managed by the Council (Option 3), and 13 to be supported through a combination of these options (Option 4).
- 3.11 The number of children and families receiving a direct payment as of 31 March 2014 was 32. The number of children and families taking Option1 (a direct payment) to deliver all or part of their support plan as of 31/3/15 was 58. This is a 45% increase.

Partnership working

- 3.12 The collaboration and engagement, which were a key element of the planning and preparation for self-directed support, have continued through mechanisms such as the Programme Board, provider forums, involving frontline staff, and the engagement with service users, carers and other interested members of the public through a number of events.
- 3.13 Engagement with carers and providers has taken place at a number of events including the Market Event held on Sunday 8 March 2015, at The Yard. The day

was organised to give parents and carers more information about self-directed support and for them to chat to service providers and find out more about what they can offer. 13 providers had stalls and the event was attended by 65 parents, carers, children and young people.

3.14 There are also a number of examples of partnership approaches to new ways of working such as:

- the provision of independent assistance with support planning through the Lothian Centre for Inclusive Living and the Edinburgh Development Group;
- the planned involvement of frontline staff, service users and carers in the monitoring and evaluation of self-directed support;
- 'The Drop In' which is a new facility which started in October 2014 with Scottish Government self-directed support implementation funding. It runs every weekend in four community centres across the city for families with a disabled child/young person aged 0-18 years and their siblings. It offers the opportunity to meet with other parents/carers and children can participate in activities. This is a joint project delivered by Community Learning and Development and Fabb. To date, approximately 120 parents, siblings and children with disabilities visit one of the four centres each week;
- Fabb Flex is a service which is also funded using Scottish Government funding given to the local authority to implement Self-directed Support legislation. Fabb Flex is a new flexible mentoring service for young people with additional support needs and Autism interested in getting involved in sport or leisure activities in Edinburgh. Again, it has been established as a one year pilot running from January 2015 and has to date supported nine young people who are choosing to access a range of activities such as going to the gym, Scouts, cycling club, pipe band, film club, animation workshops and golf. There are currently 21 children and young people on a waiting list for this service with referrals being received from parents, social workers, schools and the Educational psychology service. There are two more groups planned for April with the aim to run a further 3-4 in 2015 (Appendix 3 gives some feedback from families).

Managing the budget

3.15 The proposed mechanisms for allocating budgets to individuals were detailed in the [previous Committee Report](#), and the Funding Allocation System was agreed by [Education, Children and Families Committee on 20 May 2014](#).

3.16 The effectiveness of the Funding Allocation System is monitored on an ongoing basis to ensure the needs of clients are being achieved within the overall level of funding available for the service.

3.17 Indicative budgets (estimates of meeting the cost of an individual's assessed eligible needs and agreed personal outcomes) are generated through the

assessment process. All assessments are currently benchmarked and approved by the Funding Allocation Panel to ensure quality, consistency and justification of the indicative budget by the detail of the assessment.

- 3.18 Between 10 July 2014 and 1 April 2015 indicative budgets were generated for 95 children, which is currently 23% of children supported by the service (number of children as of 1 April 2015 is 421 children).
- 3.19 The Funding Allocation System also approves each support plan which generates the personal budget, in order to manage the risks inherent in implementing a new system. Where the amount of the indicative budget is believed to be insufficient to meet the needs of the individual, senior manager approval is required for any increase in budget.
- 3.20 Between 10 July 2014 and 1 April 2015, personal budgets were approved for 53 children following approval of their support plan.
- 3.21 The Funding Allocation Questionnaire and the Indicative Budget Table will be reviewed by 1 July 2015 to ensure that the risks associated with the allocation of budgets to individuals is minimised.
- 3.22 Based on the number of support plans approved since 10 July 2014 the service is confident however that the implementation of self directed support can be achieved within existing resources with the ongoing monitoring and management of the Funding Allocation System.

