

Short Break Q&A

Purpose of this document

This Frequently Asked Questions document has been prepared to support authorities and PCTs in delivering the short breaks programme. It builds on a range of other materials and resources.

Key to this is the implementation guidance, *Aiming High for Disabled Children: Short Breaks implementation Guidance*.

(Available at: www.everychildmatters.gov.uk/ahdc.)

The TDC website (www.togetherfdc.org) also contains a wealth of information and there is a dedicated helpline available on 0121 683 2068.

If you have additional questions not covered by these FAQ's you can use the Discussion Forum on the TDC website; refer to your TDC Local Programme Advisor or Regional Strategic Lead or contact the TDC helpline.

The Frequently Asked Questions are divided under the following headings:

1. Programme Background
2. Practice issues and Development
3. Finance and Capital Funding
4. Support

1. Programme Background

Q. What are Aiming High for Disabled Children and the short breaks programme?

In *Aiming High for Disabled Children: better support for families* (AHDC - DfES/HMT, May 2007) the Government announced a range of measures to transform services for disabled children and their families. The resulting AHDC change programme is designed to ensure effective delivery of child centred services.

The measures include a core offer, which sets out national expectations about families' relationship with services, and a national indicator capturing parents' experience of services in relation to the core offer components.

AHDC also announced a number of significant investments in key service areas. These include a £35m childcare accessibility project to improve access to childcare for disabled children, a £19m Transition Support Programme to support service improvements that will promote disabled young people's transition to adulthood, and £5m for supporting parents' forums throughout England.

The largest investment however, is for the transformation of short break services and DCSF has allocated £269m of revenue funding for local authorities over the 2008-11 Comprehensive Spending Review period for this purpose. To enable PCT's to work with local authorities to significantly increase the range and number of short breaks new growth funding has also been included in PCT baseline allocations.

The DCSF also published the Children's Plan in December 2007, which set out the provision of £90m for capital projects supporting short break provision.

Q. What is the short break funding for?

The funding is to transform short break provision for severely disabled children and their families. We want families to have access to a modern range of services that meets their needs. This will mean local statutory partners recognising their combined short break provision to be a joint service, and planning and delivering on improvements that will see an increase in quality provision and beneficiaries that is in keeping with the major new funding available. It will also mean most areas expanding the types of short break service available so as to be able to offer a more personalised, flexible service that is well designed and orientated around the families needs. Finally, transformation will mean breaks for those eligible children and families currently unable to access suitable provision.

Local areas are expected to work in a way which has a dual focus. They are expected to build their short break provision in specialist settings, such as residential centres, carers' homes in the child's own home - concentrating especially on groups of children who have previously remained on lists of unmet needs or have only had limited range of options to choose from, for example, disabled children with moving and handling needs; disabled children on the autistic spectrum with additional impairments or older disabled children. Local partners are also expected to work with staff and volunteers in mainstream and universal settings to build their capacity to accommodate disabled children in receipt of short break provision,

The Government has set out a short break Full Service Offer (FSO) in the implementation guidance which it expects all local areas to be providing by April 2011.

Q. How do short breaks link to the core offer and the indicator (NI54)?

The core offer describes the expected relationship between providers of disabled children's services and disabled children's families. In providing short break services, local authorities and PCTs are expected to ensure that services which are commissioned both internally and externally are developed in accordance with these standards.

The indicator will be based on parent satisfaction data. We know that short breaks are very important to parents of disabled children. Satisfaction with short breaks services will therefore be an important driver in shaping responses to the indicator. The measurement of satisfaction is based on the elements of the core offer

2. Practice issues and Developments

Q. What is the short breaks duty?

The Children and Young Persons Act 2008 will alter Schedule 2 of the 1989 Children Act so that it requires that '*every local authority (England and Wales) shall provide services designed to assist individuals who provide care for such children (disabled) to continue to do so, or to do so more effectively, by giving them breaks from caring.*'

This change in the law will make short break provision for disabled children and their families a statutory service. The wording of the new duty is also important. The new legal provision makes clear that breaks should not just be provided to those carers struggling to maintain their caring role, but also to those for whom a break would improve the quality of the care they can offer. Short breaks should therefore not just be used as a crisis intervention, but should also be used in a preventative fashion to enhance the lives of families with disabled children and help them lead an ordinary and valued life.

