



Access to support Children with Disabilities Team Policy & Procedure

**Department for Children, Young People and
Culture**

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1. THE POLICY

1.1 INTRODUCTION

This document seeks to explain how the Council will assess and support disabled children and their families.

It is set out within the context of Bury Safeguarding Children's Board "Thresholds for Intervention Document" 2015 and key changes with support for children with disabilities following on from the implantation of the Children and Families Act 2014

This document sets out:

- The Council's policy around Social Care provision for Children with Disabilities
- Procedures relating to Specialist Provision by the Children with Disabilities Service
- Eligibility for specialist provisions

It should be read in conjunction with the Council's **Short Breaks Duty Statement** and The Council's **SEND Personal Budget Policy**. Both of these documents are available on the Bury Local Offer web site, which also provides further information around service provision.

1.2 THE POLICY STATEMENT

The Council would wish to ensure that "for all families with disabled children to have the support they need to live ordinary family lives as a matter of course".

In providing services for children the Service will look to ensure that the child's needs remain paramount, and that they supported to: live in good health, safe from harm, are supported to enjoy and achieve, are supported to make a positive contribution to society, and realise economic well being.

The Council is committed to putting people in control of their lives. We will seek to support parents in meeting their parental responsibility and in developing their parenting capacity. People will be involved in decisions made and have access to representation when required.

In undertaking assessment the Council will seek to ensure that assessment activity is proportionate to need along the continuum of need, supports information sharing between professionals, and is person centred and focused on ensuring improved outcomes that make a difference to young people .

The aim will be to support wherever safe, possible and in the child's best interests to remain in the family home. To this end priority will be given to the prevention of family breakdown, or support to assist the child to return home. The Council are committed to ensuring services support the quality of family life and positive outcomes for the disabled young person.

The Council will try to ensure services are made available locally to reduce the vulnerability of the child and disruption to family connections from being placed outside of Bury and the region.

1.3 POLICY OBJECTIVES

The objective of this policy is to ensure that the Council and CCG meet their statutory responsibilities within the Children`s Act and Children and Families Act

- To ensure compliance with the new SEN Code of Practice and regulations to provide for co-ordinated assessment and service delivery
- To ensure compliance with the Short Breaks duty and Short Breaks Care Planning Regulations.
- These criteria recognise the local authority`s duties under section 49A of the Disability Discrimination Act 1995, to eliminate discrimination, to promote equality of opportunity and to encourage participation by disabled people in public life
- To promote the personalisation of services and improve the engagement of parents and young people in shaping their own provision and in a manner which mobilises their social capital. We will seek to ensure families will be able to have an Personal Budget with which to make choices. Parents and young people will be supported to articulate their life goals, design, set up, pay and review their individually tailored support plans that aim to achieve those goals.
- To provide a framework in which need is measured to inform the commissioning processes for the Children`s Trust Board, the Council and CCG; and which reflects Continuing Care Guidance for children.
- Providing Service Pathways, good quality information and improved sign posting – with joint working across services to reduce the complexity of assessment processes.
- Within the Bury Child and Family Single Continuous Assessment Framework to provide effective multi disciplinary input and improved management of risks ensuring that appropriate care plans are put in place in a timely manner.
- That decision making processes use a transparent set of criteria to inform funding and provision of services, and ensure parent carers are made aware whether they are eligible for services.

Our approach will be underpinned by the following principles

- Specialist support where provided will actively seek to promote the self -reliance, and social inclusion of the young person.
- Young people will be supported to use universal settings such as leisure, sports and arts facilities, through the provision of training and outreach work to facilitate inclusive attitudes and practice.
- This policy framework is reviewed with the Bury Parents Forum and parent carer groups and representatives.
- That the budget is targeted to children most in need of support, and service thresholds consider the needs of the individual child within their family, and the aggregated needs of different individuals within the family.

- Assessment and care planning will be proportionate to the needs of the child and family; with the early identification of children who require help and the provision of services to prevent children moving towards higher levels of need and to reduce the level of need wherever possible, within a holistic and family centred approach.
- Commissioning which seeks to move investment from high-cost services for relatively few people to increased value for money for more people by improved prevention and early intervention. Will seek to ensure that people can benefit from a wider range of diverse, modern and flexible services. Developing the market and workforce to ensure skilled service providers are available who can deliver quality services and support increased range and choice of provision.

1.4 POLICY DRIVERS

The requirement to involve and inform parents, carers and children in the planning and development of services has been established since the NHS and Community Care Act 1990 and the Children Act 1989. The need to set out clearly for them what the eligibility criteria and what people can expect from services is an imperative of good practice. With the Children and Families Act the expectation is that parents and young people will be fully involved in all decision making and that high quality provision will be provided in an integrated manner across education, health and social care.

Under section 17 of the Children Act 1989, Social Care Services within the Children's Department have a duty to safeguard and promote the welfare of children within their area. Carrying lead responsibility for establishing whether a child is in need and ensuring that a range and level of services are provided appropriate to meeting the individual's needs. The framework for assessment provides the Social Worker with the tools to analyse the needs of the child and their family. A Child and Family Assessment will be done whenever the child is eligible for services in which the parent / carer and child will be asked to contribute. Once the analysis of needs is complete the Social Worker will look to identify a range of services which might meet the needs, and confirm either the budgetary provision to purchase the required support, or agree placements via the appropriate panels.