Effective leadership

- 3.23 A strong programme management approach has been taken to the implementation of self-directed support in Edinburgh. The Programme Team, chaired by the Chief Social Work Officer, has met on a six weekly basis and reported on progress through the Council's Corporate Programme Office.
- 3.24 To date, the changes and implementations detailed in this report have only been successful due to an investment in change management human resources within the central Disability Team. Over the last year, this has been made possible by additional implementation funding by the Scottish Government.
- 3.25 There is ongoing financial commitment for a further year for a self-directed support lead officer for children and families, and a further six months for a self-directed support implementation officer, and an additional 0.5 FTE social worker to undertake reviews within the disability team.

Clear plans for implementation

- 3.26 The Council's strategy for the implementation of self-directed support was set out in the "Whole Systems Approach to the Personalisation of Health and Social Care". Work to deliver the strategy is undertaken by a number of work streams, co-ordinated through a single programme plan. The clear vision and planning in Edinburgh were recognised as good practice in the direct feedback received from Audit Scotland.

- 3.27 Phase 1 of the Personalisation Programme plan has focused largely on implementing the requirements of the self-directed support legislation, and focussing attention on embedding self-directed support in practice through:
- the ongoing roll out of staff training;
 - monitoring the quality of assessments and operation of the funding allocation system;
 - capturing knowledge and experience;
 - reviewing practice, processes and tools in response to experience on the ground;
 - developing and implementing a monitoring and evaluation programme;
 - ongoing dialogue with staff, service users and carers and other stakeholders;
 - sharing experience and learning with other local authorities.
- 3.28 Work is underway to review the existing strategy and plan in order to establish priorities for the second phase of the Personalisation Programme.
- 3.29 Phase 2 of the Personalisation Programme for children and families is focussing on embedding self-directed support, sustaining change, reviewing systems and monitoring progress and measuring outcomes. This will include increasing awareness of self-directed support across staff, the public and service users;
- increasing capacity in terms of information and advice, and ongoing market development to ensure there is real choice for people in need of social care support;
 - extending the roll out of self-directed support for children and families beyond children with disabilities;
 - developing sustainable approaches to investment in prevention;
 - developing opportunities for more efficient and effective ways of working.
- 3.30 In terms of the recommendations within the [Audit Scotland report](#):
- collaboration with staff, service users, carers and other stakeholders has been a key element of the Council's approach to the development and implementation of self-directed support. The Council will continue to build on this approach, including the involvement of stakeholders in the development and implementation of the monitoring and evaluation framework for self-directed support;
 - further work needs to be undertaken around our approach to support planning to ensure that it is proportionate and encourages innovative approaches to the provision of support;
 - the funding allocation system is being monitored and kept under review to ensure it is able to meet the needs of individuals, whilst remaining affordable to the Council;
 - the programme risk register has been reviewed following the implementation of self-directed support and is monitored through the Programme Board and internal reporting systems;

- a briefing note on the [Audit Scotland report](#) and issues for elected members was sent out to elected members;
 - regular reports will continue to be made to elected members through the Council's committee process;
 - an agreement has been developed for the operation of individual service funds under option 2 in consultation with providers.
- 3.31 The focus across Scotland to date has largely been on children with a disability, and the 'Children in Need' agenda remains at its early stages. This has been largely due to an initial lack of clarity around how the legislation applied to young people aged under 18, particularly those subject to statutory measures, and those children in need who do not have a disability.
- 3.32 A Conference focusing on the implementation in Edinburgh of self-directed support into the wider domain of children's social care services took place on 12 March 2015. This was attended by 40 senior managers in order to begin to understand how the legislation could be applied, and to discuss how Edinburgh could do things differently and improve services alongside the children and families we work with. The conference was facilitated by InControl and attended by two projects in England who talked about their own creative uses of self-directed support with children in need.
- 3.33 Two members of staff attended the Self-Directed Support Showcase Event organised by Social Work Scotland on 1 May 2015. At this event a number of local authorities shared different practices they are developing which are relevant to self-directed support.
- 3.34 A pilot project commenced in March 2015 within the Council's Family Solutions Service to explore doing things differently with up to 12 families with a small personal budget. The aims of this project are:
- To work with families who do not have any current social work intervention but whose children face challenges that predict poor outcomes;
 - To provide 'early help' to families by empowering them to build on their strengths and overcome problems that could lead to statutory interventions;
 - To offer families a personalised approach which encourages them to explore their family life; thus enabling them to identify their own strengths and goals;
 - To assist families to make changes which, no matter how small, have some positive impact on the family, alongside more conventional supports offered by the workers;
 - To provide access to a small personal budget which the families can use to invest in services and activities to help them achieve their goals.

