



Response to Request for Information

Reference FOI 08154
Date 03 August 2015

Short Breaks Services

Request and response in 'blue':

Under the Freedom of Information Act, I request the following information in relation to your Short Breaks Services Statement:

- 1) What evidence do you have that the statement is accessible to families (i.e. unique visitors/ postal reach etc.)?
[There have been the following number of people accessing the relevant web page on the local offer - Short breaks for disabled children and young people - up to 18 years \[article/5068\] – Page Views: 317 \(Unique: 273\)](#)
- 2) How often do you review the Short breaks statement? [Annually](#). When was the last time you revised it and for what reason? [September 2014](#)
- 3) How many children have been refused short breaks services because of eligibility criteria in the last twelve months? How many of these had an assessment? [None](#)
- 4) How often do you consult families on the content of the short breaks statement?
[At least annually but we have regular contact with families through the Local Offer parents events and the SEND partnership Board . When did this last happen and how many families were involved? The last SEND partnership Board on July 3rd discussed short breaks and plans for services next year](#)
- 5) What evidence do you have that you deliver short breaks to children and young people as outlined in your statement? [Contract monitoring meetings, annual service reviews, quality assurance assessments.](#)
- 6) How many children do you have records of that you consider to be currently eligible for short breaks? [135](#)
- 7) What are the eligibility criteria for receiving a short break in your area?
[Entitlement criteria and guidance is attached](#)

Children and Family Support

Entitlement to Services – Short Breaks

Approved – 6th October 2011 (Children and Family Support
Management Team)

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Review Date – October 2013

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1.0 BACKGROUND

'The Children and Young Persons Act 2008 has altered 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 has made short break provision for disabled children and their families a statutory service. 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.

The entitlement to services guidance for disabled children and young people in Wolverhampton has therefore been produced in order to promote support to disabled children and their families in a timely and inclusive manner, and to target resources appropriately whilst complying with legislative factors but also upholding ethical principles around supporting disabled children and their families.

2.0 CONSIDERATION OF LEGAL ISSUES

The judgment made by Mrs. Justice Black in the case of JL and LL v Islington London Borough Council [2009] EQHC 458 (Admin) includes the following points:

Local authorities can apply banding criteria to decide which groups of children they will consider to be eligible for services under s 2 Chronically Sick and Disabled Persons Act 1970, but if a child is in the eligible group they must provide services to meet his or her assessed needs.

Eligibility criteria can be used to limit access to services provided under statutory powers, such as s 17 Children Act 1989, but if local authorities operate eligibility criteria in this way they must have due regard for their duties to promote disability equality under s 49A Disability Discrimination Act 1995.

Local authorities must do full Initial and Core Assessments of children who may be eligible for services before applying any eligibility criteria they choose to operate.

All LAs must differentiate between why they are providing services legislatively i.e. DUTY to provide or POWER to provide.

What is clear from the above, is that any current Local Authority model must be working towards the legal requirements, and operating in the spirit of them, and that eligibility criteria must be lawful and where a child is assessed as eligible for services, they must be provided to meet fully assessed needs.

3.0 REGISTRATION/THRESHOLD AS A DISABLED CHILD

The recent court ruling referred to in 2 above (Black, JL and LL v Islington, 2009) allows Local authorities to apply banding criteria to decide which groups of children they will consider to be eligible for services under s2 Chronically Sick and Disabled Persons Act 1970. In Wolverhampton the initial threshold for services assessed for by the Disabled Children and Young People's Team (DCAYPT) is the DDA 2005 definition – 'someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities' – which is also our threshold for registration as a disabled child.