Under Schedule 2, Part 1 Paragraph 6 of the Children Act 1989 every Local Authority shall provide services designed:

- (a) to minimise the effect on disabled children within their area of their disabilities; and
- (b) to give such children the opportunity to lead lives which are as normal as possible. **and**
- (c) to assist individuals who provide care for such children to continue to do so, or to do so more effectively, by giving them breaks from caring.

Disabled children are treated differently by the law than all other groups of children 'in need' because of section 2 of the Chronically Sick and Disabled Persons Act 1970, which was extended to cover disabled children when the Children Act 1989 was passed (see section 28A).

Section 2 creates a right to specified services for disabled children where the Local Authority accepts that it is necessary for it to provide services to meet the child's needs. In reaching that decision the Local Authority can take account of its own resources and apply

rational and fair eligibility criteria – but once it has accepted that a need is ‘eligible’ for support it must be met . Where a disabled child (or adult) has needs which are assessed as eligible for support, they are entitled to either a service or a direct payment that is sufficient to meet their needs. If a direct payment is made it must be sufficient to meet the reasonable cost of securing the necessary services to meet the eligible needs. See Children Act 1989 section 17A and the relevant regulations¹ and statutory guidance².

The Council being committed to the following Service standards for all services for Disabled children:

Information

Disabled Children and families’ are entitled to access to appropriate information at every stage of a child’s life that is accessible, available, relevant, joined up and user focused.

Transparency

Key being that services use fair, understandable and transparent eligibility, that decision making is reasonable and the basis for decisions are communicated to parents.

Participation

Is about ensuring disabled children and young people and their parents are routinely involved and supported in making informed decisions about their care and in shaping wider service developments. Young people should expect to receive support which supports their individual communication methods, circumstances and needs.

Assessment

Disabled children and young people will receive child centred, multi-agency co-ordinated services from the point of referral through to identification of need, assessment and service delivery. This includes good information sharing in line with a “tell us once” approach to to reduce the need for parents to keep repeating the same information to different professionals.

Feedback

Disabled children, young people and their families should expect effective feedback loops in respect of all areas of service that influence future provision. Feedback should be presented to parents forums and should influence the children and young people’s plan.

Short Breaks: Statutory Guidance on How to Safeguard and Promote the Welfare of Disabled Children 2010

Requires the Council to be clear on the legal basis on which services are provided. The decision to provide a short break under Section 17 or under Section 20 should be informed by the assessment of the child’s needs and should take account of parenting capacity and wider family and environmental factors, the wishes and feelings of the child and his/her parents and the nature of the service to be provided. (**See Section 2.11** of this document – for guidance on procedures.)

Children may be provided with short breaks under the following legislation:

- **Situation 1** - Under Section 17 Children Act 1989, in which case they are not looked after children, and the 2010 Regulations do not apply. A **Child in Need Plan** is required in accordance with the Assessment Framework. Reviews should be carried out at least

every 6 months and more often if required;

- **Situation 2** - Under Section 20 Children Act 1989, with short breaks of not more than 17 days each in the same setting (where the total number of placement days does not exceed 75 in any 12-month period). In these circumstances, the child is looked after, an IRO must be appointed, and a Short Break Care Plan drawn up. The 2010 Regulations are modified (Regulation 48), so that Looked After Reviews and Social Work Visits are less frequent and the short breaks are treated as a single placement; or
- **Situation 3** - Under Section 20 Children Act 1989, where the short breaks exceed a total of 17 days per placement/ 75 days per 12-month period and/or take place in more than one setting. In these circumstances, the child is looked after, an IRO must be appointed and a Care Plan drawn up. The 2010 Regulations apply in full, including the provisions on frequency of Looked After Reviews (see **Section 5, Reviews** below) and Social Work Visits (see **Section 6, Social Work Visits** below).

In situations 1 and 2, the requirements which usually apply to looked after children in respect of health assessments and reports, and notification of placements, do not apply as parents retain responsibility for this.

The Breaks for Carers of Disabled Children Regulations 2011

The central aspects of the 2011 Regulations include: Local Authorities must not only consider the needs of parent carers who are at crisis point, but must also *'have regard to the needs of those carers who would be able to provide care for their disabled child more effectively if breaks from caring were given to them to allow them to undertake education, training or any regular leisure activity, meet the needs of other children in the family more effectively, or carry out day to day tasks which they must perform in order to run their household'* (regulation 3)

Local Authorities must provide, 'so far as is reasonably practicable, a range of services which is sufficient to assist carers to continue to provide care or to do so more effectively' (regulation 4). These services must include a range of: day-time care

- overnight care
- educational or leisure activities for disabled children outside their homes, and
- services available to assist carers in the evenings, at weekends and during the school holidays

Local Authorities are required to publish a Short Breaks Services Duty Statement (regulation 5), which must set out details of:

- the range of services provided in accordance with regulation 4
- any criteria by which eligibility for those services will be assessed, and
- how the range of services is designed to meet the needs of carers in their area.

The short breaks duty therefore requires provision of a range of short breaks which give disabled children the same opportunities to play and socialise that other children experience, while allowing their parents to provide care more effectively through having a break from caring.