In addition to the new duty, the legislation also provides the Government with powers to issue accompanying regulations which will determine in greater detail what local authorities must do in meeting the new duty. The Government intends to write these regulations at a later date - drawing upon the learning gained from the short break programme - and in doing so further define the legal requirements surrounding short break provision.

The regulations and the new duty will come into force in April 2011. However it is essential that local authorities use the interim period to develop their provision - in line with the national transformation programme expectations - so as to be in a position to meet the new legal requirements from this date.

Q. What is happening about the work on whether to use Section 17 or 20 for overnight placements?

The current legal position is that where the local authority provides accommodation for a child for a period of over 24 hours, that child is looked after under section 20 of the Children Act 1989. A local authority circular (LAC (2002) 13) sets out the circumstances in which children might be accommodated under section 17 but the circular does not envisage section 17 being appropriate for accommodating unaccompanied children.

In the Care Matters White Paper the government made a commitment to clarify the legal status of children using short break services. This work is underway and the Government plans to issue guidance for consultation during early Summer 2009.

This work flowing from the White Paper commitment has raised other policy issues for example, overnight childminding and the integration of carers' assessments. The goal is to issue clarification on these issues too as they relate to short breaks.

Q. What about issues in relation to regulation and inspection?

There is a widespread view in the field that current standards against which short break services are inspected do not recognise the unique nature of short break provision. The fostering services and children's homes National Minimum Standards - which help guide the focus and conclusions of Ofsted - are to be reviewed, and the Government is intent on ensuring that the revised NMS reflect the nature of short break provision. Issues such as multiple registration are also under review. There will be opportunities during the consultation period for comments on the new draft NMS.

Q. Who is looking at issues relating to workforce?

(1) The Children's Workforce Development Council (CWDC) is undertaking work in relation to the disabled children's workforce. Some specific early work is concentrating on foster care induction and training. CWDC will publish new training and development standards and associated guidance and workbook for short break foster carers by June 2009.

CWDC has also established a Stakeholder Reference Group for children with disabilities and special educational needs to support the children's workforce in working with children with disabilities and special educational needs.

(2) There has also been an action learning set of short break pathfinders looking at the issues related to workforce. The set will publish their findings in May 2009.

(3) BAAF is developing an assessment form in relation to short breaks.

(4) Shared Care Network (SCN) is being grant aided by DCSF to provide an important short break carer recruitment support service to short break providers - both statutory and independent. This service will include free access to practical recruitment materials, photo-banks, and direct advice and guidance. SCN will also be undertaking media activity to raise the profile of the short break workforce.

Q. Which children should we be focusing on?

The evidence that underpinned AHDC showed that there is currently an inverse care law operating, i.e. children with the highest level of need are the least likely to receive services they need. A clear goal of the programme is to address this. This accounts for the prioritisation in the guidance of the following groups of children.

- provide age appropriate provision which ensures the following groups are not disadvantaged in accessing short breaks:
 - a) children and young people with ASD¹. These are likely to have other impairments, such as severe learning disabilities or have behaviour, which is challenging. Not all children on the Autistic Spectrum will require specialist additional short break services
 - b) children and young people with complex health needs which includes those with disability and life limiting conditions who have reached the palliative care stage of their life cycle as well as other and young people with complex health needs as well as other impairments – physical, cognitive or sensory impairments.²
 - c) children and young people aged 11+ with moving and handling needs that will require equipment and adaptations. These children are likely to have physical impairments, and many of them will also have cognitive impairments and / or sensory impairments;
 - d) children and young people where challenging behaviour is associated with other impairments (e.g. severe learning disability). Children in this group will display behaviour which challenges services or behaviour which causes injury to themselves or others;
 - e) young people 14+. The young people who fall into this group

¹ An autism spectrum disorder (ASD) is a lifelong developmental disability characterised by difficulties in three areas: social communication, social interaction and social imagination, sometimes known as the triad of impairments. Children with ASD and accompanying severe learning disabilities have often missed out on short breaks.

