

DERBYSHIRE COUNTY COUNCIL

CABINET

15 July 2014

Report of the Strategic Director for Children & Younger Adults

Support & Aspiration – Consultation Analysis and Update – (Children and Young People)

1 Purpose of Report

- 1.1 To inform Cabinet about the outcome of the consultation and how that information will be used.
- 1.2 To seek Cabinet agreement to register a new domain name for the Local Offer site.

2 Information and Analysis

2.1 Background and Context

- 2.1.1 Part 3 of the Children and Families Act 2014 relates to how children and young people with special educational needs and disabilities will be assessed and supported in the future. In Derbyshire the project is named 'Support & Aspiration'. Work has been taking place to ensure the Council is ready for those elements that must be in place by September 2014, but it is recognised that this will be part of a longer transformation programme.
- 2.1.2 From September 2014 all new requests for statutory assessment will be required to follow the new process of an Education, Health and Care (EHC) Needs Assessment. The Government is currently proposing a three and a half year period to convert all children and young people who currently have a statement of educational needs across to an EHC plan. Similarly, the conversion target for people with a Learning Difficulty Assessment (LDA) is two years. Therefore, for two to three years, the systems will be required to operate in tandem. The additional resources required to administer this extraordinary circumstance have been requested in a previous paper to Cabinet.

2.2 Consultation

- 2.2.1 The period of consultation took place between April 11th and June 4th 2014. The consultation period was extended to ensure that families were given a fair opportunity to respond. The views and opinions submitted during this period are detailed in Appendix 1, but key points are:
- 79% thought that children and young people would receive support sooner if settings were able to access funding without the need for a statutory assessment of special educational needs.
 - 71% felt that children/young people's outcomes would be improved if support could be provided sooner and without the need for statutory assessment of special educational needs.
 - 36% of respondents felt that multi-agency involvement made a difference to families. While 11% of respondents said that short breaks was the main service to make a difference to their family.
 - Feedback regarding the draft EHC plans is positive; between 71% and 80% of respondents agreeing or strongly agreeing with the 6 out of 9 questions posed. Over 80% of respondents felt that the draft plans placed the child, young person and families at the centre of assessment and that their views were valued
- 2.2.2 To ensure a wide range of views were gathered targeted focus groups have taken place. A round of Parent Forums were organised to coincide with the start of the consultation. Officers attended the forums and parent representatives delivered a presentation to Forum members and led the discussions. Over 150 parents attended the Forums across Derbyshire. The information about the consultation was circulated to all Parent Forum members and also circulated to parents accessing services provided by Umbrella and Fair Play. In total a circulation of approximately 2,500 parents/carers was achieved via this route. A summary of the information collected is attached in Appendix 2
- 2.2.3 Targeted focused work has been undertaken via the Black and Minority Ethnic (BME) Forum. Representatives from the Support and Aspiration officer group have attended two BME Forums to inform members of the reforms and the approach which is being taken in Derbyshire. A Focus Group was held to explore in depth how Derbyshire's Local Offer can ensure it reflects all of the communities in Derbyshire. This information is included in Appendix 3
- 2.2.4 Points and views made at the Community Lives Communication & Engagement Sub group are included within Appendix 4. Specific and

targeted work has been undertaken with the Special Schools Council and existing clubs and groups across Derbyshire to seek the views of young people with disabilities in relation to the development of the Local Offer and these are reported in Appendix 5.

2.1 The communication strategy for the consultation included press releases, sending information to schools and academies, early years settings and FE colleges used by Derbyshire young people. The link for the survey and all the additional information were shown on Derbyshire's Extranet and e-alerts were circulated at the start, during and later to inform of the extension to the consultation deadline. E-bulletins were also used to inform School Governors. Health agencies were sent information to be displayed in clinics and medical practices from the communication leads for the five Clinical Commissioning Groups (CCGs) covering Derbyshire, Public Health and Health Watch. Information was also sent out to council staff working within CAYA and Adult Care departments using e-mail.

2.2.5 Information to parents was distributed via Parent Forum and Parent Partnership. An information pack was sent to the home of every child and young person who is either currently subject to assessment of Special Educational Needs (SEN) or who already has a Statement of SEN. Information was also sent out for display in all Derbyshire libraries.

2.3 Further Consultation

2.3.1 Further consultation will be required to inform the continued work of the Support and Aspiration Project. These consultations will be intended to seek the views of children and young people with special educational needs and disabilities and their families, along with other key stakeholders to ensure that specific changes proposed are responsive to the needs of people in Derbyshire. The proposed consultations are:

- (a) Local Authorities must consult with representative groups of children and young people with special educational needs and their parents to agree how the conversion from statements of educational needs to EHC plans should be phased. (DfE Consultation on transition to EHC plan and the Local Offer March 2014)
- (b) The future role of Parent Partnership Service in light of the proposals made in the revised SEN Code of Practice: for 0-25 years. April 2014
- (c) The development of the Young Person's Advisory Service in light of the proposals made in the revised SEN Code of Practice: for 0-25 years. April 2014.
- (d) What are the important principles for young people, parents and carers when considering a personal budget?

- (e) What do young people, parents and carers consider to be important to them when approaching adulthood and being a young adult with special educational needs and/or disabilities, living in Derbyshire.
- (f) The impact of the SEND reforms in Derbyshire.

2.4 Local Offer Domain Registration

- 2.4.1 As the Local Offer will contain information from a number of partners in Derbyshire, rather than wholly provided by the Council, it is proposed that a new domain name for the site is purchased. This will ensure that the branding and identity of the site are reinforced by an appropriate domain name. The format of the Local Offer is still being discussed, which also includes the name parents, carers and professionals would like to use. Some Councils have used the terminology 'Local Offer', whilst others have used range of other names, such as 'AskIris' (Nottinghamshire), MyLife (Bromley) and AspireForSEND (Northamptonshire and Leicester).

It is therefore proposed to seek permission to register a new domain name for the site to align with the site terminology that arises from the consultation exercise. It is proposed to purchase a number of the top level site domains, including:

- .org
- .org.uk
- .net

- 2.4.2 On 4th November 2003 Cabinet determined that there would be no further acquisition of web domain names or deployment of websites by the council without specific Cabinet approval. This proposal was to ensure that where possible all Council content should be under www.derbyshire.gov.uk. However, in the case of the Local Offer, which includes information from numerous partners, having a separate and clear brand will assist in the uptake and identity that accords with the spirit of the new legislation, therefore it is considered that the registration of the new domain name has no effect on Derbyshire.gov.uk.

3 Financial Considerations

The costs of the proposed consultations will be met from the allocation of resources to the Support and Aspiration project agreed by Cabinet in June 2014.

New domain registration costs for sites are in the region of £10 to £100 per year, depending on the domain provider, if the domain is available

and the popularity of the top level domain. This will also be met from the allocation already agreed by Cabinet.

4 Legal and Human Rights Considerations

The Children and Families Act 2014 due to come into force from September 2014, will replace statements of SEN(SSENs) for children and young people with special educational needs and disabilities and Learning Difficulty Assessments (LDAs) for young people in further education and training, with single 0-25 Education, Health and Care Plans (EHC plans).

Under the new legislative framework, local authorities and local health services are required to plan and commission education, health and social care services jointly. Local authorities must also publish a clear and easy to understand 'local offer' of education, health and social care services to support children and young people with SEN and their families. Parents and young people with an EHC Plan will have the right to a personal budget for their support. Local Authorities, early education providers, schools, colleges, health bodies and those who work with them will have statutory responsibilities for identifying children and young people with SEN, assessing their needs and providing support. Parents and young people will be encouraged to consider mediation to resolve disagreements before they register a Tribunal appeal.

When a request for an assessment is made, local authorities will have a duty to assess if they consider that the child or young person may need SEN provision through an EHC plan, and to put an EHC Plan in place if they consider SEN provision to be necessary and that the needs cannot reasonably be met within the resources normally available to mainstream education providers. The legislation requires local authorities to consult children and young people with SEN and their parents in assessing and reviewing special educational provision and social care provision.

From September 2014 requests for assessment will fall under the new procedures, but there will be a conversion period when both the old and the new systems run in tandem. The Government intends SSENs to be phased out within 31/2 years, and LDAs within 2 years.

5 Other Considerations

In preparing this report the relevance of the following factors has been considered – human resources, property, prevention of crime and disorder, equality of opportunity, health, environmental, transport.

6 Background Papers

Held in the Support and Aspiration Project Office.

7 Key Decision?

No

8 Call-in

No.

9 Strategic Director's Recommendation

That Cabinet:

- a) notes the outcome of the consultation and how the information will be used.
- b) approves the registration of a new domain name for the Local Offer site.

Ian Thomas
Strategic Director for Children & Younger Adults

Support & Aspiration **(Children and Young People) Consultation Analysis**

1. Purpose of the Report

On 25th March 2014 Cabinet approved consultation in line with the developments taking place in Derbyshire to implement the Children and Families Act Part 3, including the Local Offer, Education, Health and Care plans and local funding arrangement in order to implement the proposed funding changes: making resources available from the High Needs Block, Tier 3 Special Educational Needs funding from September 2014. This report explains the detail of the consultation and outcomes.

2. Methodology and Approaches

The period of consultation took place between April 11th and June 4th 2014 and this report summarises the views and opinions submitted by the people of Derbyshire during this period. The consultation period was extended.