Children & Families Act 2014

The SEN Code of Practice sets out guidance for all Council services. Section 19 of the Children and Families Act 2014 makes clear that local authorities, in carrying out their functions under the Act in relation to disabled children and young people and those with special educational needs (SEN), **must** have regard to:

- the views, wishes and feelings of the child or young person, and the child's parents
- the importance of the child or young person, and the child's parents, participating as fully as possible in decisions; and being provided with the information and support necessary to enable participation in those decisions
- the need to support the child or young person, and the child's parents, in order to facilitate the development of the child or young person and to help them achieve the best possible educational and other outcomes, preparing them effectively for adulthood

These principles are designed to support:

- the participation of children, their parents and young people in decision making
- the early identification of children and young people's needs and early intervention to support them
- greater choice and control for young people and parents over support
- collaboration between education, health and social care services to provide support
- high quality provision to meet the needs of children and young people with special educational needs (SEN)
- a focus on inclusive practice and removing barriers to learning
- successful preparation for adulthood, including independent living and employment

Section 27 of the Children and Families Act 2014

This duty, in force from September 2014, requires every Local Authority to consider the extent to which the social care (and educational) provision is sufficient to meet the needs of children and young people in its area. Much like the short breaks duty discussed above, this requires the Local Authority to know (1) what the level of need for short breaks is in its area and (2) whether these needs are being met through the provision of sufficient short breaks.

1.5 THE SCOPE OF THE POLICY

What do we mean by disabled children and young people?

For this policy we have adopted the Disability Discrimination Act definition of disability:

“a physical or mental impairment which has a substantial and long term adverse effect on his ability to carry out normal day-to-day activities”

The DDA definition describes the broad group whose life chances this strategy is intended to improve. It does not affect eligibility criteria for individual services.

A child is defined as a child in need (*Children Act 1989 s17(10)*) if :

- a. She /he is unlikely to achieve or maintain or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority
- b. His/ her health or development is likely to be significantly impaired, or further impaired, without the provision for him / her of such services ;
- c. Or she /he is disabled”

A Parent/carer is defined as somebody who has parental responsibility for a disabled child or provides a substantial amount of care on a regular basis.

An assessed need is defined as a set of problems and issues, faced by a child, for which the council will provide services because the need falls within it's eligibility criteria and it has the resources to meet the need.

1.6 EQUAL OPPORTUNITIES IMPLICATIONS

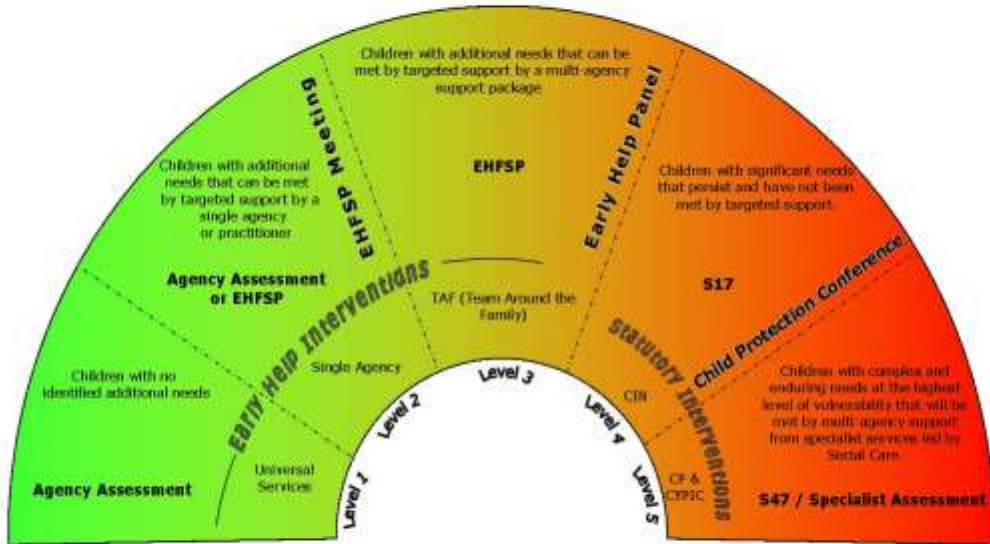
The policy framework is designed to ensure equity in the allocation of resources on the basis of assessed needs. It is designed to be compliant with Human Rights Act 1998 and Race Relations Amendment Act 2000 and Equality Act 2010. The framework specifically seeks to preclude discrimination on ground of gender, ethnicity, sexual orientation, religion, personal relationships or age. A separate Equality Impact Assessment is available Universal services will be able to meet the needs of those children and young people who require little or no additional support and are expected to make reasonable adjustments to enable them to access services as required under Disability Discrimination Act 1995 and Disability and Equality Act 2010).

In the co-ordination of services consideration will be given to the cultural needs of the child and family. Signing and Translation service will be offered as required.

The Bury Parent Forum and parent carers will be asked to contribute to service reviews, new service procedures, tendering processes and in the recruitment of staff. Parent representatives will be supported to attend key Working Groups. Bury Stars is a reference group of young people who will be consulted to ensure young people`s views are represented.

