

Children's Services Overview and Scrutiny Committee
23rd November 2021

Agenda Item No. 9

Safeguarding Children with Disabilities

Ward(s): All

Portfolios: Cllr Tim Wilson. Children's

Executive Summary:

Walsall Disabled Children and Young People's Team (DCAYPT) is a Specialist Social Work Team which supports the families of children and young people whom have a complex disability and are permanent residents in Walsall Local Authority Area. The team provides a service to children and young people requiring additional resources in respect of their disability, where the disability is permanent and substantial (as outlined with the Equality Act 2010) and has a profound impact on the child or young person's life. This includes any child that may have been born with a disability or become disabled as a result of an illness, accident or injury.

In order to meet the criteria for a service from the DCAYPT, the child must firstly meet the requirements of section 17(11) of the Children Act 1989. Not all children who are defined as having a disability under s17 will meet the threshold for a service from the DCAYPT as the majority of children and young people in Walsall, including those who are disabled, will receive services through health, education and universal or targeted provision within their local community.

Where services are required that cannot be met through universal services and/or there is a safeguarding concern regarding a disabled child or young person or where they are considered in need of specialist support, contact can be made via the multi-agency safeguarding hub (MASH) as outlined within the 'Right Help, Right Time' threshold document.

Reason for scrutiny:

This report aims to outline how we continue to meet the needs of these children and ensure their safety. A separate performance profile of the team has been provided and should be read in conjunction with this report.

Recommendations:

For assurances to be provided in relation to the support offered to our disabled children and young people and for the progress and developments made to be endorsed.

Background papers:

None

Resource and legal considerations:

Section 17(11) of the Children Act 1989 places a general duty on Local Authorities to provide services to safeguard and promote the welfare of children within their area who are in need. The Act defines disability as: "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".

The main duties of Social Services Departments to provide services for children and their families are set out in Schedule 2 of the Children Act 1989. A Local Authority must:

- Identify children in need in its area and provide information about services
- Maintain a register of disabled children
- Provide services for disabled children which minimise the effect of their disabilities and gives them the opportunity to lead lives as normal as possible

Throughout this document, 'children' means 'children and young people'. As in the Children Acts 1989 and 2004 respectively, 'a child' is anyone who has not yet reached their eighteenth birthday. The fact that a child has become sixteen years of age, is living away from home or is in further education, or is in hospital, or in prison or a young offenders institution does not change their status or their entitlement to services or protection under the Children Act 1989.

Council Corporate Plan Priorities:

One of our corporate priorities is that children have the best possible start and are safe from harm, happy, healthy and learning well. We also aim to provide people to have increased independence, improved health, and can positively contribute to their communities. In Walsall, we strive to ensure that communities are prospering and resilient and that our children are living in safe and healthy places that build a strong sense of belonging and cohesion.

Citizen impact:

Children with a disability are children first and foremost, and as such are deserving of the same rights and protection as all other children. A child can be considered to be disabled if he or she has significant problems with communication, comprehension, vision, hearing or physical functioning.

Many factors can make a disabled child more vulnerable to abuse than a non-disabled child of the same age. Safeguarding disabled children demands a greater awareness of their vulnerability, individuality and particular needs. Research has found that disabled children are three to four times more likely to be abused and neglected than non-disabled children and are more likely to experience multiple types and occurrences of abuse. Disabled children have additional needs and face both additional and specific risks and barriers to their protection including:

- Attitudes and assumptions such as a reluctance to believe disabled children are abused, minimising the impact of abuse and attributing indicators of abuse to a child's impairment.
- Barriers to the provision of support services that lead to the disabled child and their family being isolated.
- Impairment-related factors such as dependency on a number of carers for personal care and impaired capacity to resist/avoid abuse, communication impairments and an inability of the child to understand what is happening or to seek help.
- A skills gap such as an inability to communicate with the disabled child and respond to their individual needs in a child protection context.

Environmental impact:

Not applicable for this report

Performance management

Safeguards for disabled children are essentially the same as all other children. Concerns about the welfare of a disabled child should be acted upon in the same way as any other child in accordance with Walsall's Safeguarding procedures. The same thresholds for action apply. Expertise and resources in both safeguarding and promoting the welfare of children and in working with disability

have to be brought together to ensure that disabled children receive the same levels of protection from harm.

Reducing inequalities:

Our Walsall Right for Children Accessibility Strategy and Inclusion Strategy sets out the vision that Walsall Council has to increase access to education for children and young people with special educational needs and/or disabilities, so that they can benefit from educational provision to the same extent that children without special educational needs and/or disabilities can.