The consultation used a mixed method approach using both qualitative and quantitative ways to gather people's views including focus groups, forums and using a communication strategy which would encourage professionals to raise the profile of the consultation with families. This was to enable as many people as possible to participate

The methods included:

- An electronic questionnaire which could be completed on-line or by phone where a dedicated team completed this on behalf of the caller; paper copies were also available on request.
- Additional comments and views were welcomed by writing into a named officer, registering online, or emailing. The mail outs included covering letters, information leaflets on the Assessment.
- Pathway and the Local Offer. Sample EHC plans could be viewed online and have been available to be posted out on request.
- Focus Groups.
- Professionals have been encouraged to share their views on the Assessment Pathway and the EHC plan, feedback has been gathered via the on-line survey or by email directly to the Project Manager.

All parents and carers of children and young people who either have a statement of educational needs or are currently undergoing assessment received an information pack: detailing the proposed changes via 2 leaflets (one for each proposal); an introductory letter and details of how to complete the survey, postal questionnaire with a pre-paid envelope.

The leaflets gave information about each proposal, detailed how people could have their say and signposted them to further information either via the Derbyshire County Council website, www.derbyshire.gov.uk/senneeds a dedicated telephone helpline

(supplied by Call Derbyshire) or via an email address:
supportandaspiration@derbyshire.gov.uk

1. The DCC website gave an outline of the proposals, 2 leaflets and 2 sample EHC plans and the questionnaire online version, requests for paper questionnaires could also be made.
2. If the Call Derbyshire staff were unable to assist the caller fully then they passed the call to a representative from the Support & Aspiration Project, who was able to answer all queries identified.
3. People were encouraged to send in their comments the questionnaire online or by requesting the postal questionnaire.
4. Participants were also encouraged to write in to the Council via a letter or using email dependent on their preferred method of communication.
5. The Parent Carer Forum organised a series of forums across the County to coincide with the Consultation. Cllr Kevin Gillott was invited to the Parent Forums and attended one forum. Focus groups were held with the BME Forum, Special Schools Council and Community Lives Communication & Engagement Sub group.
6. Leaflets and information was also made available via libraries, Health Venues, nurseries, schools and colleges and the Voluntary sector. Staff employed by DCC and those contracted by the Council and partner agencies were encouraged to engage with families to take part in the consultation.
7. Press releases were sent to all media on a regular basis during the period of consultation.
8. All responses were collected and collated by the Support and Aspiration Project and analysed.

The Analysis

The Consultation was not a referendum, but a variety of opportunities for the people of Derbyshire to register their views about a number of important proposals. As a range of methodologies were used, it is only reasonable to provide analysis within the consultation method used. It will be possible to draw broad conclusions across consultation processes, but it is important to emphasise that all consultation methods have advantages and shortcomings.

Quantitative Approach

The tick box questions used in the postal and online questionnaires were analysed using Survey Monkey's own summarised format. This gave people an opportunity to indicate whether or not they agreed with the overall proposals and shows the % of agreement and disagreement with each proposal.

Qualitative Approach

The open text material detailed in the questionnaires, letters, emails and comments given at meetings were all analysed using excel spread sheet. The information was condensed into manageable summary categories or themes for analysis. Comments

and quotes were coded which allowed themes to emerge directly from reading people's views.

Who was encouraged to Participate?

All families who may be affected by these changes. Children and young people aged 0-25 with special educational needs and their parents/carers.

3,326 information packs were sent out to parents and carers of children and young people who either have a statement of educational needs or are currently undergoing assessment.

Staff from the Support & Aspiration Project attended Forums and Focus groups as detailed in the Appendixes.

Letters, leaflets and questionnaires were sent to CAYA, Adult Social Care, Health via Communication Leads across all 5 CCG's, Public Health, Libraries, Early Years Settings, Schools and Colleges.

Response Levels

As a result of the mixed approach the response level that was achieved can be described as follows:

A total of **443** online surveys were completed. **2** paper questionnaires were sent out. One has responded by letter, to date the second has not been returned.

Return Rate

It is very difficult to give a return rate in % terms as we used a variety of ways of contacting people. Some of the ways we contacted people are quantifiable for example we know exactly how many packs were sent out in total to parents and carers. However it is very difficult to estimate how many people may have received information about the consultation from other sources including letters sent via the voluntary sector, information displayed in community settings, nurseries, schools and colleges and via the media. For this reason we have not quantified the % return rate.

Consultation Telephone Helpline and follow-on calls

Call Derbyshire provided a telephone line to support respondents to answer the survey over the phone. Callers were also able to request more information about the changes and a call back was passed to one of the Support & Aspiration Project.

3 Call backs were requested.

Emails

16 emails were received concerning the consultation all of which 10 were from parents or carers. Some were specific questions about their own child or young person and how the changes will impact on them. Some did not understand the changes by reading the literature. However some feedback was received to say that

the information was too simplistic. All were responded to and informed of the extension of the consultation.

Sign up for updates

There is a facility to sign up for updates on the DCC Website.
 During the consultation period 25 people have signed up for updates.
 Parents 17 ~ 5 requesting information on the changes
 Health ~ 1
 Social Care ~ 3
 Education ~ 13

Meetings

Parent Forum

During the consultation period 15 Parent Forum meetings were facilitated. The format of the forum was that parent representatives presented the changes in Derbyshire and officers were present to support, answer questions and support discussions. The forums were attended by over **150** parents. The information about the consultation was circulated to all Parent Forum members and passed to parents known to the Umbrella and Fair play organisations. In total this is a circulation of approximately **2500** parents/carers. Report attached **Appendix 2**

BME Forum

The BME forum in Derbyshire represents 12 BME groups in Derbyshire. Representatives from Support and Aspiration have attended 2 BME Forums. On May 13th 2014 a focus group has been held specifically to discuss the changes being implemented. BME forum members were tasked with contacting members of their communities and informing them of the changes as well as seeking their views. The focus group generated some rich information about how all communities in Derbyshire can be represented in Derbyshire's Local Offer. There are plans to continue working in partnership with BME Communities to strengthen the voice of parents/carers, children and young people with special educational needs and disabilities. . The point was made that often people pass on the information through word of mouth, not everyone can read or use the internet as a way of getting information. The response from BME communities for this survey is low, however through the work that has been undertaken with the Forum, we are hopeful that information about the changes has reached more families than the consultation data indicates. Report attached **Appendix 3**

Community Lives Communication & Engagement Sub group

Points and views made at the Community Lives Communication & Engagement Sub group on 27 May 2014. This group consists of young adults and their parents/carers. The whole meeting was focussed on the consultation and the changes being proposed. The points made will inform the on-going development work for young people preparing for and moving into adulthood. Report attached **Appendix 4**

Consultation with young people and the Special Schools Forum

Views were sort from young people attending Derbyshire's Special Schools Forum on the Local Offer. These will be incorporated with the other contributions from consultation. Consultation opportunities have also been sought from existing clubs and groups around Derbyshire. The views of 67 young people have been gathered in relation to the Local Offer. Consultation will be on-going with children and young people during the implementation period. Report Attached **Appendix 5**

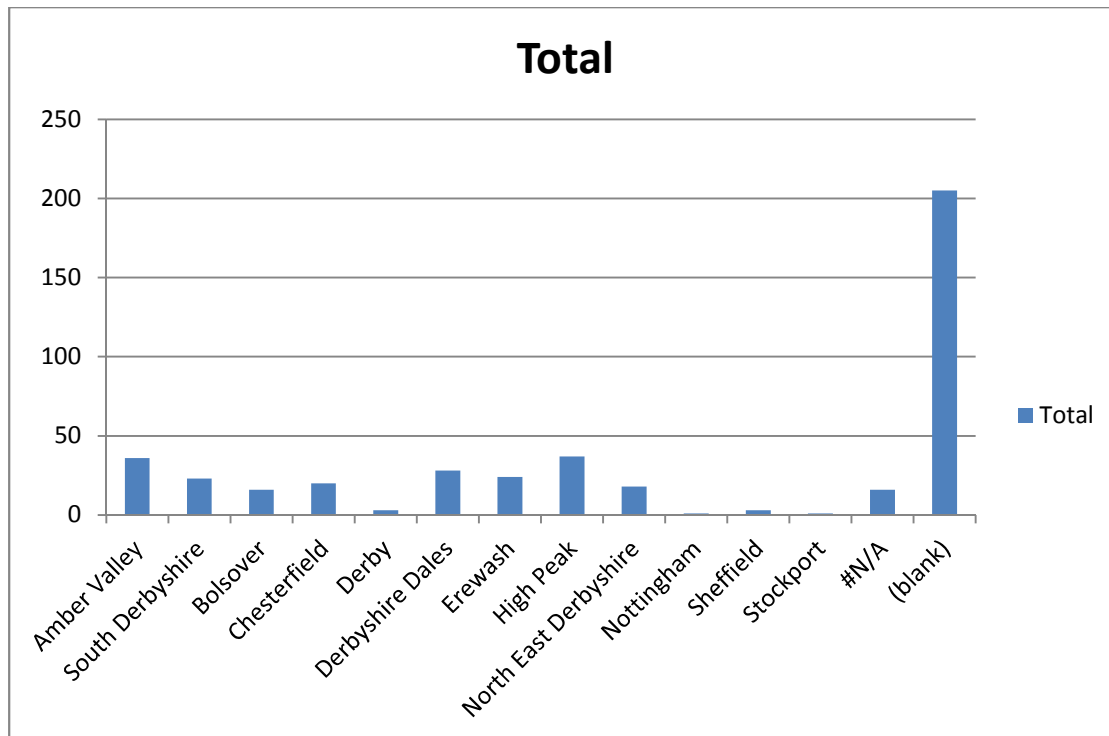
Who Replied?

Demographics of who replied via the questionnaires

Q 13 What is your home postcode?

