

All Age Disability Eligibility Assessment Criteria

Introduction

The Children Act 1989 places a duty on local authorities to 'safeguard and promote the welfare of children within their area who are in need, and so far as is consistent with that duty, to promote the upbringing of such children by their families, by providing a range and level of services appropriate to those children's needs'.

The Equality Act 2010 defines a person as having a disability if:

- (a) s/he has a physical or mental impairment, and
- (b) the impairment has a substantial and long-term adverse effect on his/her ability to carry out normal day-to-day activities.

All children defined as disabled are regarded as 'children in need'. A child in need is defined by the Children Act 1989 Section 17 (10):

- (a) 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 under this Part.
- (b) his health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services; or
- (c) he is disabled, Family, in relation to such a child, includes any person who has parental responsibility for the child and any other person with whom he has been living.

The Children Act 1989 Section 17(11) defines: a child is disabled if he is blind, deaf or dumb or suffers from mental disorder of any kind or is substantially and permanently handicapped by illness, injury or congenital deformity or such other disability as may be prescribed; and in this Part

- "development" means physical, intellectual, emotional, social or behavioural development.

and

- "health" means physical or mental health.

The Warwickshire judgement (R (L and P) v Warwickshire County Council [2015] EWHC 203) outlines that the s.17 assessment can be undertaken by the most appropriate and proportionate means, this could be Early Help or Social Work Assessment.

Worcestershire as a partnership have a wide range of support through its Early Help Offer. Worcestershire County Council (WCC) have a number of teams that can offer support and promote the welfare of children and young people under s17 Children Act 1989. These are district based Early Help Family Support teams and the Supporting Families First Children in Need services.

The majority of children and young people in Worcestershire who require services will receive them through universal provision within their local community. Only when it is identified that the impact of the child's disability upon their quality of life and family is too great to be met by universal/targeted services should a referral for an assessment be made

– this may be undertaken by either the Children with Disabilities Team, Front Door Assessment teams or Early Help Family Support if the criteria is met. Should the criteria not be met families will be signposted to alternative services that are able to meet any identified unmet need.

The Children with Disabilities Team provides a specialist service to those children and young people aged 0-16 and the Young Adults Team (YAT) for those young people aged 16-18, who have profound disabilities, that have a long term and substantial impact on their ability to perform day to day activities as an individual and/or impact on siblings or parent/carer(s). Those aged 18 plus will be supported by Young Adults Team or adult services and assessed against adult Care Act legislation.

The definitions of substantial and long-term disability are as follows:

- Substantial is defined by the Equality Act 2010 as meaning ‘more than a minor or trivial effect’. As such, child requires significant support from another person or equipment to carry out basic functioning.
- Long-term is defined in the Equality Act 2010 as ‘Likely to last for the rest of the person’s life, or has lasted at least 12 months, or the total period for which it lasts is likely to be at least 12 months’.

The presenting need for involvement from the Children with Disabilities or Young Adults Team is the child’s disability.

Children who do not meet the criteria for an assessment from the CwD or YAT Team may still meet the threshold for children in need services through the locality teams or Early Help service. This threshold is determined by the Levels of need guidance which can be found here; [Multi agency levels of need guidance \(safeguardingworcestershire.org.uk\)](http://safeguardingworcestershire.org.uk) The premise for seeking additional support associated with a child’s disability at Social Care level are;

1. Children and their families whose main need for services arises out of the child/young person’s disability

And

2. They have a diagnosed disability that has a substantial or long-term impact on the quality of the child/young persons or/and their family’s lives (see criteria for levels of support)

And

3. The child/young person’s needs cannot be met by universal or targeted services, and these have been explored

Examples of diagnoses appropriate referrals could include, children and young people aged 0-18;

- With severe learning disabilities
- With multiple or severe disability
- With severe communication disability
- With social communication difficulties
- With moderate to severe Global development delay
- With severe sensory impairment

- With complex physical disability

Criteria against levels of Need

The below Criteria sets out some guidance regarding levels of needs and complexity and impact of presenting disability on a child/young person and their family. A Referral would need to evidence 4 or more needs in level 4 or 6 or more needs set out in level 3 to be eligible for an assessment by the Children with Disabilities OR Young Adults team.

