

Lancashire County Council
Directorate for Children and Young People

Matching Needs and Services:
A Thresholds Model
for
Children with Disabilities (CwD)

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1. Principles

1.1 When deciding upon the service response the following principles apply;

- The child's welfare is the paramount consideration
- Due account will be given to the wishes and views of the child and anyone with parental responsibility
- The child's and carer's human rights will be respected
- All children are entitled to universal services
- Priority will be given to those in greatest need
- Services will be delivered to promote the independence of children and families
- Services will be delivered in partnership with the child, anyone with parental responsibility and the carer
- Due account will be given to carers' needs for services to support them in their caring role
- Services will be delivered in a multi agency context, reflecting the mixed economy of care
- Services will be locally based unless there are clear, justifiable reasons otherwise.
- Services will be based on the social model of disability

2 Legal Considerations

2.1 Eligibility Criteria

Eligibility criteria can be used to decide what level of need has to exist before a service is provided, where the authority has a discretionary power to provide the service. Eligibility criteria cannot be used where an authority is under a duty to provide a service. Eligibility criteria should be clear and applied consistently across the authority and they can be varied over time as circumstances dictate.

Eligibility Criteria can be used;

- For services provided under Sect 2 of the Chronically Sick and Disabled Persons Act (mainly Domiciliary Care and Outreach services)
- For Residential Short Breaks under Sect 20(4) of the Children Act 1989, either provided in Lancashire County Council or other establishments or by the Family Link Scheme or by contracted foster carers.
- For services provided under Sect 17 of the Children Act 1989

Eligibility Criteria cannot be used;

- to decide whether or not a child becomes Looked After.
- to determine if a child with a disability is entitled to an assessment.

2.2 The use of Bandings

Once the need for a service has been established the service must be delivered at a level which meets the assessed need. The use of a rigid "banding" scheme to limit the amount of service offered is unlawful. However

it is lawful to have a system of "indicative allowances" which can be used as a starting point when deciding at what level the service should be provided, as long as the indicated amounts are not treated as an absolute maximum amount and that they are varied to take account of individual circumstances.

2.3 Children in Need

Children with a disability are children in need and have a right to an assessment under the Framework. However in order to access services in 3.2, 3.3 and 3.4 above they have to meet the authority's Eligibility Criteria. It is possible that some children will not meet the Eligibility Criteria but still remain Children in Need for whom there is a residual duty under Section 17. In such cases short term assistance may be warranted to allow the child to access universal services, or the child may benefit from an "Aiming High" short break. Section 17 must not be used to provide Section 2 Chronically Sick and Disabled Persons Act services when the child is not eligible to receive those services.

2.4 Short Breaks

Local authorities are required to provide services designed to assist individuals who provide care for children with disabilities to continue to do so, or to do so more effectively, by giving them breaks from caring. The care package should include elements which will give the carers appropriate breaks from their caring tasks. The package of care must not simply focus on the presenting needs of the child.

2.5 The use of Section 17 or Section 20(4) of the Children Act 1989

A recent change in government guidance means that Section 17 can now be used to provide residential or overnight Family Link short breaks. The guidance says that determining under which section the service is provided is a matter of professional judgement, taking due account of the parent carer's strengths and weaknesses. The children of parents who have well developed support mechanisms may not need the protection of Section 20(4), whereas other children may benefit from the inherent formal review process

3 Using the Thresholds Model

3.1 The model is not intended as an assessment tool, nor is the model intended to replace the professional skills and judgements of social work staff; assessments are carried out using the Framework. It is intended as a guide to decision making and to assist in the equitable distribution of finite resources. For children with particularly profound or complex needs the model may not be appropriate. If the resources suggested by the model are clearly inadequate an adjustment must be made to ensure that they are adequate to meet the assessed need.

3.2 The first part of the model is the "Thresholds Matrix". This is intended to be used following the completion of the assessment. The Thresholds Matrix will establish whether or not the child is eligible to receive services, including a short break. The Thresholds Matrix also offers an indicative level of service.