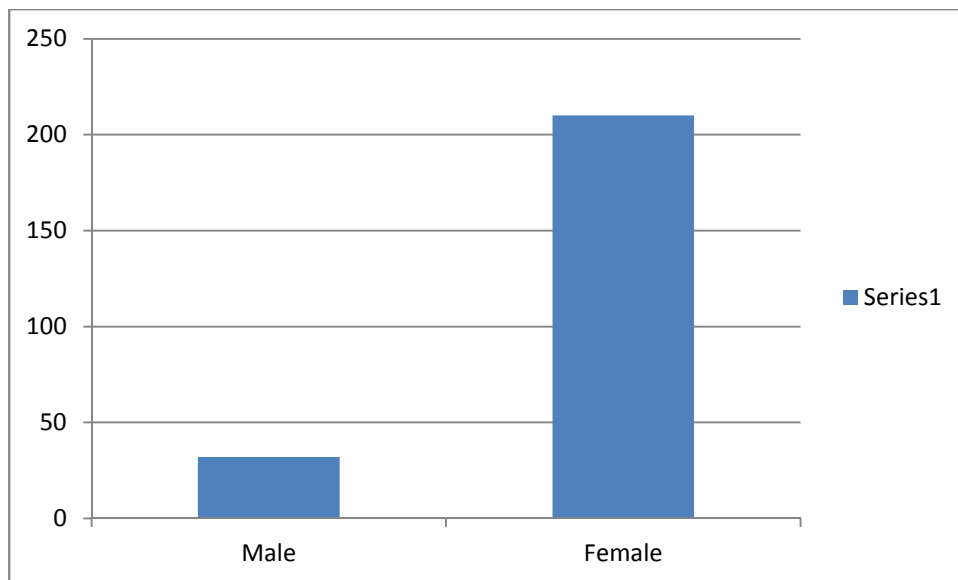
Answered: 227 Skipped: 217

DISTRICT	Total
Amber Valley	36
South	
Derbyshire	23
Bolsover	16
Chesterfield	20
Derby	3
Derbyshire	
Dales	28
Erewash	24
High Peak	37
North East	
Derbyshire	18
Nottingham	1
Sheffield	3
Stockport	1
N/A	16
(blank)	205



Gender Q 14 What is your gender?

Answered:242 Skipped: 202

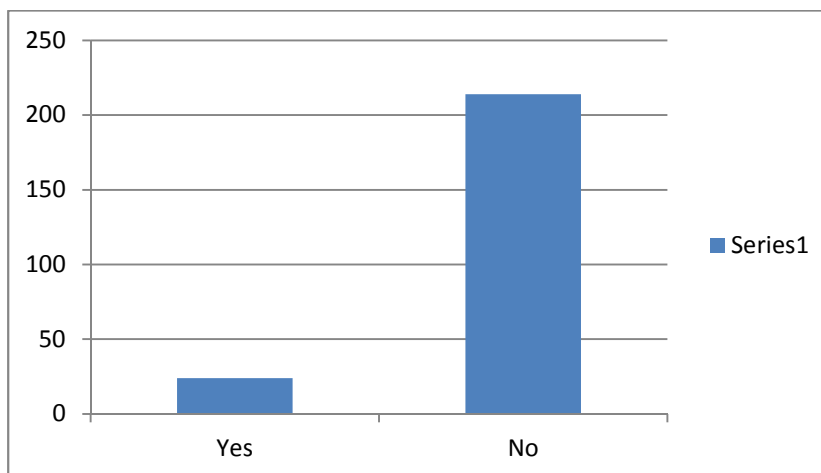


Answer choices	Responses	
Male	13.22%	32
Female	86.78%	210
Total		242

Q 16 A disabled person is someone who has a physical or mental impairment which has a substantial and long term adverse effect on their ability to carry out normal day-to-day activities. Do you consider yourself to have a disability?

Answered: 238

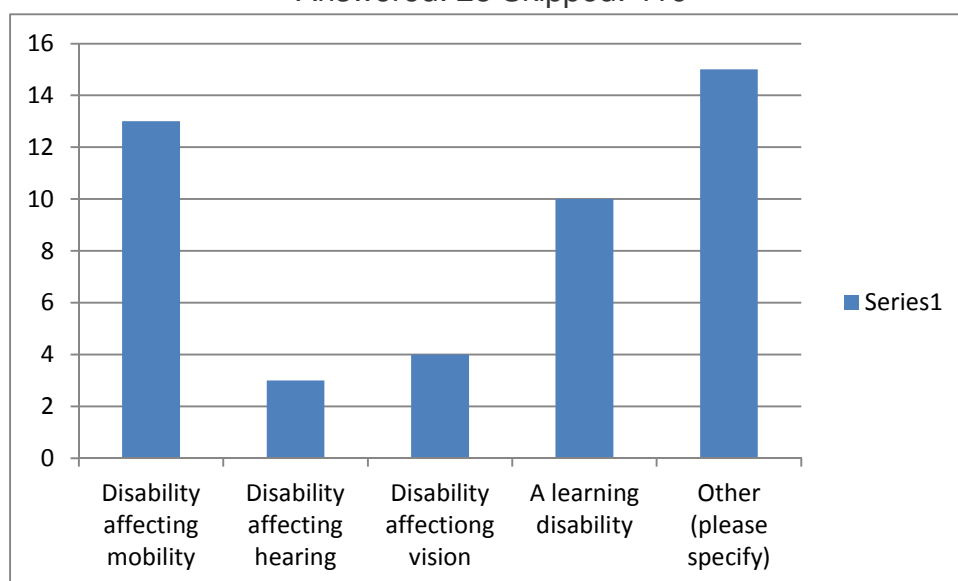
Skipped: 206



Answers choices	Responses	Totals
Yes	10.08%	24
No	89.92%	214
Total		238

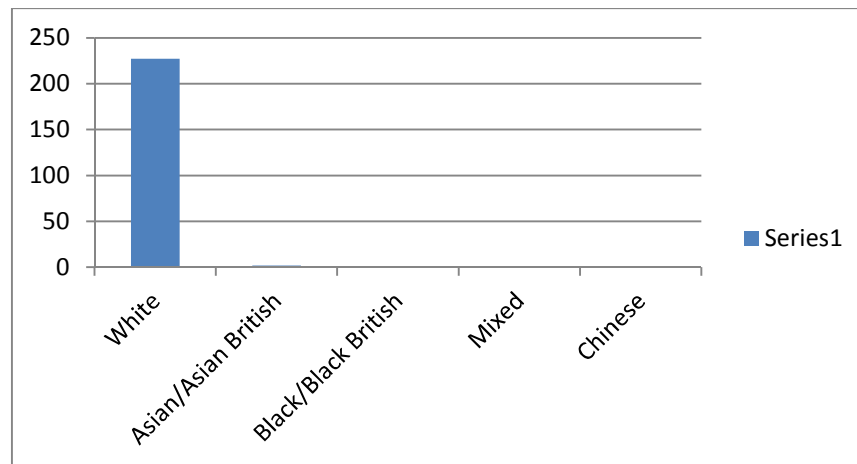
Q 17 If you answered 'yes' , what type of disability do you have?

Answered: 28 Skipped: 416



Q 18 What is your ethnic group?

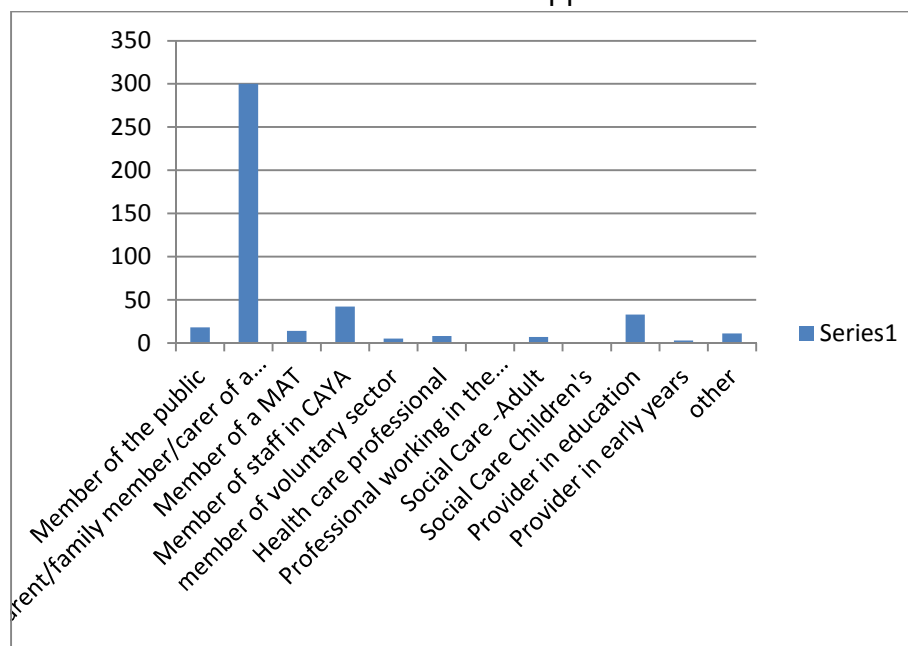
Answered: 230 Skipped: 214



Answer choices	Responses	Totals
White	98.70%	227
Asian/Asian British	0.87%	2
Black/Black British	0.00%	0
Mixed	0.43%	1
Chinese	0.00%	0
Total		230

Q 1 Are you answering this questionnaire as a? ... (Please answer this question in your main role)

Answered: 443 Skipped: 1



Answers choices	Responses	
Member of the public	4.06%	18
Parent/family member/carer of a child or young person with SEN and disabilities	67.72%	300
Member of a MAT Team	3.16%	14
Member of CAYA	9.48%	42
Member of voluntary sector	1.13%	5
Health care professional	1.81%	8
Professional working in the private/independent sector	0.23%	1
Social Care -Adult	1.58%	7
Social Care- Children's	0.23%	1
Provider in education	7.45%	33
Provider in early years	0.68%	3
Other (please specify)	2.48%	11
Total		

Q7 How can we ensure that speciality group activities and support continue to be available to the young people and families who need them most as part of our Local Offer?