LEVEL 1

Health	Diagnosed disability, doesn't require reviewing annually, isn't degenerative or life limiting, has limited impact on day-to-day life
Education	Accessing mainstream education provision with support
Mobility	Some assistance required
Self-Care	Some assistance required
Communication	Some communication difficulties but continuing to make progress
Behaviour	Prompting required to make choices,
Sleep	Some assistance required to settle to sleep, doesn't wake every night
Medication	None or low level needs
Visual Impairment	Corrected with lenses
Hearing Impairment	Corrected with hearing aids
Under 5	Developing predominantly in line with chronological age
Family functioning	Family are well adapted to the child's needs and know how and where to access support from. Not having a significant impact on any siblings
Supervision	Supervision similar to child of same age

LEVEL 2

Health	Diagnosed disability, engaged with health services, ongoing support is having desired impact
Education	Has a learning difficulty, EHCP in place, accessing mainstream education
Mobility	Some assistance required
Self-Care	With supervision can engage in self care appropriate to age
Communication	Speech and language difficulties
Behaviour	Limited perception of danger to self and others
Sleep	Requires some attention through the night, wakes less than twice a night,
Medication	None or low level medication requirements
Visual Impairment	Corrected with lenses
Hearing Impairment	Corrected with hearing aids
Under 5	Continuing to make progress in development although may not be meeting milestones
Family Functioning	Family are utilising family and friends to support where needed. Child with disability is not having a significant impact on siblings.

Supervision	Occasionally requires more supervision than child of same age
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LEVEL 3

Health	Degenerative or life limiting condition Planned or emergency admissions at least once per year
Education	Has a severe learning difficulty, EHCP, Specialist provision or significant support in mainstream setting. Moderate to severe Global development delay
Mobility	Considerable assistance required May be able to stand or transfer with support Requires aids and hoists to meet needs.
Self-Care	Dependant on carers for major aspects of care, bathing, dressing, able to self-feed and toilet. Self-Care needs are greater than what would be expected for a child of the same chronological age without disability needs.
Communication	Difficult to understand and has limited verbal communication skills, can communicate basic needs using non-verbal methods such as PECS Makton gestures etc
Behaviour	Significant risk to self or others 2 or more times per week. Behaviours arising directly from disability needs. Structured prompting/supervision to make appropriate choices and stay safe
Sleep	Needs attention 3+times per night – causing fatigue of parent carer
Medication	Requires daily medication by parent or carer
Visual Impairment	Unable to read large print without intensive educational assistance
Hearing Impairment	Severe hearing loss (71-95DB)
Under 5	Requires significantly greater care than children of same chronological age
Family Functioning	The impact that trying to meet the additional needs of a disabled child or young person is having on the family as a whole is significant. There is limited family support.

LEVEL 4 -

Health	Degenerative or life limiting condition, requires specialist medical nursing care, 24-hour support and supervision required due to medical reasons
Education	Diagnosed severe or profound learning disability Moderate to severe Global development delay Has a learning difficulty, EHCP, Specialist provision or significant support in mainstream setting.
Mobility	Totally dependent on parent/carers to meet needs Unable to weight bear Primarily uses a wheelchair
Self-Care	Totally dependent on parent/carers to meet needs feeding, dressing, bathing, toileting etc Requires hoisting

	Requires postural support Self-care needs are significantly greater than what would be expected for a child of the same chronological age without disability needs.
Communication	Unable to understand or communicate any needs using any methods.
Behaviour	Constant risk to self and others, behaviours associated directly with disability, no understanding of danger, will place self at risk of harm Requires 1:1 supervision during waking hours. Constant danger to self and others – doesn't understand consequences due to disability needs.
Sleep	Needs continuous monitoring or significant attention throughout the night
Medication	Requires medication via a trained person (nurse or parent/carer)
Visual Impairment	Eligible to be registered as blind, requires education by non-sighted methods
Hearing Impairment	Profound hearing loss (>95Db) or total loss of hearing
Under 5	Requires significantly greater care than children of same chronological age
Family functioning	No one is available or able to meet the child or young person's basic needs Families who require intensive multi agency support in caring for child with disabilities and/or health needs or life limiting conditions Likelihood of family breakdown resulting from the demands of the care, supervision or behaviour of the child/young person Impact of moving and handling is having a significant impact on the wellbeing of the carer