- 3.35 To evaluate the impact of these changes and derive lessons for wider implementation of self-directed support.
- 3.36 The Assurance Review Report recommended that ‘a clear documented approach to how the legislation will be applied to the wider children in need agenda to ensure that this is well understood by all the stakeholders at Board level’. This has been recognised as a priority within the coming year.

Careful assessment and management of risks

- 3.37 The Audit Scotland report is very clear about the importance of identifying and managing risks, in particular those associated with:
- the allocation of budgets to individuals;
 - the management of support plans and budgets by third party organisations through Option 2;
 - a reduction in demand for traditional support threatening the viability of services provided directly by local authorities.
- 3.38 Officers are aware of the risks related to the implementation of self-directed support and have identified and managed risks through the use of a risk register since the inception of the Personalisation Programme. All three of the risks identified by Audit Scotland appear on that register, alongside other risks identified locally. The risk register is reviewed regularly at Programme Board meetings.
- 3.39 The approach taken to the management and monitoring of the Funding Allocation System is discussed in section 3.8 above.
- 3.40 The risks related to the establishment of Individual Service Funds through Option 2 are being managed by the development of a formal agreement and set of terms and conditions, which providers must be willing and able to sign up to before the Council will agree to the provider offering this service.
- 3.41 Officers are aware of the potential risks relating to the viability of in-house services. The usage of these services is monitored regularly and services will be remodelled where changes in demand are identified. Over the last year there have been 2 organisational reviews of in-house services and our own residential respite service is beginning to look at more creative and flexible ways of delivering support in the future.

Monitoring and evaluation

- 3.42 The self-assessment checklist for Council officers produced by Audit Scotland is being used to monitor the overall progress in Edinburgh. A copy of the assessment was presented to the Personalisation Programme Board in September 2014.

- 3.43 A Personal Outcomes Evaluation Questionnaire is being developed to use with children and their families who have a support plan. This will assess the impact of self-directed support, by monitoring how successfully the support plans have improve children's lives and met their outcomes.
- 3.44 A framework to embed self-directed support has been established, with a number of separate strands:
- a Self-directed Support Reference Group to consider issues raised through the evaluation and monitoring of practice and develop solutions to outstanding or emerging issues;
 - an Assessment and Support Plan Monitoring Group to oversee the quality of assessments and support plans;
 - a Funding Allocation System Monitoring Group to oversee the operation of the Funding Allocation System, including calibration and impact on budget.

Current challenges

- 3.45 Given the scale of change required to implement self-directed support, it is to be expected that there are a number of challenges remaining, including:
- the level of cultural change required from all stakeholders means that real change is likely to take a long time;
 - staff are getting to grips with new ways of working. New ways of working sometimes take longer, making it necessary to embed a proportionate approach based upon individual needs, outcomes and choices;
 - overall financial pressures can inhibit the ability to think creatively about meeting needs.
- 3.46 The number of children allocated to the Disability Practice Team has marginally increased from 411 (231 allocated and 180 unallocated) as of April 2014 to 421 (262 allocated and 159 unallocated) as of April 2015.
- 3.47 The number of referrals to the Disability Practice Team for a Section 23 assessment has increased from 95 (48 new referrals and 47 existing clients) in the year 13/14 to 128 (60 new referrals and 68 existing clients) in the year 14/15. This is a 35% increase.
- 3.48 Respite Performance Indicators requested by the Scottish Government are still very much focused on number of day and night hours which conflicts with the approaches required to implement self-directed support.
- 3.49 Meeting the needs of young people with autism and a learning disability who present with significant challenging behaviours, as well as the needs of children with complex physical needs who are looked after at home remain a challenge. This is due to a gap in services, providers and a trained and skilled workforce who are able to meet the needs of these young people, particularly at the times required.