Answered: 200

Skipped: 244

This response is being analysed and reported on in a separate Cabinet Paper re: Aiming High Short Breaks for Disabled Children. Aiming High and Short Break Services are a feature of the Local Offer responses.

Pathway of Assessment and Planning: from Early Help to Statutory Assessment and Education, Health and Care Plan.

The supporting information below about this proposal was made available on the website and an information leaflet.

We are looking at how we can support children and young people without the need for a statutory assessment. For the first time nurseries, schools and colleges will be able to apply for extra funding to provide support to your child. We would put a clear plan in place for how this funding is used to support your child which would be known as a Local Support Plan.

In line with the way we work currently, you could still ask for a statutory assessment to be carried out and you will still have the right to appeal if that request is turned down.

The questions below received between 285 and 289 responses. The majority of the feedback regarding the proposals to make resources available earlier without the need for statutory assessment.

Q 8 Do you think that making additional funding available earlier, without the need for a statutory assessment, could improve outcomes for children and young people?

Answer choices	Responses	Total
Yes	70.93%	205
No	10.38%	30
Don't know	18.69%	54
Total		289

The respondents were positive about this proposal with 93 (70%) answering **Yes**, 18.69 % did not know if the proposal would improve outcomes for children and young people.

Q 9 Do you think some children and young people would get support in place sooner if schools were able to access additional funding without the need for a statutory assessment?

Answer choices	Responses	Total
Yes	79.24%	229
No	9.69	28
Don't know	11.07%	32
Total		289

The respondents were positive about this proposal with 79% answering **Yes**, 18.69 % did not know if the proposal would improve outcomes for children and young people.

How important do you think each of the following are when arranging support for a child or young person to make sure they are getting the right support with their education?

How important are the following when assessing and planning with	Very Important	Fairly Important	Important	Not very important	Not important at all	Don't Know

children, young people and their families?						
Parents carers, children and young people are listened to.	96.48% 274	2.11% 6	1.41% 4	0.00% 0	0.00% 0	0.00% 0
Parents and carers are involved with agreeing and planning the right support for their child or young person.	89.82% 256	6.32% 18	3.51% 10	0.35% 1	0.00% 0	0.00% 0
Children and young people are involved with agreeing and planning the support they will receive.	63.86% 182	21.05% 60	13.68% 39	0.35% 1	0.00% 0	1.05% 3
A clear plan should be in place with outcomes agreed for the child or young person.	90.85% 258	4.93% 14	3.87% 11	0.35% 1	0.00% 0	0.00% 0
The plan clearly states what support will be delivered.	95.77% 272	3.17% 9	1.06% 3	0.00% 0	0.00% 0	0.00% 0
If the plan is not helping the child or young person to	88.38% 251	7.75% 22	3.87% 11	0.00% 0	0.00% 0	0.00% 0

meet their agreed outcomes, parents are involved in deciding what the next steps should be.						
The support that has been agreed will be reviewed and any changes will be made during the review process.	87.37% 249	9.47% 27	3.16% 9	0.00% 0	0.00% 0	0.00% 0
That parents, carers, children and young people feel confidence that the agreed support will be delivered.	95.09% 271	2.81% 8	2.11% 6	0.00% 0	0.00% 0	0.00% 0
That parents, carers and young people are clear about their rights to request statutory assessment of educational needs.	90.49% 257	7.04% 20	2.46% 7	0.00% 0	0.00% 0	0.00% 0

On the whole feedback regarding the principles of what is important when arranging support for a child or young person to make sure they are getting the right support with their education is positive; between 95% and 98% of respondents agreeing or strong agreeing with the 8 out of 9 comments posed. The principle which received

the most varied response was in relation to children and young people being involved with agreeing and planning the support they will receive. This response ranged from 63.86% strongly agreeing to 13.68% feeling it is important, which still provides a conclusive response.

Summary

The respondents to these questions are a mixture of parents, carers and practitioners. Therefore the conclusion can be drawn that there is an appetite in Derbyshire to radically review how support and planning for children and young people with special educational needs and disabilities is currently delivered. This would achieve our objectives of being able to support children and young people earlier in the process and reduce unnecessary bureaucracy for children, young people and their families.

Analysis of local authority consultation feedback regarding Education Health and Care Plans

The questions below received between 243 and 247 responses. Additional columns entitled 'neither agree or disagree' and 'don't know' were included in the survey but have not been included in the table below. On the whole feedback regarding the draft EHC plans is positive; between 71% and 80% of respondents agreeing or strong agreeing with the 6 out of 9 comments posed. Over 80% of respondents felt that the draft plans placed the child, young person and families at the centre of assessment and that their views were valued.

Question	% who Strongly agree or agree	% who Strongly disagree or disagree
This EHC plan will capture all the important information about a child/young person with SEN and/or disabilities	78.94	5.67
This EHC plan places children, young people and their families at the centre of assessment and planning and value their wishes	80.89	3.25
This EHC plan is clear, concise, understandable and accessible to parents, children, young people and providers/practitioners	75.92	8.16
This EHC plan is factual and focussed on how best to achieve outcomes	72.24	6.94
Does this EHC plan describe positively what the child or young person can do and has achieved?	76.54	5.35
Does this EHC plan show how education, health and care provision will be integrated wherever possible to support the child or young person?	67.22	9.43
This EHC plan is clear about how the specified provision and support will help the child or young person to achieve outcomes	71.6	10.29
Would this EHC plan improve planning for young people?	61.48	9.02

Would this EHC plan increase the voice of Children, young people and their parents?	64.9	10.61

The consultation generated 114 comments in the 'open-ended responses' column of the EHC plan section.

45 of the **114** comments did not relate to the EHC plan and details issues such as difficulties with accessing the consultation, general county council budget concerns, the stress experienced by parents of children with additional needs, lack of provision for children and young people with SEN and the content of the local offer.

12 responses commented on funding arrangements for the EHC plan. One respondent wondered how personal budgets will be used to meet needs while the other comments related to how much support children and young people will receive and who will fund this support.

11 respondents mentioned the coordination and distribution of the plan. Questions raised included who will ensure that what is in the plan is delivered? Who will have access to the plans? Will they be available to the voluntary sector? **3** respondents raised concerns regarding confidentiality and didn't feel that the plan should be available to everyone involved with the child.

9 people wondered why Rachel and Laura's diagnoses had not been included more clearly and specifically in the example plans.

8 comments related to the review of the EHC plan; how often will reviews take place? How will the local authority ensure that all professionals have an updated copy of the review? What happens if targets are achieved before the annual review? Could more frequent reviews be called if necessary?

6 respondents raised issues relating to the content of the plan; **2** felt that the language in the plans needed to be 'tougher'; for example **must to replace should**. **3** felt that the goals needed to be more specific while **1** felt that they were too specific

Summary

The Derbyshire EHC plan template will be agreed at a final meeting on the 11th June 2014 and present to the Support and Aspiration board meeting on the 17th June 2014. The template and amended example have been agreed by a multiagency group including parents after;

- Reading the draft Special Educational Needs and Disability code of practice, 0-25 years
- Considering the templates and draft plans created by pathfinder authorities
- Consultation with parents and colleagues from education, health and care during work stream meetings in Derbyshire
- Consideration of the feedback received through the county wide Derbyshire consultation
- Consideration of the feedback received from the parent forums held across the authority
- Taking advice from legal regarding the content

It is the intent of the local authority to consult with the workforce and parents in 2015, when the plans have been in use for several months. At this point, if appropriate, final amendments can be made.

Local Offer

Request for information about services from Families

Revised SEND Code of Practice: 0 -25 years – April 2014

Chapter 4: The Local Offer

- Local authorities must publish a local offer, setting out in one place Information about provision they expect to be available across Education, health and social care for children and young people in their area who have SEN or are disabled, including those who do not have EHC plans.
- The local offer must include provision in the local authority's area. It must also include provision outside the local area that the local authority expects is likely to be used by children and young people with SEN for whom they are responsible.
- The 'Special Educational Needs and Disability Regulations 2014 provide a common framework for the local offer.
- The local offer should be collaborative, accessible, comprehensive and
- Transparent.
- Involving children and young people and parents
- Local authorities must involve children and young people with SEN or disabilities and their parents in planning, publishing and reviewing the local offer.
- Local authorities and their partner bodies must cooperate with each other in the development and review of the Local Offer. This includes co-operation with schools, FE Colleges, pupil referral units, independent specialist colleges, early educators, youth offending teams and the NHS Commissioning Board.

Cabinet approved consultation in March 2014 with families and key stakeholder to develop Derbyshire's initial Local Offer to inform the development of our Local Offer in accordance with the commencement of new legislation. Cabinet also approved the questions that would be asked to form this consultation.

The questions have enabled families to give a free response about services that have made a difference to them, across agencies, statutory, voluntary and independent. The responses have highlighted how services have impacted on the lives of Derbyshire families; these have been mostly positive but have also told us about when services have impacted negatively on family life. There is evidence that families are worried about services being cut, or they have already have experience of this.