1.7 THE BURY MODEL - THRESHOLDS

Continuum of Need



Key:
 CP - Child Protection
 CYPIC - Children and Young People in Care
 CIN - Child in Need
 EHFSM - Early Help Family Support Man

ASSESSMENT - DISABILITY - PROVISION

LOW – L1 & L2	MEDIUM L3	HIGH L4	VERY HIGH L5
<p>Services and Support Targeted, open access services usually in the community; and sign-posting to universal services Existing care and support arrangements apply; free at the point of use; accessible to the whole family</p> <p>Service may need to consider reasonable adjustments to help access</p>	<p>Services and Support Targeted services for children in need and support to access universal services Early Help Support provision / Children`s Centre activity. Early Years Foundation Stage</p> <p>Relevant adaptation, equipment & targeted youth groups provided</p>	<p>Services and Support Specialist services for children with severe disabilities; access to low-level overnight Short Breaks; Direct Payments; Home Support; Personal Budgets</p> <p>Adaptations, equipment, specialist housing & moderate to high level personal care provided</p>	<p>Services and Support Multi-agency specialist services for children with high to intensive personal care and attention needs; access to high levels of support and more substantial overnight Short Breaks</p>

<p>Assessment, Planning and Review Self-Assessment Single agency Assessment</p>	<p>Assessment, Planning and Review Early Help Family Support Assessment Framework;</p>	<p>Assessment, Planning and Review Social Care Single Assessment Children in Need plan in place; 6 month review of package Short Breaks under Section 17 / 17(6)</p>	<p>Assessment, Planning and Review Detailed Social Care Single Assessment & Continuing Care Assessment; SB assessment and care plan may be required Short Breaks Section 20(4)</p>
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2. PROCEDURES FOR SOCIAL WORK CDT PROVISION

2.1 REFERRALS

The Mash Team is the single access point for Children's Social Care will take all contacts and screen them to decide which team will respond. MASH will pass the contact / referral to the CDT managers who will then confirm decision to assess or not. Direct contact is made at this point to ensure referrals are processed in a timely fashion.

Safeguarding / Level 5 responses

Where the priority is around a safeguarding issue the referral may be passed to either or both the Assessment and Advice Team and to the Children with Disabilities Team, dependent on family circumstances and current involvements with the family. A discussion will be held between managers and placed on the case file to confirm case holding responsibilities in such situations to ensure that all children within the family are being protected.

CDT / Level 4 responses

Where the need is about specialist disability support the referral will pass to the Children with Disability Team. Where the referral is agreed the Team Manager will send the referral response letter to the family and to the referrer. This team seeks to support children with severe or substantial disabilities, specifically :

- a severe or profound learning disability or global development delays
- a severe physical disability and health related conditions
- a substantial degree of sensory impairment
- complex Autistic Spectrum disorders
- complex Social Communication disorders

Within the screening process consideration will be undertaken of referral to the Early Help Panel where there is a need for early help and on- going family support. The CDT managers attend this Panel to ensure referrals are channelled appropriately, advice is offered and joint visits undertaken as appropriate.

Early Help Level 3 responses

Where there are no immediate safeguarding , parenting concerns or issues requiring immediate assessment for service provision there will be a discussion with the referrer and key professionals involved with the child and family to prompt them to complete an Early Help Assessment and to develop a family support plan. This should ensure that parents are being supported to access the services they need without recourse to assessment and intervention by a social worker unless this is clearly required.

- Consultation is always offered to referring professionals to help them clarify how to move forwards including attendance at initial Team around the Family meetings and confirming with parents and the multi disciplinary team the Lead Professional role
- Where the children have additional needs which are less complex and may involve the need for parenting advice parents may be signposted to Bury Parents Forum who will offer support. CDT have ongoing discussions to ensure effective support is provided and to escalate issues wherever concerns arise.
- Consideration will be given on a case by case basis to stepping down to an Early Help Family Support Plan: where there are no parenting concerns, the developmental needs of the child are being fully met, and there is a small and stable support package. This may include Direct Payments or attendance at a social group for instance. (See Section 2.12)

2.2 BURY CHILD AND FAMILY SINGLE CONTINUOUS ASSESSMENT FRAMEWORK

Bury Child and Family Single Continuous Assessment Framework (Framework for Assessment) provides a framework for child centred assessments in relation to :

- The needs of the Children with Disabilities
- Parental capacity and needs
- Family needs

Social Workers will complete assessments within regionally agreed time scales. Given that the children are disabled and likely to be children in need assessments will be completed in :

- 15 days for children with less complex needs
- 35 days for a children with more complex needs

The Social Worker will meet with the child during the assessment process, seek their views , consider the need for further observations and establish with the parents if there are people (significant others) who might contribute information which may support the young person`s views being identified. The service will always seek to conclude assessments within these time scales and will stress to parents the need for their co-operation in seeking to do so.

Some disabled children will require long term involvement and on- going assessment with their family from a range of professionals as the child develops or family circumstances change. Multi agency working is required to ensure processes are streamlined and information shared. The CDT will ensure consent agreements are agreed with families to ensure information is shared effectively across the Education, Health Care Plan and Child in Need processes. Social Workers will with parental consent contact all key agencies who are involved with the child and request copies of pertinent information to inform the assessment.

However in some situations additional assessments and other reports by other professionals may be required to compliment the assessment and form a more complete multi Agency assessment. Parent carers will then receive the single assessment with feedback on the progress of the need for specialist assessment, and actions expected to confirm completion.

Assessments provide a snap shot at a point in time of a child and family`s situation of their needs and risks and which also require that the subsequent plans are outcome focused and robustly reviewed. Where there are significant changes to the family`s situation then consideration will be required of the need to undertake a fresh assessment.

Where there are on- going safeguarding and significant parenting risks and the child is being supported within child in need processes; a fresh assessment, will be done every 12 months.

Reflecting National Guidance around a proportionate approach to assessment the service will seek to refresh assessments on a 2 or 3 year cycle reflecting professional judgement on the risks to the child and on the complexity of need of the young person.