Future priorities

- 3.50 The priorities moving forward are largely focused on embedding self-directed support, so that it becomes the “way we do social care” in Edinburgh. This will include:
- embedding self-directed support in practice through:
 - capturing knowledge, experience and stories;
 - ongoing workforce development;
 - reviewing practice, processes and tools in response to experience on the ground;
 - developing, capturing and promoting best practice.
 - sharing with and learning from other authorities;
 - increasing awareness of self-directed support among staff, service providers and the public ;
 - increasing capacity to provide accurate and timely information and advice to families;
 - ongoing market development to ensure real choice;
 - developing our response to prevention;
 - identifying and developing opportunities for more efficient and effective ways of working.
- 3.51 As detailed in the report, significant steps have been made in regards to the implementation of self-directed support in the area of children with a disability, but there is still some way to go in regards to the children in need agenda.
- 3.52 Continued workforce development and engagement will be a real factor in any successful implementation and requires dedicated change management resources and leadership.
- 3.53 The priority is now to drive onwards with the implementation of self-directed support across children and families, focussing on early intervention, prevention, outcomes and ‘doing things differently’. Research has also evidenced that better outcomes, sometimes, with less money have been seen when working ‘with’ families, rather than doing ‘to’ families.

Measures of success

- 4.1 The Council has met the requirements of the Social Care (Self-directed Support) (Scotland) Act 2013 and associated regulations within the prescribed timescale. However, the real measure of the successful implementation of self-directed support within Children and Families in Edinburgh will be the extent to which transformational change is embedded and delivers improved outcomes and quality of life for those who require social care support (see Appendix 2 for such stories). Assessing the impact of self-directed support will be a key element of

the monitoring and evaluation framework which will be developed in partnership with service users, carers, staff and other partners.

Financial impact

- 5.1 The implementation of self-directed support involves a shift in the way in which budgets for service delivery are allocated with the introduction of indicative budgets (estimates of the cost of meeting a person's eligible needs and agreed outcomes) and the right of individual services users to determine how those budgets are utilised.
- 5.2 The Scottish Government has indicated that it expects the move to self-directed support to be cost neutral. This report provides some detail about the indicative budgets being generated through the funding allocation system that has been implemented in Edinburgh; there are also examples of both support packages costing less under self-directed support than the previous system and vice versa. However, after only nine months operation it is too early to draw any firm conclusions. Monitoring of the operation of the funding allocation system will continue and further reports will be submitted to the Committee when more detail is available.

Risk, policy, compliance and governance impact

- 6.1 [The Audit Scotland report](#) highlights the importance of robust and effective risk identification and management in relation to self-directed support. This report details the approach to risk management being taken in Edinburgh and discusses the major risks associated with the implementation of self-directed support locally.
- 6.2 The implementation of Self-directed Support across Edinburgh is thought by the Scottish Government to be cost neutral. There will, however, continue to be work load pressures in the implementation of this new way of working particularly in the Disability Practice Team with the increase in referrals for Section 23 assessments.
- 6.3 The uncertainty in the future shape of services will be monitored closely and will inform future market shaping of both in-house and external providers.
- 6.4 Despite the amount of work which is being undertaken to ensure the Funding Allocation System is calibrated to meet the needs of individuals and to be affordable, this remains to some extent uncharted territory. Audit Scotland has recently identified as a risk for all Scottish councils the requirement to provide individuals with an estimate of the cost of meeting their care and support needs. This risk needs to be managed and monitored carefully.