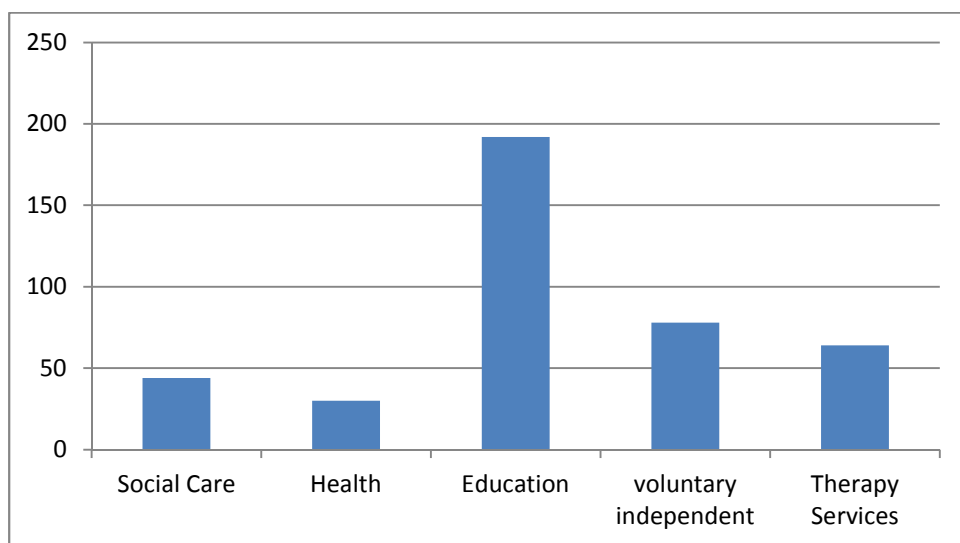
Q3 Please tell us about a service that has made a real difference to your child or young person or to you as a family?

227 respondents answered this question.

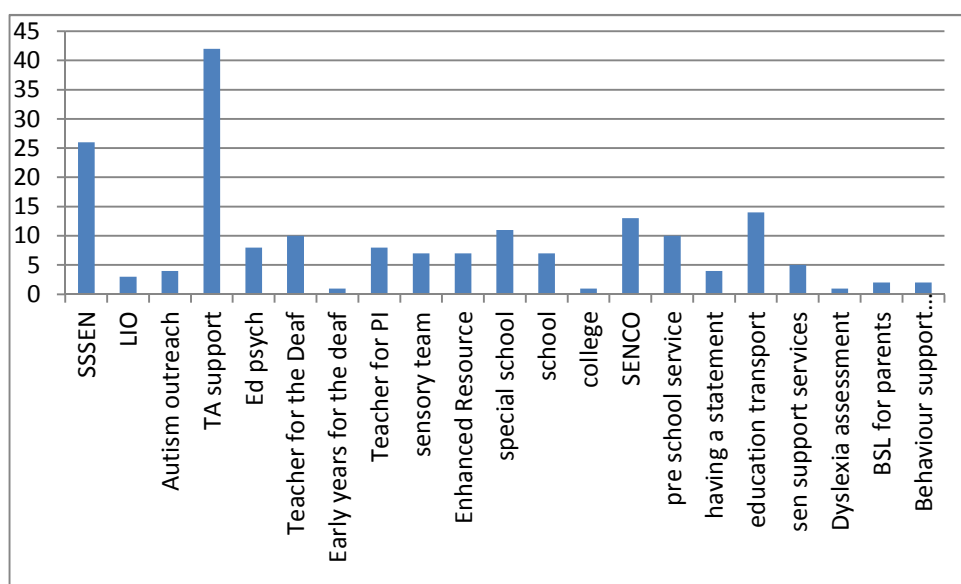
Respondents listed between 1 and 10 services each that had made a difference to them.

4 respondents took the opportunity to state that no services to date had made a difference to them and several other respondents gave an answer which contained a mixed response.

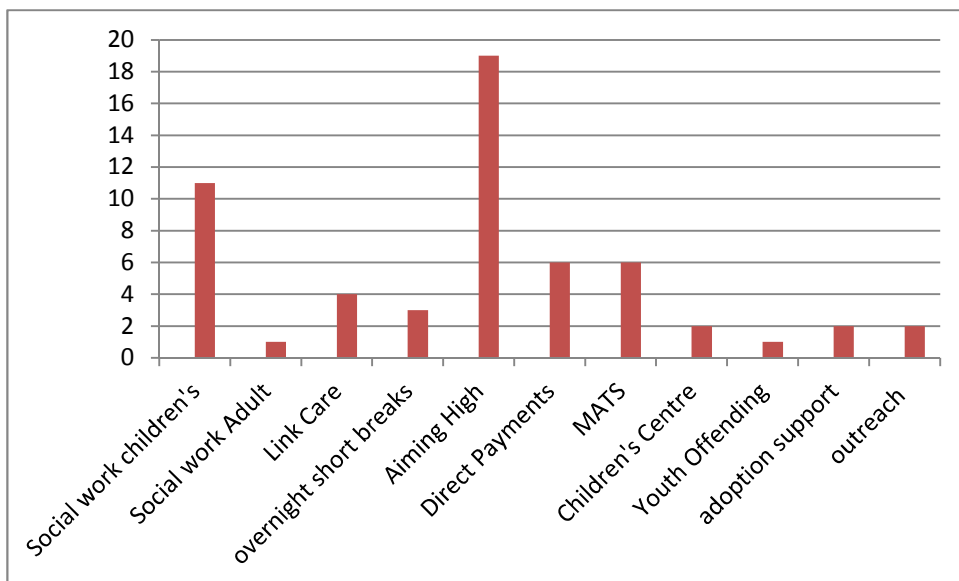
Local Offer Fig 1: Services that have made a difference



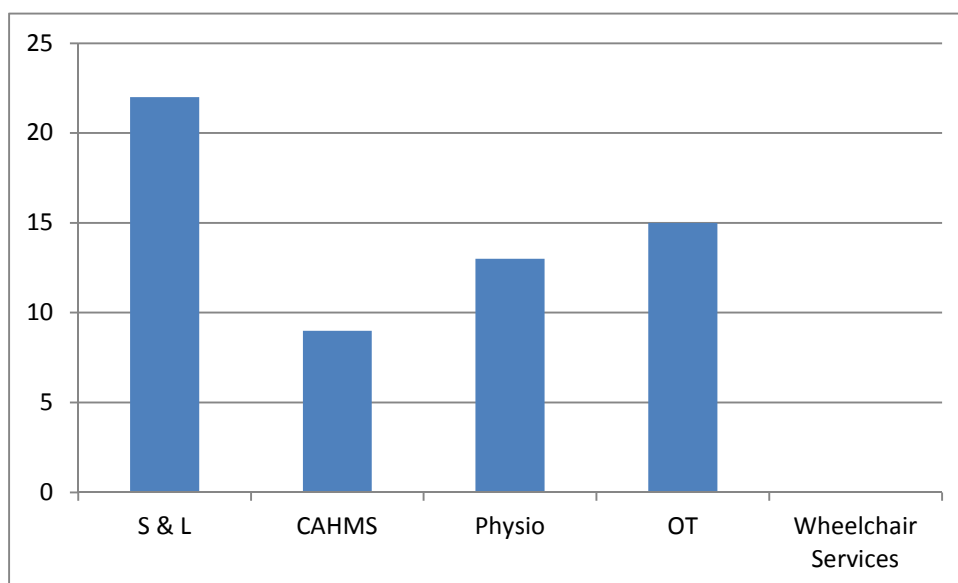
Local Offer Fig 2: Education Services that have made a difference



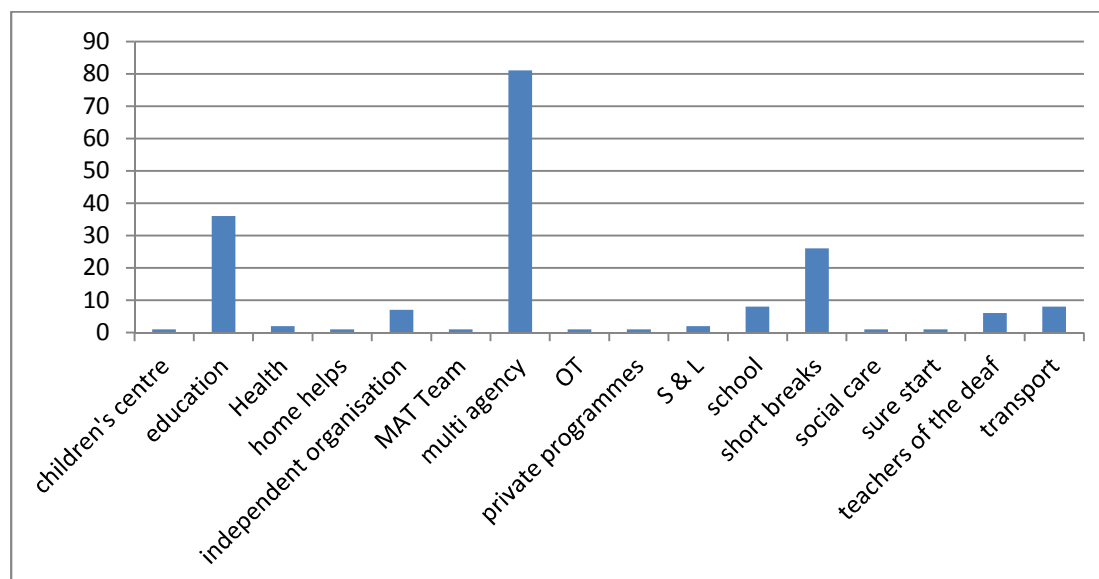
Local Offer Fig 3: Social Care Services that have made a difference



Local Offer Fig 4: Therapy Services that have made a difference



Services in relation to Education were cited 192 times as having made a difference to families.

Local Offer Fig 6: What difference did these services make?