This judgement / managerial oversight being guided by a number of factors :

- Evaluation of risks to the child(ren) and families
- Impact of disability on the family of the child / and or additional needs of siblings
- Complexity of the health or behavioural needs of the child
- Presence of issues around parenting – domestic violence – parental mental health
- Completion of other multi agency assessments ie EHC / continuing care assessments

2.3 PARENT / CARER VIEWS

A balanced assessment will reflect the parent / carer`s needs, and should be completed in partnership.

- Prior to the assessment being started workers will provide parents with an explanation of the assessment processes, and provide the appropriate information leaflet
- The Social Worker will agree with the parents the scope and purpose of the assessment.
- Parents and carers are invited to identify their views as part of the assessment. On completion they will be provided with a copy
- Where significant issues of difference between the views of the parent / carer and social Worker a case discussion will be arranged with the Team Manager to explore the differences.
- Parents will be advised of how to use the Complaints Procedure should they wish at any stage to challenge the assessment.
- The Social Worker will supply a copy of the Complaint leaflet when undertaking the assessment and thereafter on an annual basis.

2.4 CARER`S ASSESSMENT

In conformity with the Carers Equal Opportunities Act all Parent Carers will be advised of their right to have a Carer`s Assessment. The needs identified within the assessment will form a part of the Care Plan. The assessment may include an assessment for young carers where this is identified.

The assessment will focus upon caring responsibilities, pressures and support networks available to the parent carer. The assessment will consider the employment, training, leisure and recreational needs of the parent carer.

2.5. APPEAL PROCESS

Where the parents are unhappy with the contents of the assessment or the care plan or support package offered every effort will be made to review the arrangements.

This will be a 2 stage process :

- The Social Worker and Assistant Manager will offer to meet with parents to review the situation. Following which they will confirm in writing the outcome of their review and advise the parent if they remain unhappy that they will need to request a further review with the Team Manager
- The Assistant Manager and Team Manager will offer to meet with parents to review the situation. Following which they will confirm in writing the outcome of their review and advise the parent if they remain unhappy that they will need to submit a formal complaint

2.6 WEIGHTING FACTORS

The following factors will be used to weight care packages. These factors will not be applied mechanistically, or be used as a scoring system. There will be no upper limits applied to support packages – as support will be strictly provided on the basis of individual need and professional judgement. Decisions will take into account the specific circumstances and needs of the child and the whole family.

Higher level needs

The child with disability has child protection plan

The child with disability has complex health care needs which meet continuing care guidance

The child has severe learning disabilities with challenging behaviour in 2 or more environments.

Risk of family breakdown if a service is not offered.

The child has a life limiting condition or is likely to lead to a premature death in childhood.

The child has multiple disabilities and a service is required in order for the child to remain at home.

Parenting strategies required to prevent family breakdown child accommodated.

Service required to bring the child's behaviour into acceptable perimeters.

Carer has some physical or mental health problems affecting ability to care

Actual or potentially high level of risk to health/safety of carer

Carers suffer sleep deprivation due to needs of the child through the night

Stressful family relationships / difficulties in relationships with peers which may be harmful

Complex pressures in the family e.g. domestic violence or substance misuse

Financial difficulties that significantly compromises their care of the child

Medium level needs

Parent with significant permanent health needs or disability that impact on their caring ability.

One severely disabled child with other children who because of age or other disability require personal care at critical times of the day

Mental health issues or evidence of relationship breakdown which may move into a breakdown situation without support.

A temporary service required to assist the family through a temporary incapacity (up to 3 months) (e.g. post operative care).

A service is required to enable the development of parenting strategies where their child has a disability

Lower level needs

Service are required to enable parents / siblings to take part in ordinary family activities / needs cannot be met via mainstream services.

A service is required to assist enhance the child` opportunities where their needs cannot be met by mainstream services

A service is required to assist enhance the child` opportunities where their needs cannot be met by mainstream services without additional and consistent support

Lone carer with limited extended support networks

2.7 CHILD IN NEED PLANS AND REVIEWS

Child in Need Plans will be co-ordinated by the Social Worker with parent / carers and other agencies. The plan will be outline the needs and desired outcomes identified in the assessment. When the Child in Need Plan is authorised the Team Manager will confirm a management decision confirming the review arrangements and frequency with which the child should be seen. The decisions reflecting risk and complexity of needs will be recorded on Protocol. The Team Manager will also determine the level of professional oversight required by the child in terms of need for Social Work Support.

Social Work Support

Children in Need reviews will be in 2 formats :

- **A multi agency meeting** with all professionals – in most cases linked into EHC or school reviews wherever possible – and which may be on a 3, 6 or 12 monthly basis dependent on need
- **An agency review** – to review care provision via a home visit on a 6 or 12 monthly basis These reviews will be done in the first instance after 3 months to ensure the provision offered is meeting the identified needs effectively

Where the support involves overnight provision this will involve a 6 month review and involve the care provider and visits to see the child in placement.

Each child or young person is a unique individual and decision should be confirmed with parents on how the Social Worker will engage and communicate with them. These decisions being recorded within assessments and case summaries to ensure the transparency of the process. The minimum expectation being that the Social Worker will seek to see the young person at home, in school or another service setting on a 6 monthly basis to ascertain their wishes and feelings. That the Social Worker will consider the need for further observation or need to triangulate views between parents and settings

Child & Family Support

In a number of cases where the parents are clearly resilient, the needs of the child are less complex and there is a low level of support provided the case will be overseen by a Child & Family Worker. This transfer being completed after assessment and by the confirmation of the Child in Need Plan.