- 6.5 The operation of the Funding Allocation System is being reviewed to evaluate the following factors:
- the Funding Allocation System is sufficiently flexible to be adjusted in response to issues identified through experience in operating the system;
 - the Funding Allocation System is calibrated in order both to meet the needs of individuals and remain affordable to the Council.
- 6.6 In order to mitigate against the inherent risks involved in such a significant change to the allocation of resources, the following controls will currently remain in place:
- all assessments will be checked by a Funding Allocation Panel prior to the generation of an indicative budget, to ensure that the detail within the assessment supports the level of need identified by the social work practitioner; as well as ensuring equity and monitoring across the funding allocation process;
 - any requests for a level of funding over the amount of the indicative budget will be subject to consideration and approval by a senior manager;
 - monitoring will take place on a monthly basis comparing;
 - the indicative budget with the amount of funding allocated and agreed through support planning;
 - expenditure on new cases compared with that for the same period during the previous year.
- 6.7 It is proposed that reports will be submitted to the Committee on a regular basis to report on further progress and financial impact.

Equalities impact

- 7.1 The fundamental principles of self-directed support are choice and control, enabling people to choose how to live their life and have control over the way in which their care needs are met. The Social Care (Self-directed Support) (Scotland) Act 2013 seeks to ensure that the principles of human rights and equality are central to the delivery of social care by placing a duty on local authorities to have regard to inclusion, collaboration and dignity when carrying out their duties. This report details the way in which it is proposed that these principles are embedded in Edinburgh.
- 7.2 An overarching Equality Rights Impact Assessment has been completed on the Personalisation Programme and separate assessments are being undertaken on specific aspects of the programme, such as the assessment tools and the Funding Allocation System.

Sustainability impact

- 8.1 The impacts of this report have been considered in relation to the three elements of the Climate Change (Scotland) Act 2009 Public Bodies Duties. There are no sustainable impacts in relation to the implementation of Self-directed Support legislation.

Consultation and engagement

- 9.1 Collaboration with key partners including people who use social care services, carers, staff and service providers has been a key element of the planning and implementation of self-directed support in Edinburgh. This report details how this collaborative way of working is being taken forward with the ongoing involvement of stakeholders in the evaluation and monitoring of the impact of self-directed support in the City.
- 9.2 It is recognised by the Scottish Government and Audit Scotland that the implementation of the Self-directed Support legislation will take time and will continue to be developmental. In order to support ongoing consultation the following has been established:
- A Parents/Carers Checkpoint Group, meeting four monthly to discuss matters in relation to Self-Directed support;
 - A newsletter has been developed and issued on a four monthly basis through a school-bag drop to all children who receive special or additional education services. The purpose of this newsletter is to keep children and their families up to date with self-directed support and service developments;
 - A Market Place Event took place in March 2015 at The Yard for providers and families to come together, to provide information sessions and to develop market shaping alongside providers and families;
 - Support to providers through workshops to join our online directory Edinburgh Choices;
 - An online and paper consultation with parents and carers in February 2014 to inform future market shaping and information sessions on self-directed support;
 - Regular engagement and consultation sessions with providers who support children with a disability in Edinburgh to aid the implementation of the legislation and facilitate forward thinking in promoting a diverse and flexible market place for children and families in Edinburgh. This has included the establishment of a 6 monthly providers forum;

- Presentations to established carers/parents groups across the city.

Background reading / external references

A Whole Systems Approach to Self-directed Support in Edinburgh

[National Self-directed Support Strategy 2010-2020](#)

[Social Care \(Self-directed Support\) \(Scotland\) Act 2013](#)

[Progress on the Implementation of Self-Directed Support in Children and Families, Education, Children and Families Committee \(May 2014\)](#)

[Audit Scotland Report on Self-directed Support and associated documents \(June 2014\)](#)

[Education, Children and Families Committee on 20 May 2014.](#)

[Briefing Note for Elected Members Audit Scotland Report on Self-directed Support \(June 2014\)](#)

[Self-Directed Support Self Assessment Checklist for Council Officers \(June 2014\)](#)

[National SDS Questionnaire to local authority SDS Leads \(July 2014\)](#) – Appendix B