Qualitative Analysis

Free text boxes - Questionnaires

As can be seen from **Local Offer FIG 6** 81 (35.68%) respondents did not name one service but Multi Agency involvement as having made a difference to families. This was followed by Education services of one or more of which 36 (15.85%) respondents felt that this single category has made a difference to their child or young person. It is significant that families place a large value on the access to short breaks which 26 (11.45%) respondents cited as the main service which makes a difference to their family. Many more respondents cited short breaks as part of the multi-agency approach which supported their family.

Themes for the difference that services are making are:

- enabling their child/young person to access education
- Reaching their potential,
- Positive impact on behaviour
- Support for the family
- Provide advice and support
- Coordinate the care for their child
- Learn with their Peers
- Enable communication with their child
- Get to spend time with their peers
- Promoting independence
- Break for the family

- Enables me to spend time with my other children

Quotes included

Short Breaks

Vital respite for carers & opportunities for young people to access the community & to build on their life skills

Gave my child confidence and the opportunity to do things she enjoys

Provides respite so that I can catch up on other essential jobs and offers my child a safe, non-judgemental setting in which to work on his social skills

Education

Developed her social skills, encouraged her learning and development and developed her potential.

This Sssen service has made a huge progress in her learning and also is a huge help in supporting and giving advice to her TA.

Gradually introduced structure and education in the home where my child felt most comfortable. Follows national curriculum but its adapted to every child's individual needs so they are encouraged to reach their own potential but most importantly of all the potential is a realistic one for each child.

As explained before it has been the difference between a very anxious confused unhappy child, to a child who can cope within the school environment

Schools

As our son now receives an education appropriate to his needs he has grown enormously in confidence. His skills are improving and he is very happy at school.

Teacher for the Deaf

The teacher for the deaf helps train the teachers shows them what it is like to be deaf helps my child with different technology. Makes sure the school is set up and carries on with the child on their mind all the time.

The teacher for the deaf helps train the teachers shows them what it is like to be deaf helps my child with different technology.

Speech & Language Therapy

Helped my little man communicate with his peers

Multi Agency

The Teaching Assistant has helped his confidence grow and his self-esteem has improved. He is able to access the whole of the curriculum and is currently being supported to enable him to make the transition to Secondary school as easy and stress free as possible. The physiotherapy has helped build his core stability and strengthen his posture to help him with everyday tasks without tiring. His concentration has also improved as a result of improving his core stability and posture.

They have helped to develop necessary life skills in my son & have supported both him & us, his parents, through his school years.(He is currently in Y10)

They are an on-going help to my son and my family

helped calm my child down, who is a happy in her small class and school, connections involved with our child, they extremely helpful in giving advice to us and our child, helping them to move to the next stage as painless as possible

A HUGE DIFFERENCE, HELPED TO RELIEVE STRESS ON THE WHOLE FAMILY

Without school and Aiming High our son would never leave the house and have any form of social interaction. Aiming High support is vital in the school holidays and out of school to allow us to meet our own needs and our other children's needs.

Children Centre

For a start, we didn't feel quite as isolated as there were both parents and children centre staff who have a wealth of knowledge. Just being told what help and advice was available was very enlightening but they could also approach other professionals involved with my son. It was definitely a light at the end of a very dark tunnel for us.

Social Worker

Life has become so much less stressful, everything is in one place and I can control as I need to with the help and guidance of someone who knows what she's doing. Many weights lifted in one go.

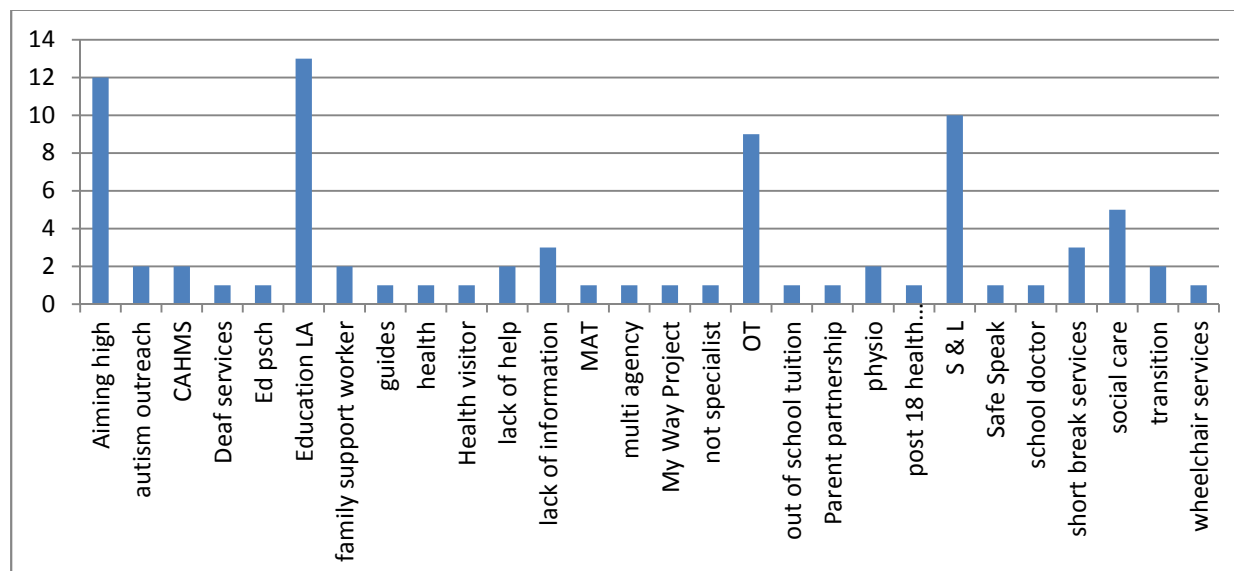
Home Helps

They are the only people we see regularly, they are like family

Q 5 Have you received any services that didn't make a difference?

We had 203 responses 133/ (65.52%) said No. 70 (34.48%) responses said that they had received a service that made no difference to them.

Respondents who answered yes were asked to expand on their answer.

Local Offer Fig 7: Services that didn't make a difference?

Responses included

The only county service that has made a difference was Education, sadly this difference was negative and we now home educate.

None *A lot of our time has been spent following procedure, for procedures sake not for any benefit, had limited speech and language input, therefore speech is still difficult to understand*

It's not that things haven't worked its finding a different way of dealing with his problems

More training and awareness is needed, particularly in primary schools of issues adopted children with SEN need. From an educational point of view potential needs to be recognized in all children, a focus on basic skills needs to be addressed so that the children can access secondary education more confidently - a mix of individual tuition and inclusion with other students. Students should have more say at primary level in what they need as is the case when they attend the 6 month review when in foster care.

Occupational therapy - lack of structured programme, insufficient knowledge and application of exercises, lack of commitment in terms of cancelled appointments

There isn't really a service to enable children and young people to attend school who have working parents and cannot delay their working day. It is a constant feeling that your child is the problem not the system's (schools) duty to provide an education? The lack of flexibility in the system is the problem.

With the support of Clinical psychologist we have begun using prescribed medication to address sleep patterns of our daughter. It is not just a case that we are bad

parents, a popularly held and expressed view showing a lack of understanding, knowledge and training. I have attended CAMHS introduction to Autism and this should be more widely available to increase understanding.

Services seem to be limited unless I'm not informed of them and the people who go in to school don't always support home.

They have all helped one way or another but with my child we do seem to go round in circles.

We have had a referral to the adult services for when my son turns 18 (he is just 16) and even though I have met with the contact from Adult Services a few times, I have found no useful advice coming forward yet, in fact, to say they have made no difference is wrong, they have managed to increase my anxiety about my son using the adult services as they are reluctant to advise what they will be able to offer support wise and how they can manage a continuity of care.

Short Breaks ~ *When the carer stopped though nothing else was offered and we were led to believe there would maybe other things to try but haven't heard since christmas 2013!*

Education ~ *The representatives of the above services could of made a difference by respecting us as parents by listening to us and doing their jobs.*

Accessible school in Buxton, my son has to travel to Whaley Bridge!

Laptops, software for lessons.

Follow up from Primary Sssen support into secondary to ensure good practice learned did not subside.

There are no local sports groups or extra-curricular activities in the area we live in for children with SEN.

Transition M.A.T team should be staffed to offer further support through teenage years.

Don't know my son cannot weight bear, feed himself, talk, can't really do much so not really any activities I know for him.

Transport has always been an issue, the need for more tailored equipment for his specific disabilities of services inadequate.

Out of school tuition, support and funding for home-based education POST-GCSE.

Information about services

Face book for parent's information & support

Physio didn't work well due to changing personnel and in some cases a lack of understanding of dealing with children on the autistic spectrum.