These cases will have a lighter touch process with the worker attending the School Review, and completing an annual agency review and with an additional 6 monthly home visit to capture the child`s voice.

Where new risks emerge immediate consideration will be given to the level of professional oversight, which may include case reallocation to a Social Worker to assess the situation and or undertake a reassessment.

2.8 DISABILITY RESOURCE MEETING

Confirming a support package is a 3 stage process :

- Team Manager authorises the assessment with Social Worker and confirms release to parent carers.
- The Social Worker produces the Child in Need Plan for the Team Manager to authorise, which sets out how the various need of the child or young person will be met
- The Social presents the Request for Funding to the Disability Resource Panel for authorisation together with a Support Plan which sets out any care arrangements that will be offered.

The panel will meet on a two weekly basis chaired by the Strategic Service Manager to review all requests for short breaks, family placement, and direct payments. Following Panel parents will receive a letter from the Team Manager confirming the decisions made.

Where a short breaks placement is approved guidance will be provided about the scheduling of introductory visits. The Social Worker and Social Worker (Short Breaks) will meet with the parent / carers at key stages through the programme to monitor progress. Some children may need a significant number of visits before staying overnight, others may benefit from shorter introductions.

The aim should be to ensure equity in responses between children and families with comparable needs whilst individualising the package of support.

2.9 THE SUPPORT PLAN

The Support Plan will detail :

- Personal information on what is important to the young person – what people admire about them – support the young person may require with communication and culture
- What tasks need to be undertaken and outcomes sought
- The services to be provided and the allocation of costs
- Risk issues and other support required such as training

The Social Worker will then confirm home visits with parents, young people with the service provider to again confirm the required outcomes of the provision and support, communication and risk issues.

The service provider is required to complete their own risk assessments. Copies of the assessments will be reviewed by the Social Worker, who will ensure information is shared appropriately with all parties.

Each year an Individual Service Level Agreement is issued to parents and service providers to confirm mutual responsibilities.

2.10 COMPLEX CASES PANEL

Where children have complex health needs which require both health and social care provisions reports will need to be presented to the Complex Cases Panel

Joint funding thresholds have been established with Adult Services and the Clinical Commissioning Group, based on national guidance. The Panel meets on a weekly basis to consider the reports provided by the Social Worker and key Health professional.

The Health professionals will complete the Decision Support Tool to evidence that health needs can be confirmed. The Social Worker and key professionals should evidence in their respective reports a Multi Disciplinary assessment and plan has been developed and how this meets the identified health, social care and educational needs.

In cases where insufficient evidence is provided the lead professionals may be requested to provide further information and or assessments at the next Panel.

There should not be cases where care planning is not being progressed due to inter agency disagreement.

A decision spreadsheet will be circulated to managers after each Panel. The lead professional will then provide verbal and written feedback to the parent confirming the Panel decision.

2.11 SHORT BREAKS CARE PLANS

Short Breaks: Statutory Guidance on How to Safeguard and Promote the Welfare of Disabled 2011 requires the Council to be clear on the legal basis on which services are provided The decision to provide a short break under Section 17 or under Section 20 should be informed by the assessment of the child's needs and should take account of parenting capacity and wider family and environmental factors, the wishes and feelings of the child and his/her parents and the nature of the service to be provided. Page 5 of this document clarifies the legal framework and when LAC status becomes applicable.

The key question to ask in deciding whether to provide the short break provision under Section 17 or Section 20 is how to promote and safeguard the welfare of the child most effectively. In making this assessment the Social worker will consider the following factors with the parent :

- particular vulnerabilities of the child, including communication method;
- parenting capacity of the parents and wider family and environmental factors;
- length of time to be spent away from home and frequency of the stays;
- whether short breaks are to be provided in more than one place;
- Impact on the child's place in the family and on primary attachments;
- Observations of the child before or after breaks
- Extent of contact during break;
- Distance from home

For most children provision will be made under Section 17 or Situation 1 – however in weighing the above factors with parents and the vulnerability of the child Situations 2 OR 3 may be considered to provide greater support for the young person.

In all situations where young people stay away from home in residential or with short breaks

carers a Short Breaks Care Plan will be completed to outline placement arrangements and review processes.

Where a young person stays with other people on an overnight basis using their Personal Budget the Support Plan should identify these arrangements and confirm that they are safe and appropriate.

2.12 STEP DOWN PROCESSES – CHILD IN NEED TO EARLY HELP

The Council of Disabled Children guidance, “The role of social care in implementing the Children and Families Act 2014” and Bury’s Thresholds confirm the principle of support being delivered along a continuum of need. In line with this principle is that assessment and plans should be robust, delivered on a multi agency basis and proportionate to need.

Following on from assessment under the “Bury Child and Family Single Continuous Assessment”, a Child in Need Plan and care package may initially be offered at Level 4. After the 3 month review the Social Worker will consider with the parents and multi disciplinary team whether the case should step down to an Early Help Plan. This will be considered where it is clear that the child’s development needs are being well met by parents and who are well engaged with the key professionals, there are no significant risks and positive signs of good parenting and family stability and every indication of good community integration.

In such cases the initial referrals will often have been one of requesting social opportunities and parents and professionals will have usually been requested to develop an Early Help Plan. The assessment and Child in Need review will have confirmed that the parents and multi agency group have robust Early Help Plans to step down to, and that the transfer to Educational Health Care Plan has occurred with due consideration of social care needs and similarly evidences good parental engagement in planning with services.