In most cases the indicative level of service will be appropriate to meet the child and family's need. However the actual amount of service provided must take account of individual needs. The Thresholds Matrix should also be used before the child's review. This will show whether or not the existing levels of service are still appropriate to the child's or family's needs.

3.3 The second part of the model is the "Service Response" which should be used when drawing up the plan.

3.4 The model is based on the Domains and Dimensions of the Framework for the Assessment of Children in Need and their Families. There are four levels of service.

3.5 The highest level of service is Children Looked After (CLA) and access to the CLA system is determined by the need to keep children safe. Thus only children who cannot otherwise be kept safe will become CLA.

3.6 If a child's needs are not being met, staff should consider whether or not the situation is so serious that the child is not safe and that action should be taken under Safeguarding Procedures.

3.7 The other three levels of service reflect lower levels of assessed need and assign correspondingly lower levels of resources. There is a further level of service, where the child would not normally be considered eligible for services from the Directorate.

3.8 Following assessment the level of need is determined by reference to the "Dimensions" and "Evidence" columns of the matrix. The "Evidence" column is there to act as an 'aide memoire,' it is not a complete list of factors. There will be other evidence and factors which need to be taken into account. Professional judgement will be required in interpreting these factors, particularly where decisions have to be made about "significant" difficulties. What might be a significant difficulty for one family may not be significant to another family in different circumstances. Consultation with the appropriate manager or discussions in Supervision should assist in deciding if the "significant" threshold has been reached and ensure consistency. A guide based on the child's presentation can be found in Appendix One.

3.9 The Thresholds Matrix may show that the child's needs fall into several levels. For example a child being considered for a Child Protection Plan, Level 3 will almost certainly be found to meet lower levels as well. It is the highest level which should be used in designing the service response.

3.10 Once eligibility and the level of service has been established the "Service Response" shows an indicative maximum of both the type and amount of service to be offered. The menu of services is not exhaustive; there may be other innovative services which will meet the assessed needs. However, it is a precondition that the child is taking full advantage of all relevant universal services. This may require a degree of advocacy by the social worker on the family's behalf, or senior management negotiation with the relevant partner

agency. The Directorate cannot make up the shortfall if other statutory services are not meeting their obligations.

3.11 The Service Response identifies a range of service provision, for example Level 2 provision is an indicative allowance of up to 800 hours per year. It does not automatically follow that each Level 2 case will attract that amount of service. A lesser amount may be appropriate due to individual circumstances. The amount of service will be determined by the Core Assessment. For example the age of the child may be an appropriate factor; a young child with physical disabilities, where moving and handling are less of a concern, may require a lower amount of service than an older child where moving and handling assumes a greater importance.

4 Designing the service response

4.1 The County Council has a duty to ensure the assessed social care needs of the child and carers are met. The assessment is carried out in partnership with the parents or carers and the child. When meeting the assessed needs, the County Council will be guided by the principles set out in Section 2 above. Wherever possible the assessed needs will be met by locally based services in a non-residential setting.

4.2 The service response should be negotiated and agreed with the parents or carers and child. However the final decision lies with the County Council. If the parents, carers or child are unhappy with the allocation efforts should be made to resolve the matter. If an amicable agreement cannot be reached the parents, carers or child should be invited to use the Children Act Complaints and Representations Procedure. Services should be delivered at the offered level pending a resolution.

4.3 Careful consideration should be given to designing the service response. The model allows for a “mix and match” approach to meeting assessed needs. The service provision should be sufficient to meet lawfully the assessed social care needs, both by the type and amount of service offered. Due regard should be paid to health and safety matters. The family must be taking full advantage of all relevant universal services.

4.4 The levels of services suggested in the Service Response section of this document are indicative only; the actual amount of service offered will be commensurate with the family’s assessed needs. If the indicative amount of service is inadequate to lawfully meet the assessed needs arrangements should be made to provide an adequate amount of service.

4.5 Maximum flexibility can be used to meet the family’s assessed needs. A overnight short break can be combined with a package of social, developmental or leisure activities provided the indicative allowance is not exceeded (but see 5.4 above). For example, a Level 3 need could be met by 30 overnight stays and 11 hours per week of Intensive Family Support as this would equate to the indicative allowance maximum of 72 nights. One night in

a Short Break setting is considered to be the equivalent of 13 hours of domiciliary care.