² These children require support, often including clinical and / or invasive procedures in order to maintain their optimum health on either a regular basis or in an emergency. Some of these children may be dependent on technology e.g. ventilation; tube feeding. The need for advanced planning and preparation for technology dependent children cannot be underestimated. To ensure the short break provision is provided safely it is crucial that this provision is developed in partnership between local authorities and PCT's. A significant requirement is the need to train sufficient staff to ensure they are competent to deliver safe care. The training implications for these staff are significant.

are young people who are severely disabled and require services that are appropriate to their age.

These are not discrete groups of children and some children may fall into more than one of these groups - but it is important that all areas ensure that eligible children falling within these groups of children are not disadvantaged in their access to provision.

It is also important to recognise that the scale of the investment in short break provision through Aiming High also enables local partners to broaden access to provision to a wider body of recipients. As local authority short breaks budgets grow between an estimated 50-500% in 2010-11 compared to 2007-08 levels - depending upon area - authorities will need to reflect on their capacity to provide for a greater number of children. This increase in beneficiaries will help local partners to make a reality of using short breaks in a preventative fashion

Q. Is there a national definition of disability we can use?

While Aiming High will deliver good practice in the use of data in disabled children's services, it will not determine for local authorities which children should be considered eligible for services through a single or set of definitions. It is important that each area assesses need against a range of factors in the child's life - in keeping with Children Act 1989 guidance. We would expect areas to work within a 'social model' of disability so locally agreed definitions of disability should not be completely based on 'diagnosis' or 'impairment', but take into account the impact of the impairment on the child's life and the life of their family. Local areas need to also take into account the barriers in local services which prevent access by disabled children.

Work on eligibility is being developed which will assist local areas to think through the process of developing appropriate criteria to aid the allocation of breaks and to meet the expectation that authorities will hold clear, transparent and public eligibility criteria. This will include issues arising out of the recent Islington judicial review.

Q. What assessment processes should we use

Assessment is essential to find out the needs of the child and family, how best to meet them and to ensure that those caring for the child have the information they need to care for the child properly.

The assessment of need for short break services should be proportional to the level of support or services likely to be accessed. For example disabled children accessing mainstream services for a few hours each week with the

support of a befriender / sessional worker / personal assistant do not need to be assessed using a core assessment process. However disabled children requiring larger and more specialist short break services are likely to need a core assessment.

Evidence from pathfinders shows that many areas are using self-assessments (based on the type of self-assessments used in some of the Individual Budget pilots or Resource Allocation Systems) in order to assess need for simple or single services – which do not involve overnight stays or a combination of services.

Where local areas are establishing a ‘local offer’ to a minimum level of services for an identified body of children regarded as eligible in their area, additional assessment processes need not be carried out. Eligibility for the local offer may be based on external criteria – e.g. whether the child is on higher rate DLA, or is already accessing certain specialist disability services.

Q. How do local areas ensure that families should not have to provide the same information time and time again?

If a child is assessed using either a Common Assessment Framework (CAF) or self assessment and the local area decides further assessment is necessary the information already obtained should be built on rather than the family being asked the same questions again. Assessment should be seen as a co-ordinated process rather than a series of assessments conducted in isolation.

Sometimes it seems there is avoidable duplication in areas using matrix or scoring systems to help decide on access to the type and level of specialist services. The information to complete the matrix should be taken from the assessment rather than expecting the family to complete the matrix as if it were a separate assessment.