The Children Act 1989 requires each Local Authority to keep a register of disabled children, however each Local Authority has the right to interpret and determine their own criteria and registration process. In Wolverhampton we have a joint record pack between Local Authority/Royal Wolverhampton Hospitals NHS Trust. Written consent is given by parent/carer (or young person themselves if appropriate) to seeking information from a medical practitioner regarding the young person's impairment. If the young person has any disability or health issues at all, they will be entered on the HEALTH record; and if they are also deemed to meet the criteria for registration as defined by the DDA 2005 (above) they will be registered as a disabled child/young person. The provision of services is not dependent on registration, in that registration is entirely voluntary and if a child/young person or their parents does not consent to registration, services can still be provided as long as the child meets the DDA definition.

4.0 GUIDELINES FOR ASSESSING THE LEVEL OF NEED OF CHILD/YOUNG PERSON

Children and families should be able to access a variety of services to suit their individual needs. Levels of need are broadly defined below, which would correspond to the levels of service which should be provided:

Low need:

The child/young person is recognised as disabled under Disability Discrimination Act (DDA) definition, but has no significant care needs identified compared to a child of a similar age – this will indicate a Low level of need.

Medium need:

The child/young person is recognised as disabled under DDA 2005 definition, and will have needs in more than one of the following areas

- Ongoing care needs
- Demanding behaviour
- Regular supervision
- Some level of night time care needs

Needs in the above areas indicate a Medium level of need

High need:

The child/young person is recognised as disabled under the DDA 2005 definition, and will have needs in more than one of the following areas:

- Complex care needs
- Challenging behaviour
- Constant supervision needs
- Sleep disturbances/high level of night time care needs

Needs in the above areas will indicate a High level of need

Attention must be given if the child/young person has complex health care needs as to whether they are entitled to assessment under the Continuing NHS Healthcare framework for children (guidance published March 2010).

Additionally:

If needs are identified in one or more of the following areas for a child whose needs have been identified as low or medium, the level of need should move up a level:

Carer issues – illness, disability, lone carer, lack of extended family support, social isolation, family relationship issues caused by pressures of caring

Sibling issues – high impact on siblings, family unable to access ordinary events, siblings undertaking high caring responsibilities, other disabled sibling/s

Whilst it is now a duty to ensure that carers are assisted to continue to care and to do so more effectively by the provision of breaks from caring, it must also be stressed that the assessment of needs will be child-centred and short breaks provided for any level of need must firstly meet the child's assessed needs, and have full regard to their wishes and feelings, which must be sought appropriately according to their communication systems.

5.0 ENTITLEMENTTOSERVICES–WOLVERHAMPTON MODEL

Wolverhampton City Council and the Aiming High for Disabled Children Board (AHDC) are committed to providing high levels of support. This is subject to the resources available.

Pre-AssessmentLevel

Access to universal services – all children. Self referral, no assessment.

Access to targeted services for disabled children set up under Aiming High for Disabled Children/supported universal services not subject to assessment under the Framework for assessment of children in need. Self referral; assessment may be carried out by provider of services. Child must still meet recognised definition of disability i.e. DDA 2005 definition (see 'entitlement to services' below).

CAFassessment

Where several agencies are involved with a child a common assessment may be undertaken. The CAF is a shared assessment tool for use across all children's services. If a CAF exists and gives a clear picture of services that should be provided for a disabled child, this could be substituted for Initial Assessment (or used as basis) to give faster access to services by agreement with the DCAYPT. Staff should follow this action, where possible, to avoid numerous assessments.

Entitlementtoservices:

See Section 3.0 Registration/Threshold as a disabled child or young person.

Localminimumoffer -lowlevel:

- On registration or confirmation of initial threshold being met: all carers are entitled to apply for the 'carer short break grant' - £300 per disabled child, and at 3 yearly intervals afterwards (this arrangement may change following further consultation with parents/carers).
- Information pack sent out including signposting to services accepting self-referrals for disabled children, e.g. local services set up under Aiming High for Disabled Children, and with useful local and national information; along with the offer of Initial Assessment

by a social worker and/or carer's assessment by carer support worker.