Where there are clear indicators of good parenting and resilience and Children and young people only require a small package of support for a social opportunity step down will be considered with the Social Worker in supervision and a management decision confirmed.

Cases will either be stepped down to a Child and Family Worker at Team Oasis or to an identified Lead Professional within school setting. In all cases a Step down form will be completed and sent to the Early Help Consultant at Team Oasis. In all cases parental agreement for the Early Help Plan must be confirmed and consent agreement signed.

Once the step down decision has been confirmed a transfer planning meeting will be held to ensure that a clear plan is in place, outcomes are clear and review arrangements are confirmed. Where the lead professional is the education provision the review arrangements will be aligned with EHCP review, with the expectation of a 6 month review. The 6 month review may subject to agreement with parents be a home visit completed by the lead professional. Cases which are managed by Team Oasis will be visited and reviewed on a 6 monthly basis.

Care providers will be required to attend these reviews and arrangements will be confirmed within the plan of the support being provided, contact details will be provided of agency lead to contact if there are interim issues of concern. The plan will also provide contact detail for CDS to provide for advice and consultation. Three monthly consultation sessions will be provided to Special School home liaison workers and with Team Oasis.

2.13 LOOKED AFTER CHILDREN CARE PLANS

Looked after status is accorded to children who are accommodated on a long term basis - or where the patterns of short breaks in a residential unit or family placement exceed 75 days.

In Care Planning the Social Worker will look to ensure that

- the best interest of children are paramount .
- the child `s views are represented and need for advocacy is considered
- decisions made are transparent with achievable goals set
- parents are supported to participate in decisions being made
- other agencies provide their inputs into the review process
- assessments are done within the Framework for Assessment
- consideration will be made of all other assessment - health - PEP - Pathway plans
- court reports are guided by effective care plans
- permanency is achieved for the child wherever possible

Looked after children reviews are chaired by a Reviewing Officer from the Quality Unit to ensure the quality of care provided is of the highest order. The first review will be done after 3 months - and then on a 6 monthly basis.

2.14 EDUCATION HEALTH CARE PLANS

Education, Health and Care Plans

Requests for Education, Health and Care Plans can be made by parents, schools or other key professionals. The process will be managed by the SEN Team who will oversee information being collected and presented to the EHC Multi Agency Panel which meets fortnightly. The Panel membership will always include either a health or social care representative. Parental forms are submitted and considered with information from nursery, early years providers and key health professionals.

Where it is agreed an EHC Plan is required the SEN case worker will contact MASH and request that Sections D and H are completed where the child is known to services, either from statutory involvement or by professionals who have completed an assessment under the Common Assessment Framework. Professionals are required to ensure their sections are completed within a 6 week period to ensure the plan can be completed within the 20 week timescale.

Where it is agreed to provide an EHC Plan the SEN case worker will co-ordinate a person centred meeting with parents and key professionals to formalise the plan that has been developed.

Disagreement Resolution / Mediation

The Council have commissioned independent Disagreement Resolution and Mediation Services to prevent issues of disagreement escalating further. Parents retain the right to use the Disagreement Resolution Services or request Mediation when they are not satisfied with any element of the intended EHC Plan. Requests for either will be co-ordinated by the SEN Team Manager. However in all such circumstances the CDS Team Manager and SEN Team Manager will seek to meet with parents to resolve issues at an informal stage to reduce parental stresses and reduce costs incurred with using this service unnecessarily.

The CDS Team Manager will review requests with the Strategic Service Manager and engage

in either Disagreement Resolution or Mediation as requested by the SEN Team Manager on the basis that these are reasonable steps in evidencing professional accountabilities and reasonable assessment practice. However the Council may in such cases not resolve the matters to the end requested by parents and responses will be supplied in writing accordingly.

Parents can also follow the Appeal processes within these procedures or use the Complaints Procedure.

Personal Budgets

Within the EHC Plan process parents will be provided with opportunity to receive a Personal Budget for all or parts of their package. A Personal Budget Policy is being developed and will be consulted upon with Bury Parents Forum. The requirements in relation to Personal Budgets remain the same as those for Direct Payments. Where there are health needs to be met there is an expectation that the lead health professional will co-ordinate the Nursing Plan element and ensure health competencies for staff are identified and met to ensure clinical governance requirements are satisfied. As with any form of Direct Payments arrangements must be safe and appropriate in meeting the assessed needs and outcomes for the young person.

2.15 CONTRACT MONITORING

Social Workers will monitor contract arrangements for the children and families they support and draw issues of concern to the attention of the Team manager.

The Team Manager will meet with Commissioning officers and partner agencies on a 3 monthly basis to review allocation of services and service quality issues. Team Managers will monitor waiting lists with social workers and agencies to ensure that delays in arranging the provision are minimised.

The Commissioning Section will ensure Providers complete 3 monthly contract monitoring forms and undertake compliance visits and meetings as required.

The Commissioning Section will ensure that Individual Service Agreements are issued to parents and providers on an annual basis.

The Commissioning Section will oversee the production of Service specifications and of tendering arrangements

3. ELIGIBILITY FOR SPECIALIST SERVICES

3.1 Direct Payments

Parents / Young People will currently be offered Direct Payments where it is identified within the assessment that they are assessed as needing community care services.