In line with our corporate priorities, Walsall sets out the response to secure improvements in the equality of services, which when achieved, will have a positive impact on our most vulnerable children and young people. Local Authorities, Police and Health Services as key local partners must provide a robust safeguarding approach to ensure they have arrangements in place to provide equal protection for our disabled children.

Consultation:

In order to make sure that all children and young people's voices are heard, we must make sure that appropriate and accessible participation opportunities are available. This includes ensuring that children and young people have the skills and support they need to take part in a way that works for them and their families.

Contact Officers

Zoe Morgan - Head of Service, Help and Protection

☐. 07775 541850

zoe.morgan@walsall.gov.uk

Introduction

Walsall's Disabled Children and Young People's Team (DCAYPT) is based at the Goscote Centre. We are located alongside the Adult Transition Team and other services within the All Age Disability Hub.

We provide a borough-wide service for disabled children whilst working closely with other services such as Child and Adolescent Mental Health Services (CAMHS), Special Educational Needs and Disability Service (Education) and Adult Services when looking at transitioning into adulthood. The team consists of 1 Team Manager, 1 Assistant Team Manager, 1 Senior Practitioner, 7 social workers and 2 Family Support Workers.

We currently have 161 children allocated within the team. This includes 2 children subject to Child Protection Plans, 22 Children in Care and 137 Children supported via a Child in Need Plan.

Referrals to the team include children and young people aged 0 – 18 with a diagnosed disability who require significant support with most daily tasks. This can include issues with mobility, self-help, or when their communication skills are severely limited or where the nature of their disability is such that the child has significant health related difficulties such as:-

- Profound and enduring disabilities, including severe learning disability; multiple disabilities and complex health needs.
- Severe developmental delay in motor or cognitive functioning.
- Acquired disabilities resulting in severe physical and/or learning disabilities/communication disabilities.
- Complex and severe health problems that are potentially life limiting, chronic and/or degenerative conditions.
- A physical or sensory disability when the child has additional needs directly related to their disability; and / or cognitive functioning.
- Severe sensory impairment (registered blind / profoundly deaf).
- Children and young people diagnosed as having a severe Autistic Spectrum Condition where this has a significant impact such as persistent ongoing emotional and / or behavioural difficulties for the child or young person and they require an Education, Health and Care Plan (EHCP).
- Children and young people with moderate learning difficulties where in addition the child has significant additional needs e.g. sensory impairment, autistic spectrum condition or severe epilepsy.
- Mental health concerns if this is within the context of a diagnosed disability and at Tier 4 level. This can also include a young person subject to a mental health assessment and is not already open to a Social Worker or when a child with a disability is detained under section 2 or section 3 of the Mental Health Act.

For children who have a degree of disability that is not outlined as above but are in need of social care intervention, an assessment will be provided by children's locality teams. If that assessment determines that a specialist service is needed and that this is best met by being allocated within the DCAYPT, the child can be transferred to the most appropriate team. However, the DCAYPT can provide guidance and support to other internal services and external agencies which includes safeguarding concerns and any additional support needs, including impact on siblings.

Review of the Service

A review of the children and young people's disability team has been undertaken to ensure the right help is being given at the right time for the right children. This review was undertaken by the completion of a themed audit of 16 children within the disability team and identified areas of good practice as well as areas for further development. Of those 16, 9 were rated overall as Good, 6 as Requiring Improvement and 1 as Inadequate.

The focus of the review was to ensure that disabled children and young people's needs are assessed within timescales and that a high quality outcome focused plan is provided and progressed. In addition, there has also been several children from the children and young people disability team that have been selected as part of our monthly child journey audits and so actions and areas of development arising from those have also been factored into the overall development plan for the service.

The review has drawn upon the strengths of the service and also identified areas for further development. A number of key priorities were identified and the recommendations and timeframes outlined within the development plan which include the following:

Findings of the Review:

Areas of Good Practice

- Recognition that social workers know the children well. Social workers within the CYAPDT speak about their children with passion and have a good understanding of their needs and how to best meet them.
- Good evidence of multiagency working. Practitioners have a good understanding of local resources and how to access them. There was also evidence that there is multi agency contribution to the assessment process and there is clarity around how children's needs can be best met and by whom.
- Good evidence of restorative practice. There are examples of restorative practice in the audit findings and these are reflected within the feedback provided by the parents.
- There is evidence of good quality care planning following sound assessments that have sought to understand the child in the context of their family and environment. This has led to positive outcomes for children.
- Evidence of a 'whole family approach' being undertaken during assessments. This includes the needs of siblings and support that they may require.
- Good example of effective transition planning in some cases. In one example there was evidence of effective transition planning with the same worker being allocated to support the transition into adulthood and creative methods being used to secure the voice of the young person as part of that process.

