

All Age Disability Eligibility Assessment Criteria (Updated May 2025)

•	Introduction	Page 1
٠	The Children with Disabilities Team & Young Adults Team	Page 2
•	Criteria against levels of need	Page 3

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 & Young Adults Team

The Children with Disabilities (CWD) 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)

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. Involved workers complete the *AAD Criteria Referral Form* to give evidence for child meeting criteria at level 3 or 4.

HEALTH		
Diagnosed disability, doesn't require reviewing annually, isn't degenerative or life	Level 1	
limiting, has limited impact on day-to-day life		
Diagnosed disability, health services are involved, ongoing support is having	Level 2	
desired impact		
Degenerative or life limiting condition. Planned or emergency admissions at	Level 3	
least once per year or ongoing support at level 2 is not delivering the desired		
impact/detrimental to the child		
Degenerative or life limiting condition, requires specialist medical nursing care,	Level 4	
24-hour support and supervision required due to medical reasons		

EDUCATION				
Accessing mainstream education provision with support (graduated response in	Level 1			
place)				
Has a learning difficulty, EHCP in place, accessing mainstream education	Level 2			
Has a severe learning difficulty, EHCP, Specialist provision or significant support	Level 3			
in mainstream setting. Moderate Global development delay				
Diagnosed with a profound learning disability, severe Global development delay, EHCP in a specialist provision.	Level 4			
MOBILITY				
No assistance required	Level 1			
Some assistance required to support physical mobility, such requiring an OT or	Level 2			
physio programme	201012			
Considerable assistance required with physical mobility, may be able to stand or	Level 3			
transfer with support but requires aids and hoists to meet mobility needs.	Levero			
Totally dependent on parent/carer to meet mobility needs. Unable to weight bear	Level 4			
Primarily uses a wheelchair				
SELF-CARE NEEDS				
With supervision can engage in self-care appropriate to age	Level 1			
Self-Care needs are greater than what would be expected for a child of the same	Level 2			
chronological age without disability needs but can be managed by parent/carer	LOVELZ			
within the home with some extra support.				
Child is dependent on carers for major aspects of care, bathing, dressing, able	Level 3			
to self-feed. May use incontinence aids	201010			
Totally dependent on parent/carer to meet needs feeding, dressing, bathing,	Level 4			
toileting etc, requires hoisting and/or postural support				
COMMUNICATION				
Some communication difficulties but not accessing speech and language	Level 1			
services				
Speech and language difficulties and accessing speech and language services	Level 2			
Difficult to understand and has limited verbal communication skills, can only	Level 3			
communicate basic needs using non-verbal methods such as PECS, Makaton,				
gestures etc				
Unable to understand or communicate any needs using any methods.	Level 4			
BEHAVIOUR				
Prompting required to make choices	Level 1			
Limited perception of danger to self and others. Needs higher level of	Level 2			
supervision than a child of a similar age without a disability.	207012			
Significant risk to self or others 2 or more times per week. Behaviours arising	Level 3			
directly from disability needs where they require 1:1 supervision during waking				
hours. Structured prompting/supervision to make appropriate choices and stay				
safe. No understanding of danger.				
Meets at level 3 and in addition:	Level 4			
Constant risk to self and others, behaviours associated directly with disability,				
will place self at risk of harm. Requires 1:1 supervision or higher 24 hours a day.				
Constant danger to self and others due to their challenging behaviour.				
SLEEP				
Some assistance required to settle to sleep, doesn't wake every night	Level 1			

Needs attention 3+times per night due to disability needs, causing severe sleep	Level 3
disruption to parents/carers	
Constant risk to self and others, behaviours associated directly with disability, no understanding of danger, will place self at risk of harm. Doesn't understand	Level 4
consequences of behaviour due to disability needs. Requires 1:1 supervision	
during waking and sleeping hours.	
MEDICATION	
No medication or standard 'over the counter' medication	Level 1
Low level medication requirements, e.g. melatonin or ADHD medication	Level 2
Requires daily specialist medication by parent or carer, e.g. epilepsy medication	Level 3
Requires medication via a trained person (e.g. nurse or parent/carer trained by	Level 4
health to administer medication)	
Visual Impairment	
No visual impairment	Level 1
Corrected with lenses	Level 2
Unable to read large print without intensive educational assistance	Level 3
Eligible to be registered as blind, requires education by non sighted methods	Level 4
Hearing Impairment	
No hearing impairment	Level 1
Corrected with hearing aids	Level 2
Severe hearing loss (71-95DB)	Level 3
Profound hearing loss (>95Db) or total loss of hearing	Level 4
Aged under 5	
Developing predominantly in line with chronological age	Level 1
Continuing to make progress in development although may not be meeting	Level 2
milestones	
Requires significantly greater care than children of same chronological age	Level 3
Requires significantly greater care than children of same chronological age and	Level 4
functioning below 24 months of age.	
Family Functioning	
Family is well adapted to the child's needs and know how and where to access	Level 1
support from. Not having a significant impact on any siblings	
Family are utilising family and friends to support where needed. Child with	Level 2
disability is not having a significant impact on siblings.	1
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	Level 3
support. No one is available or able to meet the child or young person's basic needs	Level 4
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.	