Initial Assessment and/or Carer's Assessment

Medium level:

Following initial assessment, if child's needs are identified as medium level – ie child is defined as disabled, plus additionally they have one or more of the following needs: ongoing care needs, demanding behaviour, need regular supervision and have some level of night time care needs, they will be entitled to a medium level of services:

- a typical medium level package would involve 3-6 hours' care weekly via 'Shared Care' daycare, paid childminding, other agency for supported leisure e.g. Spurgeon's/Mencap; or a Direct Payment in lieu of services.

Please note it does not automatically follow that needs must be at least medium level if an Initial Assessment has been carried out. Whatever level needs are assessed at all disabled children and their families can access services set up under Aiming High for Disabled Children, most via direct contact with providers.

High level:

Following initial assessment, if child's needs are likely to be identified as high level - i.e. child is defined as disabled, plus additionally they have one or more of the following needs: complex care needs, challenging behaviour, constant need for supervision, frequent sleep disturbances/high level of night time care needs, a core assessment is likely to be indicated, with a likely offer of over six hours' care weekly via 'Shared Care' daycare, paid childminding, other agency for supported leisure e.g. Spurgeon's/Mencap; residential provision via Stowheath House/Windmill Lane/overnight stays with foster carers via Shared Care; or a Direct Payment in lieu of services.

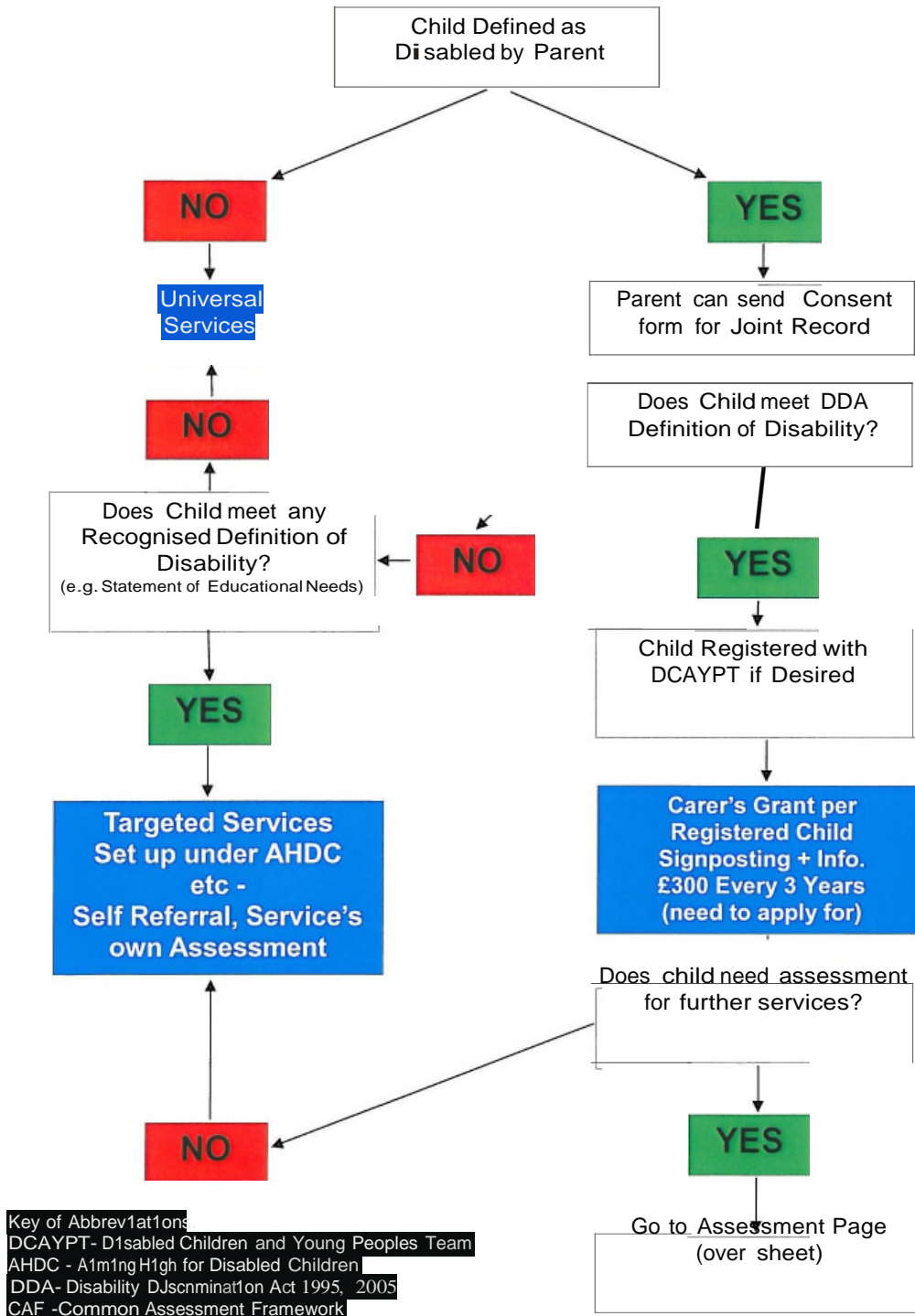
Children can still access Aiming High services if they are accessing any of the above, and for the most complex needs a package of different services may need to be available – e.g. a child with a life-threatening condition and high support needs may need to access overnight short breaks from Stowheath House with support from the nursing team, plus short breaks via Acorns' 'Hospice at Home' scheme in their home, and may have a Direct Payment for personal care in addition to this; while a child with autism and challenging behaviour may need to access overnight