4.6 The regulations applicable to overnight short breaks via the Children Act 1989 Section 20(4) require that children who receive overnight short breaks in more than one setting are treated as accommodated and the “easements” in statutory visits and reviews do not apply. A “setting” is defined as a local authority establishment or placement, therefore a child cannot attend for overnight stays in more than one residential establishment. Similarly a child cannot combine overnight stays in a residential establishment and overnight stays in a Family Setting, or receive overnight stays in more than one Family Setting. If the child’s needs could only be met by such a package, senior management approval is required.

4.7 Some children may also receive a residential service from a Health Service establishment or Hospice, such services should be taken into account when designing the service response.

4.8 A child who is receiving assistance with personal care, for example to assist the carer with bathing the child or to assist the child to get ready for school should also be considered for a short break.

4.9 Children whose needs can be met without recourse to overnight short breaks should be offered an appropriate package from the menu of services. Young people should be enabled to access social, developmental or leisure activities without their carers, as well as being offered a package to assist the carers meet the child's assessed personal care needs. Such a package will both give the carers a break and promote the child’s independence.

4.10 If a personal care package is combined with a social, developmental or access to leisure package, care must be taken to differentiate between the two services. The skills required to deliver these services are different and it must not be assumed that a carer skilled in personal care will be equally skilled in assisting young people to access leisure activities, or vice versa. A personal care package must not be used to enable the child to access community facilities. If the agency worker (or Direct Payments Personal Assistant) has the skills to offer both personal care and community access then it is sensible for the one worker to undertake both tasks. The package still must differentiate between the two tasks as there may be a difference in the payments and the Directorate is required to report on services delivered in the family home and services delivered in the community.

4.11 In the case of families who have more than one disabled child, the care package should be adjusted to reflect the totality of the family’s needs. This may require a level of service greater than would be justified by the individual needs of each child. Such cases should be fully discussed with the appropriate manager.

5 Direct Payments

5.1 The County Council is under a duty to promote the delivery of services via Direct Payments. Direct Payments are available to people who have Parental Responsibility for disabled children or in the case of disabled 16 and 17 year olds, the young people themselves. Whilst the parents and young people have the choice not to use Direct Payments they must be offered the opportunity to take them. The Direct Payment can be used to fund all, or part of the package. Further detailed guidance is available.

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CHILDREN WITH DISABILITIES - THRESHOLDS MATRIX

DOMAIN	DIMENSION	CHARACTERISTICS	LEVEL
Child's Developmental Needs	Health	<ul style="list-style-type: none"> • Child has complex health needs requiring invasive treatment, is dependant on medical technology, parents/carers wellbeing at imminent risk • Child has had Health Assessment showing need for high level of social care services 	3
		<ul style="list-style-type: none"> • Child has severe mobility problem and requires manual handling, parents/carers need break from caring task • Child has sleep disorder aged 8+ • Failure to keep medical appointments creating a significant risk to health 	2
	Emotional Behavioural Development	<ul style="list-style-type: none"> • The child has severe challenging behaviour which may be self injurious or injurious to the carers and requires very high levels of supervision 	2
		<ul style="list-style-type: none"> • Child is not meeting potential and is socially isolated despite support from other agencies • Child has severe challenging behaviour which prevents access to mainstream play and leisure facilities • Child's social needs can only be met in specialist setting, e.g. due to toileting or manual handling needs 	1
	Family and Social Relationships	<ul style="list-style-type: none"> • Child is subject of Care Order, PPO, EPO etc. • Child is lost or abandoned, the parents are prevented for caring for the child, there is no one with PR • Irretrievable breakdown in the parent/child relationship 	CLA
		<ul style="list-style-type: none"> • Child has a CP Plan, package is part of CP Plan 	3
		<ul style="list-style-type: none"> • Child has complex, multiple care needs which risk causing breakdown in family relationships 	1
		<ul style="list-style-type: none"> • Strain in carer/child relationships e.g. parent/carer expresses distress at meeting child's demands • Strain between child and siblings e.g. siblings feel their own needs are not being met 	1
	Social Presentation	<ul style="list-style-type: none"> • Medical condition/medical technology hinders access to leisure opportunities 	1
	Self-care Skills	<ul style="list-style-type: none"> • Child requires significant assistance with personal care needs; bathing, toileting, dressing 	1

