



0-25 Children with disabilities team: a guide for children, young people, their families, practitioners and professionals

APRIL 2018



Department for Children, Adults and Health

0-25 Disabled Children's Social Care team eligibility guidance

A guide for children, young people, their families, practitioners and professionals.

The Disabled children's social care team within the 0-25 service has several functions, one of which is to provide information, advice and support to children, young people, their families and carers to enable children with disabilities to enjoy and achieve social inclusion. The team has a duty to safeguard vulnerable children and young people and to assess need, develop plans and provide services where appropriate. We will then review these plans regularly to ensure that outcomes are being achieved.

The 0-25 service **Mission Statement** is:

'To enable every child and young person with a special educational need or a disability to be given the best chance to succeed and to realise their potential.'

Principles

Our mission statement for the service is built around the following core principles:

Safe - We will ensure children and young people are safeguarded and protected from harm.

Person centred - We will ensure that the child, young person and their family will be placed at the centre of all that we do. We will take account of the child or young person's needs, views and aspirations.

Outcome focused – We will have a clear focus on outcomes to ensure quality, person-centred planning to meet short and longer-term need. Interventions and resources will be proportionate, fair and flexible to respond as circumstances change.

Preparing for adulthood - We will engage with young people and their families at an early stage to enable smooth transitions which will support aspirations; young people will be empowered to make their own decisions to move into adulthood successfully, increasing independence and participating in their community.

Clear and transparent - Communication with children, young people and their families will be timely, clear, easy to understand, accessible and in

appropriate formats. Families will have access to quality information about services and choices available.

Services offered by the 0-25 disabled children's social care team:

- we deliver social care support services to children with a range of additional needs and their families within the home and community settings, or in out of county placements
- we work with children and young people to ensure we meet their identified needs
- we aim to ensure children are effectively safeguarded, promote their health and wellbeing, to access learning and fun activities.
- we support families to provide the best possible care for their children.

The 0-25 Disabled children's social care team provides specialist services to disabled children and their families. This includes:

- Assessment to access assessed and complex needs support packages
- Emotional and practical support
- Advice and signposting
- Child Protection Services for disabled children
- Services to Looked After Disabled Children

Eligibility criteria for children and families:

The 0-25 disabled children's social care team is a specialist team and the fact that a child has a disability or impairment does not necessarily mean that a service will be provided by this team. The use of universal or targeted services should always be considered and explored initially as the way to meet the needs of a child and family, possibly through the Early Help Single assessment framework (SAFeh). A SAFeh is a lower tier assessment which brings together all the key early help professionals to help draw up an action plan of how best to achieve the required changes needed for children and their families or carers.

All children with a disability are regarded as children 'in need' for the purposes of Part 3 of the Children Act 1989, so are therefore entitled to an assessment of need. This assessment will determine whether or not the child or young person is eligible for support from the Council and may be completed by either the 0-25 disabled children's social care team or the Access and Response team. The young person

must be aged 0-18 years and their main permanent home address must be within the South Gloucestershire area.

To be eligible for a service from the 0-25 disabled children's social care team, the child or young person must have a severe, substantial and permanent disability or impairment, which is adversely impacting on the child/ young person and/or family and its ability to function. A severe and significant disability is defined as a physical or mental impairment which seriously limits one or more functional capacity. These include age appropriate mobility, communication or self-care. Where the child is of school age, the child would also require a current Education, Health and Social Care Plan (EHCP) ¹ or Statement of Educational Needs.

The local authority uses the following eligibility criteria as part of an assessment process to decide who can access specialist services from the 0-25 disabled children's social care team, to ensure that families most in need receive the necessary support:

- severe and substantial disability or impairment that is permanent and has a significant impact on the child and young person's daily life
- sensory impairment that has a significant impact on the child and young person's daily life
- severe learning or physical disability
- combination of/or multiple disabling factors that have a significant impact on the child and young person's daily life
- children and young people with complex healthcare needs including those with a life limiting or a life threatening condition (the CCG may also have responsibility for some of these children)

Children and young people can also receive a service from other teams within the Council, including Locality social work teams and FYPS (Family and Young People service) within Preventative services. Allocation to an individual team will depend on level and type of need and which team is best placed to meet the particular needs of each child.