Assurance Review Report Personalisation Programme (February 2015)

[Christie Commission on Public Sector Reform](#)

Gillian Tee

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Links

Coalition pledges	P1 – Increase support for vulnerable children including help for families so that fewer go into care
Council outcomes	CO3 – Our children and young people in need, or with a disability, have improved life chances
Single Outcome Agreement	SO3 – Edinburgh’s children and young people enjoy their childhood and fulfil their potential
Appendices	<ol style="list-style-type: none"> 1. Example of scoring system used within the Funding Allocation Questionnaire 2. Extract from the Self-Directed Support and Service Provision Consultation Report January to February 2014 3. Examples of Authorised Support Plans Under Self-Directed Support

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The Priority Recommendations from the Assurance Review Report 4 February 2015

The recommendation of the Review Team is that the following are priority areas for action:

1. Create a clear documented approach to how the legislation will be applied to the wider children in need agenda to ensure that this is well understood by all the stakeholders at Board level.
2. Review and agree the Programme Board membership prior to entry into the next phase of the programme to ensure it reflects the resourcing required to successfully direct the programme to a successful conclusion. Although the Board membership should be kept tight, the programme may wish to consider supplementing membership with finance and service user representatives, and a children in need lead on either a full time or a when required basis.
3. Create a clear plan for the next stage of the programme with target dates, critical success factors and resources required to deliver to the agreed timescales.
4. Analyse the information becoming available through the Funding Allocation System (FAS) and the change in legislation affecting carers to enable the Board to understand and take action on any financial implication.
5. Work (potentially with CPO) to agree an approach to identify and capture key benefits.
6. Engage the reformed Programme Board as a matter of priority to identify any further mitigating actions to address the risks outlined ensuring clear risk owners and risk actionees.
7. Retain close scrutiny of Option 2 in terms of managing and monitoring this change.

Quotes From Parents From the Fabb Flex Project

'He had a great time! I have joined Child to the climbing club. Thank you for finding out about it' – parent

Child is enjoying the bike club, a little reticent to make friends, but being part of the group is good and he is gaining confidence and skills. Many thanks again for introducing us to the group and we will keep in touch' – parent

'They both had a great time. Child was telling me he had had a good workout and was knackered so that's good. He is looking forward to next week' – parent

'The gym is going really well and he is loving it. He has even started to be more conscious about his eating and has started to lose a little weight – we are all delighted' – parent

Two Examples of Authorised Support Plans Under Self-Directed Support

Case One

Ben is a five year old boy with autism and learning disabilities. Previous to self-directed support he was assessed and offered an in-house monthly group service for children under 10, which he attended three times but disliked immensely. The aim of the group was to offer children the chance to mix with their peers and learn new skills in a fun environment and provide a short break for the family. However, Ben has heightened sensory experiences and prefers to be in a quiet environment, so therefore struggled with this group. Because of his discomfort in this environment, Ben was said to perform obsessive rituals and exhibit a lot of challenging behaviour. He was assessed as requiring 1:1 support throughout activities to manage this behaviour, which was a result of high anxiety levels. Had he continued to access this service because it was the only available option, this would have been at a cost to the Council of £4400 per annum, despite failing to meet Ben's needs.

Ben was reassessed through self-directed support and offered a budget of up to £3510. His family took some time exploring what Ben's needs and outcomes were and sourced activities and supports they felt would allow Ben to live life to his full potential. They created a support plan for Ben, which included the following:

- 3 hours 1:1 provider support every fortnight to allow Ben to build a consistent relationship with a known worker and to take part in community activities.
- Holiday playscheme throughout the summer – to allow Ben to maintain a routine and have fun, inclusive experiences during the holidays.
- Two blocks of swimming lessons – To teach Ben a new and valuable skill, while encouraging him to be active.
- Specialised trampolining lessons for children with additional needs – to allow Ben the enjoyment of trampolining in a comfortable and safe environment, adhering to his needs.
- Music therapy classes at home – To help Ben focus and relax in his home environment.
- Weighted blanket – to help reduce Ben's anxiety and aid sleep.
- Dark Den – To offer a safe place for Ben to go when his anxiety or sensory issues are heightened.
- Tricycle and safety equipment – To offer an outdoor activity that Ben can take part in with his family.
- Sensory lights – to help Ben relax and have some time alone.