Q. What about the separate assessment of the carer’s needs?

In some areas there has been difficulty in ensuring that there is a specific focus on the needs of the carer as required by the Carers (Recognition and Services) Act 1995 and a holistic assessment of the child and family’s needs. The London Borough of Sutton has developed its own version of a DH publication to ensure that it fully meets the requirements of legislation for carers and for children. The Sutton example of the checklist on carers assessment prompts can be found on the TDC website at <http://tinyurl.com/d4pdnc>

Q. What are Universal Services?

These are types of activities and services that are designed (as far as possible) to be open to all children and young people e.g. children's centres, holiday play schemes, weekend and evening clubs, play and leisure activities, youth clubs. Sometimes, these services also provide specialist sessions for particular groups - e.g. disabled children - within the broader open access framework.

Some local areas already have some good inclusive universal provision but many disabled children and young people are still not able to routinely access these services in the same way as their non-disabled peers.

Q. What is the position in relation to short breaks and universal services?

Aiming High encourages strategies that incorporate the use of universal settings to provide short breaks, but local partners should also ensure that their overall strategy will provide eligible severely disabled children with the access to break provision they and their families need - whether this be in universal or targeted settings.

In working with universal settings, the aim of the programme should be to ensure that such settings are capable of supporting substantial and regular breaks, rather than improving general access for disabled children. For example, fitting a hoist to a swimming pool will not in itself provide a parent or child with a short break, although it may enable the child to access the pool. Fitting a hoist because it is a necessary part of a short break programme undertaken through taking disabled children into community settings e.g. the swimming pool would however be appropriate.

Work with universal settings could take the form of building the skills of universal service providers, the support of a befriending, sitting or sessional service (either as bridging or ongoing support) and improving the accessibility of universal settings by building on DDA compliance.

Through building the capacity of universal settings to provide short breaks, general accessibility in universal settings should also be raised as a result - although this benefit should not be confused with, or substituted for, the aim of the short breaks programme.

Q. Do local authorities have to give families a choice whether they want direct payments?

Yes. Families with disabled children and disabled 16 and 17 years olds have to be offered the choice of direct payments if they are assessed to be eligible for service. Local authorities have had this duty since the Health and Social Care Act 2001 was implemented.

Q. How does the assessment for direct payments work?

A direct payment is not a separate type of service, it is an alternative way of providing a service. Therefore the assessment is the same as for any other service and is based on the Government statutory guidance, *The Framework for the Assessment of Children in Need and their Families*. Once the assessment has been completed a discussion should take place with the family to consider the options of how best to meet these needs. It could be through the provision of services or through direct payments, or it could be partly services and partly direct payments. But the assessment of children's needs in the context of their family is just the same.

Q. Can the local authority insist that a family use direct payments?

No. Families with disabled children and disabled 16 and 17 years olds have a choice. That is quite clear from Government guidance. Not everybody wants the responsibility of direct payments, even with good advice and support. The guidance says, "Payments may only be made if the person agrees, and they have a choice of whether to receive services provided by the council. Recipients of services should not be unfairly influenced in their choices one way or the other..(DH, 2003, page 5 para 5)

Q. Do families have to have a CRB check on the person they wish to employ using a direct payment?

The answer is 'No, but'. And it is a big and very important 'but'.

It is invariably a good idea to have a CRB check on the person you are thinking of employing. There is good evidence that disabled children are more vulnerable to abuse than non-disabled children. And you should always bear in mind that a CRB check is only part of the process of employing someone to

look after a child. It is also very important to follow up references and follow the Government guidance on checks and references.