short breaks from Windmill Lane, plus additional support from one of the Aiming High services also provided by Windmill Lane or by Spurgeon's, plus a sitting service from Multicare.

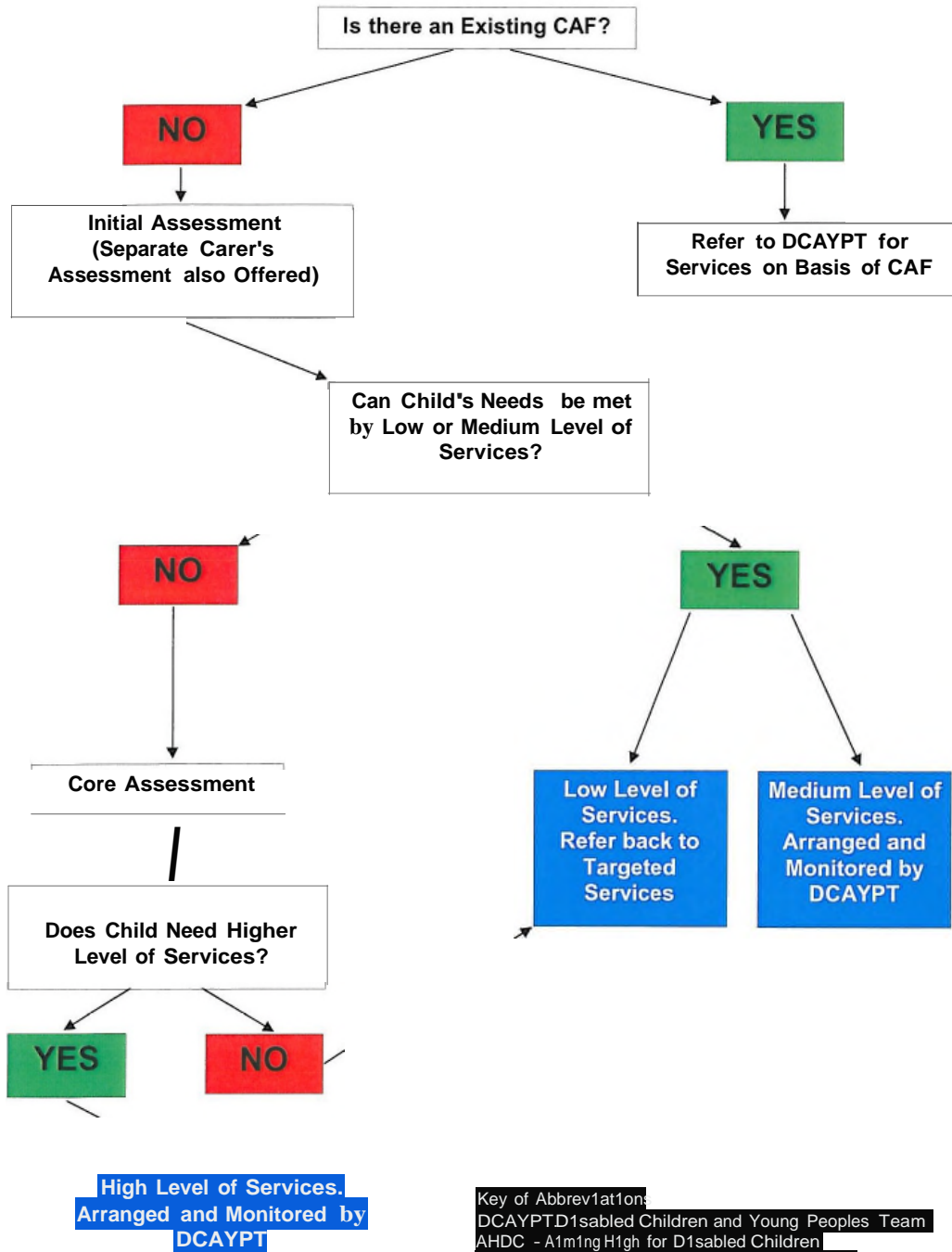
NB - Factors such as parental disability or health issues/single carer/additional disabled sibling in family will affect other factors and move need level up (see 'guidelines for assessing needs of child/young person) although primary focus must be on child's needs and at all times guided by AHDC principles – "Short breaks should .. 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." (TDC 2009)