Ben's support plan was authorised at the end of November 2014. In a follow up discussion 4 months later, his mother explained that self-directed support was the best thing that had ever happened to them, and they couldn't believe its success. She also shared her feeling that, 'Everyone should have SDS'.

For a family that struggled to find support to meet their son's needs, they now feel that he has opportunities to be included in society, as well as having access to facilities that assist in helping him relax and experience reduced levels of anxiety. In turn, this has allowed the family to spend more quality time together, as well as having some time apart where the family can be assured that Ben is enjoying the activities he is taking part in.

Case Two

Evan is a 7 year old boy who was previously allocated 4 hours per week support from a third sector provider at a cost of £1900. His parents struggled to find consistent carers who were able to meet Evan's needs. Evan is an active boy who likes to spend his time outside and try new things. He struggles with social communication but is keen to make friends and play with other children his age. The challenges that his autism presented to him and other people, made this difficult as often his behaviour was challenging and he was unaware of this being socially inappropriate. His parents felt this support was not meeting his needs, and found him difficult to manage within the family home. The school also felt that Evan struggled at times in the classroom environment and with his behaviour management.

Evan was assessed through self-directed support and awarded a budget of £1170, which his family spent in the following way:

- Weekly Athletics club – to keep Evan active and to allow him to feel part of a group.
- Holiday Playscheme – to ensure Evan has routine and opportunity to take part in activities throughout the holidays.
- Sense Scotland Activity week – Sense Scotland offer free play support in the holidays but are based in Glasgow. We agreed to fund the accommodation for Evan's family so they can have five nights away together, and his parents can enjoy a bit of a break during the day while Evan gains the opportunity to try new activities.
- Bike – Evan loves being outside so this allows him to be active outdoors and spend time with his dad
- Soft Play Centre pass – Evan loves this play centre and the pass allows him unlimited access. He has made friends through his attendance and this has built his confidence.
- 50% funding towards Games console and games – Evan took part in a PHD study of how certain computer games can help Autistic children upgrade and improve their responses, language and understanding. This money allows the skills Evan built through the study to be continued at home.
- Edinburgh Leisure Soft Play Membership - The structures used to build the play centres offer Evan the chance to learn new climbing skills and encourage him to be active. He also makes friends with the children he meets here. There are coffee areas in full view of all the play centres, allowing Evan's parents chance to watch him while recharging their batteries.

The support plan was reviewed seven months after its commencement and both parents were extremely pleased with the progress Evan has made since his personal budget became available. They feel that prior to the personal budget Evan was isolated and misunderstood, and that there has been huge progress in many ways this year. He is “safe, happy, and enjoying school”. Evan’s parents feel his ability to interact has improved greatly since he started visiting the Edinburgh Leisure soft play facilities with his membership pass. Through his attendance he has made some friends who encouraged him to meet them at the soft play centre.

Evan’s parents feel that his confidence has grown through the “healthy” friendships he has made, and he now makes arrangements with the other children without his parents help. He is better able to keep to instructions because he values these friendships and doesn’t want to risk exclusion. His parents explained that “when Evan’s mood is better, he can achieve more”. His dad explained that the budget has offered a lot of opportunities, so Evan doesn’t get bored and act out in his behaviour so often. Evan previously had a fear of heights, which he has overcome thanks to the complex climbing frame at soft play.

Evan’s teacher described a “100% change in Evan’s speech and performance” and said he was a “different child”. His family have also found out about free activities for Evan through their increased involvement in the community.

The family didn’t feel there were great challenges in organising Evan’s support. All the activities are things he enjoys doing. They feel self-directed support has offered straightforward, valuable support to their son and their whole family.