But the local authority cannot insist on a CRB check. This is because a family might want to use their direct payment to employ someone they know very well. For example they may wish to employ a neighbour they have known since birth, who has babysat all their children and has been CRB checked through her part time job as a teaching assistant in the local school. In such a situation it would be an unnecessary imposition to demand a CRB check when the family is perfectly happy with the arrangements and for good reason. Parents are invariably best placed to make decisions on their child's well-being. In every case the local authority has to give advice about employing suitable people. It also has to be satisfied that the direct payment will safeguard and promote the welfare of the child. This is a key duty under the Children Act 1989. If a family tried to insist on employing someone they hardly knew the local authority would have to explain their Children Act duty to make sure that the direct payment will promote the welfare of the child. If they are not satisfied, the local authority is likely to refuse to make the direct payment.

CRB checks are not the only way in which employment practices can be strengthened to safeguard disabled children (and are not a guarantee of suitability). The local authority should ensure that the agency that provides information and support to parents – provides training or advice which ensures that parents have the knowledge and skills to become responsible employers.

Q. If a direct payment is made to a family and they employ someone to care for their disabled child, who is responsible for health and safety?

If you employ staff you take on responsibilities for ensuring their health and safety while at work. If you contract with an agency, then the agency, as the employer of the person providing the service, will usually have the main responsibility for safeguarding the health and safety of that person. For further information, contact the Health and Safety Executive Infoline on 0845 345 0055. The National Centre for Independent Living also produces leaflets covering health and safety issues for people employing personal assistants.

Q. Do authorities wishing to set up 'pools' of carers that parents can employ through direct payments need to register under the Domiciliary Care Standards?

This depends on the tasks being carried out by the service. CSCI has issued information for service providers on which services need to be registered. The need for registration will depend on whether the service is involved in

recommending or employing individuals who provide personal care to children. If as a local authority you are contracting out this service to an agency – that agency may need to be registered. For further information the leaflet can be downloaded from:

<http://www.csci.org.uk/professional/default.aspx?page=7341&key>

Q. What's the difference between a direct payment, an individual budget, and a personal health budget?

New ways of meeting people's needs for care are developing quickly and there is a new language growing up around it. The welfare reform Green Paper, published in 2008 by the Department for Work and Pensions, outlines proposals to introduce legislation to give some adults the right to request an individual budget. The government is committed to increasing the choice and control that disabled people have over the support they require to go about their daily lives. It looks as if policy on individual budgets will continue to develop.

A *direct payment* is a payment instead of a specific service. The amount of the payment is roughly equal to the cost of providing that specific service. The Carers and Disabled Children Act 2000 introduced direct payments for disabled children and their families and for disabled 16 and 17 year olds.

Individual budgets bring together a number of funding streams and areas of expenditure to provide a more holistic joined up package of support for the user. They have mainly been piloted with adults and an AHDC pilot for children will start in April 2009. IB's are aimed at developing a holistic approach to a child's care package and therefore are about the range of services not individual ones. The aims are to encourage coordinated provision of services, avoid duplication in provision and improve outcomes for the family. Individual budgets can be held and managed by a broker, with the advantage that this could better support service users to manage their budget.

In 2009 the Government will start piloting *personal health budgets*, as a way of giving patients greater control over the services they receive and greater choice over the providers from which they receive services. The personal health budgets pilots will look at personalised budgets for a range of care groups, and some pilots may include disabled children and young adults

Q. With regard to disabled children with complex health needs how does a local area determine which part of a large package of support is a short break?

A small but significant number of disabled children will require support with their health care needs to enable them to maintain their optimum health and access the world around them, for example children on ventilators, children

who are tube-fed. Many of these support packages may be large (and expensive) – for example they may include an overnight sitting service, support to attend school, support to take part in activities after school or at the weekend. These children will also be eligible for assessment and funding under the proposed continuing care framework.

Not all the support provided constitutes a short break, and there needs to be discussion and negotiation between the local authority and the PCT regarding what part of the package is a short break and therefore may be funded under that Aiming High programme.

One of the Pathfinder learning sets has been discussing the issue and will develop guidelines which local areas may find useful in determining what a short break is, within a large care package.