Areas for Development

- Whilst there are some evidence of good direct work being undertaken, this is not consistent across the team and more work needs to be done to ensure that children's views are ascertained and incorporated into their care planning. There needs to be a greater focus on making sure the child's communication method is clearly evident on file and that all efforts are made to enable a disabled child to have their say.
- The review identified a need for a clearer short break offer that details the outcomes that are to be achieved. This needs to be accessed more easily for families who would benefit from the provision of support that promotes wellbeing and prevents family breakdown.
- Specialist training programme to be developed for the team following the completion of a training needs analysis.
- Greater use of chronologies as part of ongoing assessment and planning (linked in with the 5 practice priorities for all of children's services).
- The findings also reflected a need for greater clarity around threshold application and a more joined up approach between Early Help and Children's Social Care to ensure that there is

clear understanding of threshold application as it relates to disabled children. This is vital when initial discussions take place at point of referral in order to be able to establish proportionate response and intervention.

Link to the SEND improvement agenda

Disabled children and young people have a right to live full and happy childhoods and this premise is embedded within Walsall Transformation agenda. The need for multi-agency working is particularly relevant with this cohort of children, alongside the need to ensure that EHCP plans are co-produced with the child and family. It is imperative that professionals working with disabled children have access to development opportunities to enable better social work practice required to achieve good outcomes for disabled children and their families and that there is a move to better alignment of assessments contributing to the overall EHCP. Walsall SEND inspection conducted in 2019 concluded that this was an area for development and as such there is a wider SEND improvement plan now in place, to which the CYPDT are fully immersed.

Very few of our children open to the CYPDT will not have an Education and Health Care Plan (EHCP) owing to their level of need. Those that may not are likely to be new referrals that involve younger children and the assessment is still in process of for our older TCP cohort of young people whereby they have a diagnosis of Autism Spectrum Disorder (ASD) rather than a diagnosed learning need. In order to ensure that these plans are in place, the Team Manager often links in with the SEND Team so that we can be clear on progress and track that these children have up to date EHCP's on the system.

Update on Progress

Training and Practice Development

Staffing has been a significant issue within the team over the past 6 months with significant changes in the makeup of the team. We have had a number of experienced staff move on to pursue other projects which has left a gap in regards to the level of expertise within the team. A training needs analysis was completed by the Principle Social Worker which identified a package of training as part of the overall practice development plan. This aims to encompass key priority areas identified within the audit report around assessment, thresholds and direct work with children and their families.

Training that has been commissioned and delivered to date includes:

Assessment and care planning training

Cultural genogram workshops

Chronology workshops

Makaton Training

Motivational interviewing skills and family-led decision-making

Training identified but not yet completed includes that being commissioned by the Ann Craft Trust. This is a research based training programme that can offer bespoke training around safeguarding children with disabilities.

Areas covered include:

- Safeguarding and increased vulnerability
- Exploitation of children with disabilities
- Working with partner agencies and universal services
- Direct work and participation for children with disabilities

These training sessions were due to commence in September 2021 but owing to the changes in the team and the imminent arrival of new staff, this was postponed to allow for the new staff team to be in place so that they can fully benefit from the sessions.

In addition to the above, bitsize refresher sessions in regards to Deprivation of Liberty Training and Mental Capacity Act would continue to be offered as a rolling programme for all staff which will include practitioners from other services. Our practice and development hub has also sourced specific resources in regards to direct work tools which can be accessed by all staff across the services when working with children with disabilities.

Thresholds and Pathways

A threshold document for Walsall's Children and Young People's Disability Team has now been devised and in the final stages of consultation. This aims to outline the threshold application from early help to Tier 4 support. This document has been shared with legal and was presented to the SEND Local Area Improvement Board in July. It is in the final stages of consultation with parents and carers and will be ready for circulation by December 2021.

In order to support assessment and planning for children with disabilities, specific Independent Reviewing Officers and Conference Chairs have now been linked with the team to aid with consistency of practice and care planning. This aims to build a level of expertise in regards to the care needs of children with disabilities within our Safeguarding and Independent Reviewing Service.

