

Confidential Session

Short Breaks

Presentation for Health and Care committee

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Powys

Short Breaks

Spectrum of Services

- **Universal services**, eg, theatre groups, holiday clubs, after school clubs, sports clubs
- **Targeted Support** Credu support, hospice services, food and fun, honeypot, Powys childcare team, charitable support for holidays and specialist items
- **Specialist Assessed Support** Child open to IDS team at Care & Support level

Direct Payments (majority), Foster care respite (less than 5 children), care agency support (less than 5 children), residential day support or overnight stays

Specialist Assessed Support budget

23/24

- Short breaks spend was around £1.2mill (£1 mill budget, with overspend of £200k)
- £242k PCAN budget spent on A4C commissioned service

24/25

- Short break budget of just over £1 million. Projected to come in at budget (very early in tax year)
- PCAN £242k. Contract was not renewed as the tenders did not meet needs of service, and supplementary was not good value. 37 children and families affected.
- £242k PCAN budget. Using this budget to fund alternative care plans for the 37 children who previously accessed A4C



What have we done already

- Outcome focused assessments – clear outcome focused plans and regular reviews of any package with a cost
- Holistic assessments, incorporating carer and sibling carer needs
- Short Breaks project – looked closely at plans for children with a residential respite element to their short break provision
- Reviewed all children who have been assessed as requiring a Direct Payment
- Reviewed all children who have health needs: Continuing Care/Mental Health needs
- Projected children's needs and costings over the coming years, in line with transition planning
- Developed creative approaches with children's budgets
- Linked into the fostering developments to ensure there is a focus upon respite foster carers
- Reviewed IDS criteria to be more specific and easier to understand
- Best value plans for each child, that meets needs

Case example

Child with multiple disability diagnoses, requires specialist equipment & adaptations in her home. DP's were in place but not effective as PA's were challenging to find, train and rely on – parents exhausted.

Sought out a care agency to provide consistent support to the child during school holidays – parent was able to stay away from the home in a local hotel for their break.

Avoided the child experiencing a residential short break away from their home.

This is a better outcome for child, but also for budget.

Next steps

- Project to consult with parents and stakeholders
- The families of the 37 children have been contacted by commissioning & social care and had a review of needs. Alternative services being set up; Direct Payments, care agency support. Consult by end Sept 24. Implementation start April 2025.
- Monitoring arrangements – SB project team, review in IDS triage, new IDS funding panel is up and running, & working well
- Continued projection of needs and best value costings, alongside transition planning
- Work with Adults services to map transition for children with profound Mental Health conditions.
- Continued savings could happen if there was an increase in respite foster carers & daily living skills support
- Re-registration of Camlas: residential option

Challenges/unknowns

- Children moving into county with profound disability could cost tens of thousands in respite/SB, if assessed as needed
- Seen an increase in past 12 months of children moving into county with profound disability, no pattern for the reason identified thus far – continue to analyse this
- Children being born with a health need, or a disability
- Nature and degree of child's presentation as they enter puberty
- Unpredicted uplift in care costs annually

Increase to living wage: increase of DP from £12.85 to £14.60 p/h
(£85k estimate uplift)

Any Questions

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