It is a government requirement that services set up to provide short breaks to disabled children and young people are monitored and statistics collated to ensure that target groups are being appropriately reached; and packages set up for individual children must be monitored and reviewed regularly to ensure that needs are being met appropriately, as indicated in the care planning guidance for short breaks. A database is available that includes all young people receiving short breaks, including those who have self-referred, to ensure that these appropriate monitoring activities can be carried out.

Pre Assessment for Services



Assessment for Services



Entitlement Guidance to Services

Proposed Wolverhampton Model:

LOW LEVEL

- All disabled children/young people (i.e. defined Disability Discrimination Act (DDA) 2005 or Statement of Educational Need or receiving Disability Living Allowance)- Direct access to services, e.g. Multicare Saturday Club, new services set up under AHDC etc.
- If DDA definition met:
- Registration with Disabled Children & Young People's Team if wished
 - Carers' short break grant - £300 per disabled child, every 3 yearly-parents/carers are entitled to apply for this.
 - Information pack sent out on registration
 - Signposting
 - Local and national information;
 - Offer of Initial Assessment by a social worker and/or Carer's assessment by Carer Support worker.

MEDIUM LEVEL

- In addition to above and following an Initial Assessment (IA):
- Typically 3-6 hours care weekly via for example:
- Shared Care daycare
 - Paid child minding
 - Supported leisure
 - Direct Payment.
- Identified through the IA:
- Child defined as disabled, plus additional factors, for example:
- need for frequent supervision,
 - frequent demanding behaviors,
 - some night-time care needs/sleep issues
 - disability/health issues for carers,
 - significant impact on siblings

HIGH LEVEL

- Following a Core Assessment (CA) indicated by the IA:
- 6-10+ hours care weekly
 - or
 - Overnight short breaks, eg at either Stowheath House, Windmill Lane or via Shared Care.
- Identified through the CA:
- Child defined as disabled, plus high level of additional factors, e.g.:
- need for constant supervision,
 - high level of care needs.
 - challenging behavior,
 - significant sleep issues/high level of night-time care needs
 - significant impact on family life for all,
 - no extended family support. social isolation etc.