Q. Who are the children who use hospices and are all stays in hospices regarded as short breaks?

The majority of children who use services provided by hospices are ‘disabled children’ and those with complex health needs – usually with multiple impairments and complex health needs rather than children with what would be considered as life limiting conditions – such as cancer.

Not all the services provided by hospices are short breaks, but where they are, the time the child spends in the hospice should be taken into account when authorities consider the level of short breaks a child receives. In determining whether the service is a short break the local areas needs to look at the purpose of the hospice stay and whether that meets the criteria for a short break.

In some areas where the hospice service is not directly commissioned for each child, some hospices have been reluctant to share information regarding children using the services and the level of service provided with commissioners. This is changing and an example of good practice where the hospice works closely with the 7 surrounding local authorities is St Oswald’s in the North East.

Q. If more children with short life expectancies are to be placed with short break carers (rather than in residential / hospice settings) which guidelines should be in place to support those carers?

Information from areas where there are contract carer services indicates that more children with complex health needs, multiple impairments and sometimes a diagnosed short life-expectancy condition are receiving short breaks in family-based placements rather than residential settings. Such children are very vulnerable and local areas need to put in place processes to

safeguard both the child and the carer. It is possible the child will die during a placement with the carer therefore processes also need to be in place which support both the carer and their family and the child's own family should this occur.

For example, local areas need to develop emergency procedures.. There needs to be 24 hour emergency contact and support, should the carer have concerns and the parent is not contactable. Issues around loss and bereavement should be addressed in the preparation training of carers and with the whole family during the assessment process. Carers should not be pressured into taking children with conditions which they and their family cannot manage on an emotional level. Support should be available for the carers and their children following the death of a child linked to them for short breaks.

As services are transformed and these children are offered the option of family based short breaks, new issues will need to be addressed.

3 Finance and Capital Funding

Q. Where is the money?

The local authority funding for short breaks is in the AHDC block within the Sure Start, Early Years & Childcare Grant and Aiming High for Disabled Children (AHDC) Grant. The funding is ring fenced within this block and can be spent for no purpose other than AHDC activity. In addition, the Government expects local authorities to maintain their current contribution to short break provision. The funding under Aiming High is intended to be additional and should not replace existing contributions to short break provision.

The Department of Health has provided PCTs with £340m over the 2008-11 period to support partnership working for disabled children, with a focus on improved access to short breaks, to wheelchairs and community equipment, and to palliative care.

The Government has also issued two important letters concerning this funding. The first is a joint letter from the two Secretaries of State, Alan Johnson and Ed Balls, to PCT Chairs, copied to SHA Chairs and LA lead members, highlighting the opportunities for action flowing from the Child Health Strategy and its announcement of £340m over 3 years within PCT allocations to improve services for disabled children.

The second is a DH letter from Christine Beasley, the Chief Nursing Officer and David Flory, DG for NHS Finance, Performance and Operations, to PCT Chief Executives, copied to Directors of Children's Services, setting out further detail on the desired outcomes for disabled children and their families, and on the arrangements for follow through.

The link is as follows:

http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Dearcolleagueletters/DH_097376

or here

<http://www.dcsf.gov.uk/localauthorities/index.cfm?action=content&contentID=18799&categoryID=75&subcategoryID=106>

Q. What are the arrangements for funding post 2011, how do we ensure sustainability?

The Government does not commit funding beyond 3 year Comprehensive Spending Review cycles (2008-11). However the intention is that transformed short break services are lasting and local authorities and PCTs should not consider the current change programme as a time limited initiative.

New short break regulations will be commenced on 31 March 2011 which will also introduce permanent requirements around the provision of short break services. To meet the new requirements, local authorities will need to utilise the opportunity afforded by Aiming High to significantly enhance their short break provision ahead of the 2011-12 financial year.

Q. Can we carry forward any revenue allocation between years?

No.