Children's home helps are good but they might be stopping

I don't know what I don't know

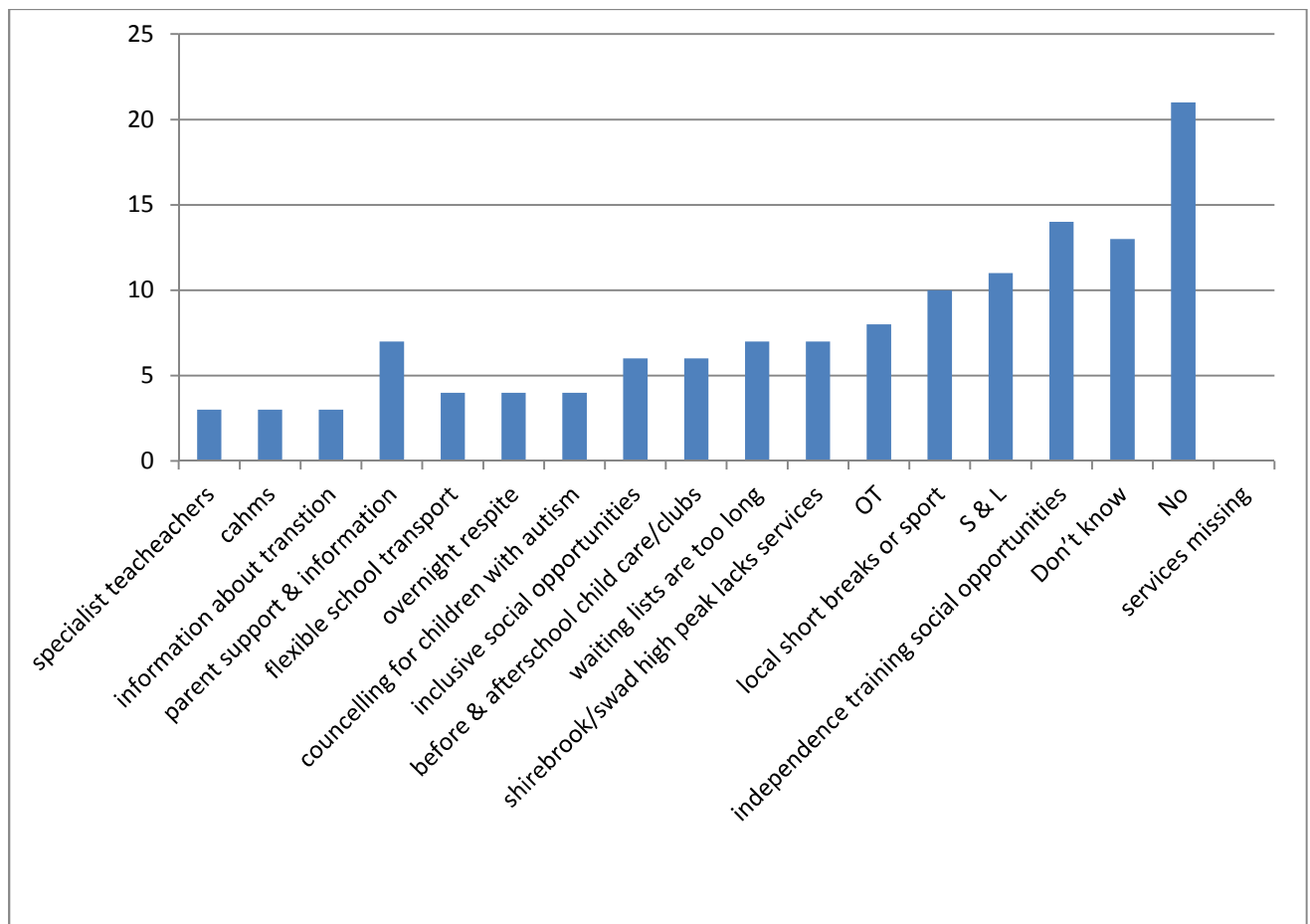
Q 6 Are there any services that are not available to you child/young person that you think should be?

182 respondents answered this question. 34 (16.68 %) of the responses were specific and specialist with no more than 2 of the same answer. I have not included these in the table below. 21 (11.53%) No responses had the biggest majority with 'don't knows' responses 13 (7.14%) coming second.

Speech & Language Therapy across the county featured both as one of the most valued services along with one of the services perceived as not available. Support, advice and services for young people in transition. Specialist knowledge, skills and services for children and young people with ASD also featured with 9 responses.

Other themes were waiting lists being unacceptably long and a general lack of information about services.

Local Offer Fig 8: Services that are not available?



Autism Services~ *Social opportunities for young people with Autism.*

Counselling service for young people with ASD.

A youth Group for teenagers with ASD would be helpful.

More Counselling services need to be available for autistic children as CAHMS do not see them, could be play sessions.

Short Break Services ~ *for children with complex needs.*

More disabled groups in this area Swadlincote

Lack of after school clubs etc for children with SEN, distinct difference to what is on offer to neurotypical children.

Swimming lessons are expensive to get the support the child needs to access the lesson.

None so far! It seems to be a case of being eligible to attend plays sessions during school holidays and that is it!

There is a very big gap of support from 16-25 Yew Trees Respite helped a lot of Families, funding being cut for this.

Youth services happy harmonics group was an amazing social opportunity but you have already closed it without any notice.

Youth services happy harmonics group was an amazing social opportunity but it was closed due to cuts.

Activities or days out that are local that are supervised, with similar special needs abilities in the children's school holidays.

Aiming high support hours which you reduced and then used them to cover a charity service we already had, really poor show

Access to providers of Applied Behavioural Analysis Programmes should be in the Local Offer, as should information on behavioural interventions.

'I don't know what I don't know'

She finds it hard to keep friends and is not sociable. Support with this

Transition ~ *threshold much higher than children's services meeting the adult SW has done nothing but raise my anxieties for the future and has given me no information we are worried about what support our son will get*

Waiting lists for specialist services

Hydrotherapy ~ can't get this even though my child can't walk

The speech and language service should be making a real difference though it seems there have been increasing resource issues.

Derbyshire Parent Forum

May 2014

Local Offer

- How will people find out about the Local Offer? The example of the Families Information Service was given and was unknown to the majority of attendees.
- Suggested ideas for publicity: DCC magazine(s), information in book bags through special schools & mainstream, libraries, community notice boards, local churches, hospitals, doctors surgeries, further education settings send information home and/or to students, youth centres, children's centres, MAT workers, school governors, leisure centres, play groups, supports groups and all other existing groups to circulate.
- IMPERATIVE – the leaflet or information is engaging not dull and to the point e.g. **Your one stop shop for your child/young person 0-25 with SEN and/or disabilities.** Anything like the leaflet DCC devised would be ignored and a waste of money.
- Available methods of requested information – text phone, printed, brail, large print etc on request.
- Idea: try out event alongside Parent Forum and other agencies to bring a wide range of people together to sample the Local Offer site to gain views/feedback and be given a tour of the site.
- Trip Advisor style facility – This was felt very important as this can offer a parent/carer opinion which other parent/carers value. This would also be used to highlight how great a service is or if there are any issues with a service for the provider to look into to rectify any issues or to reword information to make it less ambiguous.
- Service gaps – will there be a place on the site to leave feedback for what parent/carers/professionals feel is missing e.g. post 16 provision in particular areas? Could this then be shown as a Q&A page so it's transparent what can be done about the gaps and if nothing then an explanation?
- What will be the policy be on private SLT, physio, psychology, schools etc having their services as part of the Local Offer? Parent/carers may want to see this but also need to know if this is a safe option for them to use.

- Clarity is required on the following: will there be a free phone number to call, to get information from the local offer? Who will be responsible for the information being up to date? Will providers be able to put their own information onto the site?

Pathway for the Assessment

- A list (once decided) of which groups of children/young people will be priority to transfer to an Education, Health and Care Plan.
- Would moving school be a priority to transfer?
- More information needs to be shared on personal education budgets.
- Will Education, Health and Care Plans also be used for children/young people who have disabilities, behavioural problems, health needs to ensure they can access education?
- Would someone who has Autism who is gifted and talented receive a plan to ensure their outcomes are achieved?
- Young people who are aged over 18 who are currently working to their best ability feel let down having little support. Parent/carers who attended the forums felt to move on to an apprenticeship would be more suitable and fulfilling for the young person. How would they be able to make the move and get support in applying for an Education, Health and Care Plan if required?

Person Centred Approaches

- Differing information about this was given to parent/carers over the 15 meetings.
- A definitive explanation needs to be given.
- Will every setting use the same approach? If the approach differs in each setting and ALL tools are not used then “**Person Centred Approach**” needs to be removed from all information given to parent/carers as it’s very misleading.
- Will the service for a child/young person to help voice their opinions (service equivalent to pps) be available from September?

Single School Category/College Funding

- Is this the same funding and criteria for school action, school action plus?
- Is this support/funding already given to colleges?

- Most people agree that the Local Support Plan would be beneficial, it was made clear that this was not legislative and if it was going ahead that it would not be in place by September.
- Concerns raised – is this going to be a tool to draw out the process of getting an Education, Health and Care Plan? Is it to raise the criteria of the plan and save money? If the Local Support Plan doesn't go ahead, what will happen to the children/young people who aren't getting their needs met by the single school category/college funding but don't meet the criteria for an Education, Health and Care Plan. The gap will be much greater and more children/young people will "fall through the net".
- Would this have impact on TAPS funding?
- Throughout this section Keyworkers are mentioned parent/carers welcomed this and request more information on who they would be, how the keyworker system would work and if a professional would have time to do this along with existing workload?
- Along with person centred approaches this became very confusing and requires more clarity some professionals made this more confusing than others.

Education, Health and Care Plan

- When the criteria's available this needs to be shared.
- Most were very positive about the layout of the plan, others felt a photo wouldn't be appropriate and a chosen picture of something would be more acceptable by the child or young person.
- Again most happy about the amount of pictures but others asked if this could be a choice and just to have the one on the front?
- The terminology was very loose but it was explained that it was just the layout we needed feedback on.
- The £ on the back of Laura's confused people as they expected to see hours and the placement. This gave the impression that it would be an amount of money given for the child and then they could decide what it could be used for.
- The next step would be to have a brief explanation to each section to enable parent/carers to understand why it is in, where placement is named and number of hours of support is given.

Support & Aspiration Consultation

BME Forum 13 May 2014

BME Forum Membership

African Caribbean Community Association (ACCA)
Asian Association of Chesterfield & North East Derbyshire
Chesterfield & North East Derbyshire Chinese Elders Group
Chinese Big Society
Chesterfield Chinese Youth Group
Filipino Community Association of Chesterfield & North East Derbyshire
Chesterfield Muslim Association
Derbyshire Gypsy Liaison Group
Muslim Welfare Association
Polonia Chesterfield
Ukrainian Elderly Group

Vicky Pealing (Derbyshire County Council) and Amanda Brikmanis (NHS North Derbyshire CCG) visited the group to take feedback on the local offer and process being consulted upon.