The following eligibility criteria should be met:

- The parent/ carer must agree to accept responsibility of organising their own care and the legal responsibilities of employing their own staff.
- The parent / carer must be able to evidence clear consideration in their arrangements to safeguarding and promoting the welfare of the child.
- Parents will be expected to adhere to risk assessments set out within the Child in need Care Plan.
- The parent carer will be required to ensure DBS checks are undertaken for staff employed.
- The parent carer will not employ staff under the age of 18 without a written agreement.
- Where parents employ family members support arrangements will be subject to additional scrutiny to confirm the support plan is meeting the identified needs of the child, and over and above familial support.
- Where the child is to receive intimate personal care there must be evidence that the views of the child has been sought in the arrangements to be made.
- Where the disabled young person aged over 16 they may pursue Direct Payments in their own right, and parent carers will be encouraged to support such arrangements.
- Where proposed arrangements are not the most cost effective way of making provision the Council will reserve the right to decline direct payments for all or part of the package.
- Parent / carers will be offered Direct Payments for overnight provision between 6-8 overnight support in the home per year.
- Parent / carers will only be offered Direct Payments for overnight provision exceeding this in exceptional circumstances, and where the complexity of health support would require this.
- Where parents want support outside of the family home – the carers will need to be employed with a registered care agency, or as foster carers.
- Direct payments will not be used to fund ordinary family activities – or the activity costs of the young person.
- Where Direct payments fund family and friends support and activity costs this should be in lieu of making payments as a personal assistant – must meet the identified needs, form part of the agreed care plan, and deliver value for money.

3.2 Short Breaks Family Placement / Overnight Support

Children /Young People may be accommodated by the Local Authority if the provision of a short break is identified within the core assessment as part of a package of support necessary to preserve the child's place in the family. See Section 2.12 for guidance on legal provision of short breaks.

Disability Resource Panel will confirm decisions for Home from Home placements. Complex Case Panel will confirm decisions requiring residential / out of borough provision. Where children have complex health needs they may receive support via Cambeck Place. Children using this service receive an agreed number of nights per annum with a 3 monthly planner being agreed.

- The support is required to prevent breakdown of the caring situation due to the impact on parent/ carer`s physical or mental health.
- The child`s sleep pattern is irregular and results in significant disturbed sleep for parents/ family members
- Behavioural demands significantly impair normal family functioning
- The support will aid the child to attain greater personal and emotional independence
- The support offered will contribute to maintaining the quality of life of parent / family members

3.3 Long term provision

Where the Department agrees to accommodate a young person on a full time basis it will look to provide for permanency within a family setting, and seek parental agreement to foster care and or adoption. Children/Young People will only be accommodated by the Local Authority if one of the following eligibility criteria are met in line with section 20(1) of the Children`s Act

- A parent is absolutely unable to care for the child/young person (this does not mean unwilling) and a suitable carer from among family members and friends cannot be secured.
- The child/young person is at serious risk of significant harm because s/he is so beyond control as to be reckless to her/his own safety and to accommodate the child/young person is the only way to exert that control.
- The child/young person has been abused or is at a serious risk of significant harm in their present living situation and the only way to protect the child is to look after her/him in local authority accommodation.
- The child/young person presents a serious child protection risk to siblings and/or other children/young people.
- The complexity of the child/ young person`s health needs are beyond the capacity of the parent / carer to support them in a consistent manner.

4.0 Relevant Documents and references

1. CENTRAL GOVERNMENT DOCUMENTS

Department for Children, Schools and Families (DCSF) (2009) *Safeguarding Disabled Children: Practice Guidance*. London: DCSF. www.gov.uk/government/uploads/system/uploads/attachment_data/file/190544/00374-2009DOM-EN.pdf

Department for Children, Schools and Families (2010) *Short Breaks: Statutory Guidance on How to Safeguard and Promote the Welfare of Disabled Children Using Short Breaks*. London: DCSF. www.education.gov.uk/publications/eOrderingDownload/short%20breaks%20statutory%20guidance%20march%202010.pdf

Department for Education (2015) *Working Together: Statutory Guidance for social workers*. London: DfE. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/417632/Working_Together_to_Safeguard_Children.pdf

Department of Health (2014) *Care and support statutory guidance* <https://www.gov.uk/government/publications/care-act-2014-statutory-guidance-for-implementation>

Department of Health, ADASS & ADCS (October 2011) *Young carers: personalisation and whole family approaches*. www.adass.org.uk/AdassMedia/stories/Young%20carers.personalisation%20whole%20family.print.11.pdf

Department of Health (2000) *Assessing Children in Need and Their Families: Practice Guidance*. London: Department of Health. <http://webarchive.nationalarchives.gov>

HM Government (2013) *Working Together to Safeguard Children: A Guide to Interagency Working to Safeguard and Promote the Welfare of Children*. London: DfE. www.gov.uk/government/publications/working-together-to-safeguard-children

Department for Education & Department of Health (2015) *Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities*

2. CORPORATE DOCUMENTS

Short Breaks Duty Statement

Personal Budget Policy

Thresholds and Guidance for SEND Support and Statutory Education, Health and Care (EHC) Needs Assessment of Special Educational Needs and Disabilities (SEND)

3. DEPARTMENTAL DOCUMENTS

Bury Safeguarding Childrens Board - Thresholds for intervention document 2016

4. OTHER GUIDANCE

Council for Disabled Children - The role of social care in implementing the Children and Families Act 2014