We have also now reviewed our step up/step down pathways across the services in collaboration with partners in Early Help. In addition, the new front door merge between MASH and Early Help went live in August 2021 which means that all new referrals are screened across the partnership which we hope will assist in earlier and more timely identification of those in need.

Service Alignment and Commissioning

As outlined above, the review highlighted the need to develop better existing relationships with commissioners in relation to the provision of short breaks. A review of short breaks has been undertaken led by commissioning lead, David Demay and resources are reviewed regularly through our monthly complex care and short breaks panel.

The Children and Families Act 2014 places a duty on Local Authorities and their health partners to jointly commission services not only across Education, Health and Social Care but also across Children and Adults services. This is also part of the wider SEND improvement plan, which highlights the need for joint commissioning arrangements as part of our ongoing service development plan in CAYPDT. This will continue to be reviewed as part of the Local Area Improvement Board. The aim is to develop commissioning processes that support practice and ways of working which offers increased choice and control of services.

We have a small cohort of young people that we work closely with health professionals as part of the Transforming Care Partnership (TCP). In order to best support our young people with significant mental health issues, we have developed a viable and effective risk stratification register to ensure children and young people with learning disabilities receive the appropriate support at the right time and that referrals are not escalated into children's services/hospitals at crisis point. This register is reviewed monthly within a multi-agency forum which is chaired by health representatives. This continues to work well and our ability to support these young people through bespoke packages of support has allowed us to offer some creative and beneficial solutions to those in acute need. The Team manager also attends regional Autism Spectrum Disorder (ASD) and Learning Disability (LD) forums in order to keep abreast of local and regional initiatives.

Participation

As the review identified a greater need to ensure our children's views are captured and heard, work with the Children's Champion is now underway to look at how we can bring together a specific group of young people from the CAYPDT that would want to be involved in a variety of exercises as part of co-production, advocacy for non-verbal peers and quality assurance of future service delivery. These discussions are very much in its infancy but is a focus of our development plan moving forward.

Transitions

A large part of our development work is now focussed on ensuring that the transitions for our young people between children and adults services is as smooth as possible with clear and robust processes. In order to achieve this, a development team is in place and are formulating a pathway and practice guidance for both the children, their families and professionals. This work also includes consultation with children and young people and is part of the overall transformation plan and SEND review. A joint report between Adults and Childrens Social care as to the progress of this will be presented to this committee in January 2022.

What we will continue to do

As part of our continued journey, the CAYPDT continue to work together with children and young people and their parents/carers to ensure they are valued and able to fully contribute to developing their plans. By continuing with our training and development plan, we aim to foster a skilled workforce with the expertise, knowledge and understanding to ensure we fulfil our statutory requirements to our children with disabilities.

In order to ensure continued improvement, we will continue to work in partnership with agencies in order to ensure there is an accurate understanding of its effectiveness and use this to drive children and young people-focused improvements. Management oversight of practice, including scrutiny by senior managers, is used systematically to improve the quality of decisions. This is undertaken by the use of continued audits and performance management data.

We understand that the pandemic has had a significant impact on the lived experiences of disabled children and their families. Although COVID has affected all children, those with additional needs that rely on routines such as attending school have suffered significant disrupted. In some cases this has caused significant behavioural problems and has put increased strain upon their families. The temporary closure of both community short break facilities during lockdown and overnight provision meant that valuable support that they heavily rely upon was lost. Our team worked hard to ensure that our families continued to be supported as much as possible under the most difficult of circumstances. Feedback from parents and carers spoken to within the audits completed were positive and demonstrates the good working relationships that exists with our families.

Examples include:

‘having a social worker from disability team has made a big difference as they understand how difficult it is for us as a family’

‘She (social worker) is the only person who has ever helped us. I see her as part of our family. She is always available when I contact her’.

She (social worker) doesn’t understand the impact she’s had on my life - from when we first met, to how much she’s helped me and my mom regain happiness’.

Ofsted

Walsall Childrens Services has recently received a full ILACS inspection by Ofsted. As part of this, a number of staff from the Children and Young People’s Disability Team was interviewed and their work with our families was placed under scrutiny. Whilst the report is yet to be published, the feedback provided at the time was positive with certain members of the team congratulated for their ‘exceptional’ work with some of our children. In addition, the Inspectors provided us with positive feedback in regards to our work with families, particularly in regards to our direct work with some of

our children. This indicates that the training undertaken thus far and the increased focus on areas outlined within the review has started to evidence impact.