The discussion focused on how to make services more culturally sensitive.

Language – Language can be a barrier for people to ask for things. Some people's cultures make them shy to ask for things.

An example was provided by a group member of a middle aged family not getting the best information relating to their child because of language barriers. Interpreters are often not made available if they are not requested so people don't always have a full understanding about what is being discussed in relation to their child.

Terminology – Sometimes professionals use language that people don't understand and also don't translate well. The message is keep the original message simple in the first place.

Interpreters - How do people get an interpreter? Some professionals don't offer one if they think people can say hello etc. There is a difference in being able to converse in English at a basic level to being expected to do the same in a complex issue around your child or other person you are responsible for. What about interpreters for carers who are responsible for the person being talked about, are they automatically made available?

There was a problem raised about interpreters not being medically trained or inexperienced in dealing with health issues. Again, there is a problem in getting the right message over to the professional and back again which can affect how a child is cared for. There is a problem about different people being used on different occasions so they aren't familiar with the issues, and you might relate better to one individual than to another.

Translation of written information – This needs to be readily available to people in other languages. Key languages outlined are Bengali, Urdu, Hind, and Polish. People accepted that it's not realistic to expect that all languages are available in the first instance.

Funding application forms – it would be better if these were written in other languages.

Parent Partnership – People had not heard of this group. It is publicised on the County Council website. The point was made that often people pass on the information through word of mouth, not everyone can read.

Culture – Forms should be person centred. An individual should not be labelled autistic. The forms should be questioning Does the child do x, What does your child need help with e.g. does he or she sleep properly?

It can be embarrassing and shameful to have your child labelled in a particular way. This is particular so in some cultures, but a feeling that it is relevant to all parents.

Sometimes parents can feel ashamed or not as a good parent. There is a fear that if you speak up about problems then your child might be taken into care. Asking for help is difficult.

An example was given of a child potentially being given the wrong information. The father could converse in English but he was not the main carer of the child so was not able to provide the best picture of the child and their needs. There was thought to be a training need for professionals not to make assumptions and to think what's best for the child rather than if they can get away with not having an interpreter. Professionals can make assumptions about people and how they live based on old ideas/ways.

Families take responsibility for caring for their elderly parents, so there could be a situation whereby a family is caring for a disabled child as well as a frail and elderly parent.

Patient Advice & Liaison Service (PALS) – Not everyone was aware of this service that helped people to deal with issues relating to health, to find ways around problems, to listen to concerns and complaints.

Immediate actions identified:

Parent Partnership – DCC to think of a different way of publicising the service other than the website

Patient Advice and Liaison (PALS) – NDCCG to provide information about the PALS Service

The Patient Advice and Liaison Service provides information and support to patients. The service aims to:

- Advise and support patients, their families and carers
- Provide information on NHS services and signpost callers appropriately
- Listen to your concerns and provide feedback to local Clinical Commissioning Groups eg on hospitals, transport services etc
- Help you to access reliable sources of information, or put you in touch with organisations or groups that can provide support

The service is confidential and staff can be contacted at:

PALS, Cardinal Square, 10 Nottingham Road, Derby DE1 3QT

Free phone 0800 032 32 35 (answer phone available outside office hours)

Email: derbyshirepals@gemcsu.nhs.uk

Mobile/text 07919 466 212 Minicom 01332 868831

CONSULTATION ON CHANGING SUPPORT FOR CHILDREN & YOUNG PEOPLE WITH SPECIAL EDUCATION NEEDS & DISABILITIES

Points & views made at the Community Lives Communication & Engagement Sub group on 27 May 2014

- Make it clear to families that they have a right to apply for an Education, Health & Care Plan (EHC) but that they won't necessarily get a personal budget - *The EHC plan will have a referral route as does the statement...the point is if they are awarded an ECH plan then they will have the right to apply for a personal budget, but will not necessarily be given one.*
- The EHC plan needs to include all the potential problems that a family might face
- People should be able to spend their personal budget on addressing their needs and the budget be pooled to meet their outcomes i.e. money from health could be spent on social activities
- Earlier the intervention means the sooner that support is put into place – with the right support children can improve – short term costs for long term gains
- Important that accessible information is available and as people get older aim the plan more to the young disabled person and not the family carer
- Each plan should be specific to the person – need to recognise there are very different audiences for the local offer
- Information should be part of the offer
- People bring their plan with them through transition – should evolve to be suitable for young people
- Plan should be reviewed and updated on a regular basis
- Make it appropriate for clients to understand as well as their families
- Good idea to join up and have an education, health and care plan – should be person centered for what is important to the client and the family

- This issue is difficult to give feedback when we don't totally understand what's involved as it's not clear from the information leaflets
- In theory the concept is brilliant
- Will the different agencies work together to agree a plan
- Worry is what happens to the people who don't qualify for an EHC plan, concerned that so many children fall through the net
- How many people has been part of the "Support & Aspiration" project?
- All plans should be part of a person centered plan
- Both Laura & Rachel have complex needs, have a case study about someone with a low level of need/disability, or someone with a physical disability who is good at communication and can express their own views
- Include mental health as part of the assessment and include the impact of mental health on the parents/family carers
- Statement of need used to be solely about education need
- Not clear how people are originally identified
- How will the needs of non-complex clients be met?

How will the plan travel with the person from CAYA to Adult Care? Who will be financially responsible once someone has moved from CAYA to adult services?

Support and Aspiration

Local Offer Special School Forum

- **What do you want to be able to find out about things to do and how you can be supported?**
Schools, College, Leisure Activities, Local Activities, Youth clubs, Special screening for movies, Fully Accessible Activities, Contact Information,
- **Would you like to get the information by website, social media, telephone or paper?**
Website, Smart Phone , Social Media,
- **How would you like it to look? – Colours, links, etc.**
Colours, Bold Type, Eye Catching, Lots of colours and Pictures, Easy to use, Links to other sites.
- **How would you like to look for information to find places, activities, age of people and needs of young people?**
On the Internet, Talk with Someone (Home, Personal, Money, Disability Issues,
- **Would you use the website if it was on the Derbyshire County Council website or would you like it to be on its own?**
On its own, DCC Website
- **Would you want to see the website using your smartphone or tablet?**
Yes, on the Tablet, Smart Phone
- **Would you like to be able to speak with someone if you had a question?**
Yes,
- **What information would you like your school / college / social care / youth club to provide about how they can help you?**
Training, Activities, Activities in School Holidays, Financial Support, Cooking Club, Independent Living, Sports, Walking, All Clubs, Music and Drama, Work experience, Interviews, Transport Links, Family Support, Short trips to local places (Derbyshire)

Support and Aspirations

Local Offer Questions 0 – 25 Years

05/03/2014

Sample Group: (67 Individual Young People)

Information Captured from:

- Strides Buxton – High Peak
- [South Normanton Pre-School – North East - 0 - 5](#)
- Oyster Club – Amber valley
- [Woodhoots – Bolsover - 0 - 5](#)
- Saturday Fun Club - High Peak
- Chesterfield College – Chesterfield
- Hear & Now Club - Chesterfield
- Multi Space – Chesterfield
- In Club – South Derbyshire
- A Team – Alfreton
- Canteloooupe - Ilkeston
- [Tiny Tots – Alfreton – 0 - 5](#)
- Special School Forum

- **What do you want to be able to find out about things to do and how you can be supported?**
 Schools / Special Schools (5), Catering Places (3), Library, Job and training information (9), Things that Worry me like bullying (2), Leisure Activities (20) College (2), Local Activities (3) Youth clubs (5) Transport Services (1) special Screening for movies (2) Summer Activities (2) Financial Support (2)

- **What do I like to do?**
 Playing with Teddy bears, Activities, sensory Activities, swimming

- **Would you like to get the information by website, social media, telephone or paper?**
 Website (26), Smart Phone (6), Social Media (10), Paper Leaflet (8), Magazine for young people (1) Telephone (4), Text (1)

- **How would you like it to look? – Colours, links, etc.**
 Colours, Bold Type, Eye Catching, Lots of colours and Pictures (26), Photographs (2), Video (1), Easy to use (3) Links to other sites (3) Not too busy (1) Help Button on website to talk with someone (1)

- **How would you like to look for information to find places, activities, age of people and needs of young people?**

On the internet (12), Booklet Paper (2) Talk with Someone (1), Lists of information (3) Parents (2) Through School (2), Search engine (1), Care Worker (1)

- **Where I like to go?**

Park (2) Adventure Park (1), Swimming (3)

- **Would you use the website if it was on the Derbyshire County Council website or would you like it to be on its own?**

On its own (10), DCC Website (11), Any Website (13),

- **Would you want to see the website using your smartphone or tablet?**

Yes, on the Tablet, Smart Phone (36) No Smart Phone or Tablet (1)

- **Would you like to be able to speak with someone if you had a question?**

Yes, Speak to someone (34), Virtual Chat (2) Face to Face chat (1) Help Button on website to talk with someone (1)

- **What information would you like your school / college / social care / youth club to provide about how they can help you?**

Leaflets and Posters, Training (6), Jobs (3), Activities in School Holidays (6), Library, Benefits, Help around housing, Don't Know (2) Post 16 Sessions (2) Cooking Club (1), On website with Teacher (1), Independent Living (2), Sports (3), All Clubs (5) Music and Drama (3) Connexions (2) Ask them Questions (1) University (1) School (4) Social Clubs (1) Transport (4) Problem page for personal issues (1) Accessible Activities (1) Short Trips within Derbyshire (1)

- **What makes me Happy?**

Mummy, Daddy, friends, Smiles, Baking