DOMAIN	DIMENSION	CHARACTERISTICS	LEVEL
Family and Environmental Factors	Family History and Functioning	<ul style="list-style-type: none"> Parents/carers prevented from caring for the child due to their physical, emotional or learning difficulties, mental ill-health or substance misuse The family is homeless and care for the child is not otherwise available/appropriate Parent/Carer has chronic ill health or significant impairment or significant disability 	CLA
		<ul style="list-style-type: none"> An adult member of the household requires significant support from the child's carer due to chronic ill health or significant impairment. Parent's/carer's caring capacity is temporarily impaired (review after 6 weeks) Parents/carers unable to meet the majority of child's social care needs despite intensive support from other agencies 	3
		<ul style="list-style-type: none"> An adult member of the household requires significant support from the child's carer due to chronic ill health or significant impairment. Parent's/carer's caring capacity is temporarily impaired (review after 6 weeks) Parents/carers unable to meet the majority of child's social care needs despite intensive support from other agencies 	1
	Wider Family	<ul style="list-style-type: none"> There is more than one disabled child in the family 	2
		<ul style="list-style-type: none"> Child has only one primary carer and there are other children in the household 	1
	Housing	<ul style="list-style-type: none"> There is a clearly defined housing related problem which prevents the child receiving necessary support e.g. adaptations not yet undertaken 	1
	Family's Social Integration	<ul style="list-style-type: none"> Family's social functioning is impaired e.g. family unable to go out as a family group 	1
		<ul style="list-style-type: none"> Child's disability is impacting on parent's/carer's capacity to promote siblings' wellbeing e.g. unable to attend to family affairs Child's disability is impacting on siblings social integration e.g. siblings unable/unwilling to have friends visit 	1

DOMAIN	DIMENSION	CHARACTERISTICS	LEVEL
Parenting Capacity	Basic care	<ul style="list-style-type: none"> Parents/carers delivering inappropriate care, e.g. carers do not promote child's independence Parents/carers delivering inadequate care e.g. carers expectations of child's self care ability too high Significant concerns over household hygiene 	1
	Ensuring safety	<ul style="list-style-type: none"> Critical failure to abide by treatment plan e.g. not following physiotherapy routines for extended periods Medication inappropriately administered e.g. too much, too little, wrong intervals, wrong medication Child is left unattended or left with inappropriate carers 	2 (but consider Safeguarding implications)
		<ul style="list-style-type: none"> The parent's/carer's health/wellbeing at risk e.g. back problems due to manual lifting Parent's/carer's substance misuse impacts on ability to care for child 	1
	Emotional Warmth	<ul style="list-style-type: none"> Parents/carers physical, emotional or learning difficulties, mental ill-health or substance misuse adversely impacting on child's emotional development Parents/carers unable to meet child's emotional needs despite intensive support 	2
	Stimulation	<ul style="list-style-type: none"> Parents/carers unable to meet many of child's social needs 	1
	Guidance and Boundaries	<ul style="list-style-type: none"> Inconsistent approach to behaviour management Not setting boundaries/inappropriate boundaries Services required as part of behaviour management programme 	1
	Stability	<ul style="list-style-type: none"> Parents'/carers' relationships at imminent risk of breakdown 	1