For adults of age 18 -25 years, assessments will be completed as required by the Care Act 2014.

¹ In exceptional circumstances the 0 – 25 Service will consider providing a Social Care service to children and young people without a plan, examples of exceptional circumstances include; young children yet to be assessed for a plan but who would otherwise meet the criteria for a plan, children or young people who suffer a sudden onset life changing issue such as a road traffic accident or children and young people diagnosed with sudden onset life limiting conditions, this is not an exhaustive list and the advice of the 0 – 25 Team Manager should always be sought.

Guidance for referrers:

When making a referral to the Integrated Children's service's Access and Response (ART) team, it is important that certain information is provided to enable ART to make decisions. Referrals should inform of the nature of the impairment or disability and whether this is permanent and substantial, with as much information as possible regarding the adverse impact of this impairment/disability on the child and family functioning.

Information should be included as fully as possible regarding: the child's diagnosis and more holistic needs, household composition, how well the parents/carers/family are coping and managing to meet the child's needs, any safeguarding concerns, whether there are any concerns about the risk of family breakdown, what services have been offered and tried before, what are the significant barriers to successful use of universal services, and what other services are involved in supporting the child and or family.

All referrals to Integrated Children's services need to be made to the front door service Access and Response team (ART), where they will be screened and allocated to the appropriate team. If, at the referral stage, there appears to be a risk of significant harm to the child, and the child is not already open to the 0-25 disabled children's social care team, these will be managed and allocated within the Response team following the normal safeguarding pathways for Strategy discussion and assessment.

If any concerns are held about the risk of significant harm to a child, the normal safeguarding process and referrals should be made regardless as to whether the child has a disability. If a referrer would like to discuss an individual case, please consult the ART team or the 0-25 team directly by speaking with the duty social worker.

Following referral:

A social worker will carry out an assessment of the child or young person's needs, taking into account the needs of their parents, carers and siblings. This is called a single assessment. The parent/carer assessment required will generally be completed at the same time and within the Single assessment. The single assessment will consider the nature of the child's impairment and their holistic needs; any impact on the child and family; child and parental resilience; parental and sibling's individual needs; and the welfare and safety of the child and, or other children living in the house; family and friends support networks.

In order to complete this assessment consent must be obtained by parents or those with Parental responsibility, as well as the child or young person if of sufficient age and understanding. Consent is needed to visit the child, parents/ carers, anyone else living in the household and to contact, gather and share information with any absent parents with Parental Responsibility, as well as any professionals or others involved

in the care, education or treatment of the child. Assessments will normally consider all children in the household, to consider whether they are young carers. As part of the assessment the social worker will meet with the siblings to ensure a holistic approach, addressing the child's needs within their family context and considering any young carers within the household.

Once the assessment has been completed, if unmet needs have been identified and a service is deemed to be required, a Child in Need (CIN) plan will set out how these needs will be met, the outcomes needing to be achieved and a recommendation of which team within Integrated children's services is best placed to provide a service.

If it is identified that needs cannot, even with support, be met by universal services, more specialist services may be identified as being required. These can include support with personal care, short breaks provided by more specialist workers, and breaks away from the family home, including overnight stays. If this level of need and support services are required, the child/young person's needs will be met and coordinated within the 0-25 disabled children's social care team.

Breaks away from the family home, including Share the care or residential short breaks will normally only be provided when there is clear evidence that no other type of service is able to meet the needs of the child or family, and/ or where care provided by the family to the child during the night is depriving parents or carers of sleep and this is impacting on their ability to continue to care. The principle behind this is that generally children have the right to remain in their own home and be cared for by people familiar to themselves.

Even when high level services are provided, these will be regularly reviewed with the aim of re-integrating children into universal services if this is possible. The child and family will receive social work visits on a regular basis, and care plans will be reviewed in line with the CIN status given to children with disabilities. All reviews will be completed in partnership with the child/ young person, their parents, carers and families, and other professionals involved in the support of the child. CIN reviews will review packages of care to ensure that the required outcomes are being achieved and if not, the support package will be amended accordingly. The social worker will provide advice and information regarding social care issues for the EHCP plan and will also combine one of the CIN reviews with the EHCP annual review, in order to ensure plans are joined up and that the amount of meetings for children/parents/carers is kept to a minimum.