Q. What is the capital money for?

The money is to help local authorities and their Primary Care Trust partners to create access to short break provision through providing new equipment, adaptations, and additional facilities

Local partners will need to consider how to use the new capital funding within their wider strategic planning for short break services, and in combination with other capital funding sources - including those relating to play and youth facilities set out in the Children's Plan.

Q. How flexible can you be in terms of our use of the capital funding?

The Government's key requirements are that capital funding:

- a. is used to enhance short break provision for disabled children and young people and to meet the Full Service Offer;
- b. is not used to substitute for funding that would otherwise have been used to meet the requirements of disability legislation;
- c. is spent in accordance with the short break delivery plan to be agreed with Government;
- d. Is spent in accordance with the Sure Start, Early Years and Childcare Grant MoG, the AHDC settlement letter, and the Short Break implementation guidance.

Q. What will disabled children and their families see change as a result of this capital funding?

A range of things. We anticipate adaptations to short break and contract carer's homes to enable them to provide breaks for severely disabled children and thereby increase the pool of family-based carers available, to feature heavily within local partners planning. Adaptations to venues such as children's centres, youth clubs and leisure centres are also expected where these settings specifically support short break provision.

We also expect some of the money to be spent on accessible vehicles to transport children to break venues and small building programmes where extra short break facilities will be added to existing venues. These should be developed as an integral part of short breaks strategy and compliment current provision.

In areas with larger capital allocations, local partners may also wish to create substantial building projects - for example establishing adapted property that foster-carers could use to provide overnight breaks, or properties where whole families including disabled children can have a break and take part in a range of activities.

Q. How will the capital money be allocated?

The funding will be allocated to local authorities through the Sure Start, Early Years & Childcare Grant and Aiming High for Disabled Children (AHDC) Grant - although its use should be subject to joint-consideration with their

Primary Care Trust partners.

Q. To enable the short break Full Service Offer (FSO) to be met, can money be spent on issues other than short breaks, e.g. consultation?

Short break funding can be used for any purpose that will enable the authority to achieve the FSO and:

- is in keeping with the terms and conditions in the allocations letter and SSEYC Grant Memorandum of grant; and
- is in line with short break programme guidance (www.everychildmatters.gov.uk/ahdc)

Q. How much of the local authority grant can be spent on management and admin, is there a fixed percentage?

The DCSF has not imposed a percentage ceiling on management and administrative charges for use of local authority pathfinder funding. Data will be collected locally on this element.

4 Support

Q. What support is available and how do we access it?

The Government launched 21 pathfinders³ to accompany the first two years of the short breaks programme. Learning sets attended by the pathfinders have generated significant insight into delivery and final learning outcomes from these sets is being published by Together for Disabled Children on its website (see below).

While pathfinders will continue to contribute to national learning and maintain a funding profile that runs a year ahead of non-pathfinder areas, from April 2009 18 Champion areas have been selected to provide specific elements of

³ Areas were notified in writing of the pathfinder programme by Andrew Adonis, Parliamentary Under Secretary of State for Schools, and Ivan Lewis, Parliamentary Under Secretary of State for Care Services, on 4th October 2007. The pathfinder application process has provided a wealth of information relating to local authority and PCT current provision of short breaks and plans for meeting the aspirations of AHDC. An analysis of the information provided through the pathfinder application process is available at www.everychildmatters/ahdc

peer support activity through sharing learning at local events, product development, research and practice development.

The Government has also contracted with *Together for Disabled Children* (TDC) to facilitate peer support and network learning and to provide additional focussed support where it is needed. TDC support will be targeted at all local areas - not just pathfinders - and will include:

- regional networking and peer support activity;
- training opportunities;
- direct support for areas that require it;
- good practice materials;
- tools and guidance.
- a dedicated and inter-active web-portal.

Each local authority and PCT has been provided with a TDC contact and support based on need.

Please see the TDC website for up to date information (<http://www.togetherfdc.org/default.aspx>).