CHILDREN WITH DISABILITIES - SERVICE RESPONSE

BANDED LEVEL OF ASSESSED NEED	TYPE OF SUPPORT	INDICATIVE ALLOWANCE
LEVEL 0		
<p>Children whose needs fall below these levels will normally be considered ineligible for services.</p>	<ul style="list-style-type: none"> • The needs of such children can probably be met by universal services, or by universal services making "reasonable adjustments" to their services to enable the child to benefit from them. • Nevertheless such children may still be Children in Need and it may be appropriate for them to be offered some short term, limited support to facilitate access to the services. 	<ul style="list-style-type: none"> • No service provided
LEVEL 1		
<p>Where lower level interventions are clearly inadequate or inappropriate and following a "Framework" Assessment, a package of support up to an indicative maximum, comprising elements of;</p> <p>All services subject to review.</p>	<ul style="list-style-type: none"> • Family Support <ul style="list-style-type: none"> ○ Support for social, developmental and leisure activities ○ Support with child's personal care 	<ul style="list-style-type: none"> • An appropriate amount of domiciliary and day care services averaging 250 hours up to an indicative maximum of 400 hours per year, (approximately 11 hours per week) roughly the equivalent of 28 nights short breaks. • Note. It is not anticipated that overnight short breaks will routinely feature in the Children in Need Plans of Level 1 children but their parents can opt to receive a overnight break with a concomitant reduction in domiciliary

		care, at the rate of 13 hours domiciliary care for each overnight stay.
	<ul style="list-style-type: none"> • Equipment and Adaptations 	<ul style="list-style-type: none"> • As required following Occupational Therapy (OT) assessment
LEVEL 2		
<p>Where lower level interventions are clearly inadequate or inappropriate and following a “Framework” Assessment, a package of support comprising a combination of elements of;</p> <p>All services subject to review.</p>	<ul style="list-style-type: none"> • Intensive Family Support <ul style="list-style-type: none"> ○ Support for social, developmental and leisure activities ○ Support with child’s personal care ○ Night sitting service (if sleep problem) • Short Break in a Family Setting or Short Break in a residential setting (if 8+ and Short Break in a Family Setting contra indicated, cultural or religious requirement,.) 	<ul style="list-style-type: none"> • An appropriate amount of services averaging 550 hours of services per year (around 10 hours per week) up to an indicative maximum of 800 hours per year, (approx 15 hours per week reduced by 13 hours for every night taken) which roughly equates to 56 nights short breaks.
	<ul style="list-style-type: none"> • Equipment and Adaptations 	<ul style="list-style-type: none"> • As required following OT assessment

LEVEL 3		
<p>Where lower level interventions are clearly inadequate or inappropriate and following a “Framework” Assessment, a package of support comprising a combination of elements of;</p> <p>All services subject to review.</p>	<ul style="list-style-type: none"> • Intensive Family Support <ul style="list-style-type: none"> ○ Support for social, developmental and leisure activities ○ Support with child’s personal care ○ Night sitting service (if sleep problem) • Short Break in a Family Setting or • Short Break in a residential setting (if8+ and Short Breaks in a Family Setting contra indicated, cultural or religious requirement,.) 	<ul style="list-style-type: none"> • Up to an indicative maximum of 1000 hours per year (approx 20 hours per week reduced by 13 hours for every night taken in a Short Break setting), which roughly equates to the maximum 75 nights short breaks per year allowed for in the new regulations before the review and visiting regulations apply in full. • Note: If the young person's needs cannot be met by 75 nights per annum, the young person becomes a Child Looked After for the duration of his or her placement. This requires the full Looked After Children processes to be followed, rather than the abbreviated Short Break procedures.
	<ul style="list-style-type: none"> • Equipment and Adaptations 	<ul style="list-style-type: none"> • As required following OT assessment
CHILDREN LOOKED AFTER		
<p>Children will only enter the looked after system following agreement from the Service Manager / District Manager (or other authorised person).</p> <p>All services subject to review</p>	<ul style="list-style-type: none"> • Looked After Children’s system: • Foster carers or Named carers <ul style="list-style-type: none"> ○ Equipment and Adaptations ○ Support package ○ Support with child’s personal care 	<ul style="list-style-type: none"> • Residential care if 13+ and foster care or named carer contra-indicated • As required, following OT assessment • At appropriate level • If required

	<ul style="list-style-type: none">• Home placement (with appropriate consents)<ul style="list-style-type: none">○ Equipment and Adaptations○ Support package○ Support with child's personal care	<ul style="list-style-type: none">• As required following OT assessment• At an appropriate level• If required
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