



**Rutland**  
County Council

## **Children with Disabilities Offer**

Version:	2.0
Version Date:	September 2019 Reviewed November 2022
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# Rutland County Council's Offer to Children and Young People with Special Educational Need and Disabilities (SEND) and to their families.

This document outlines the services which are available to support children and young people with Special Educational Need and/or Disabilities (SEND) and their families, including the thresholds for accessing services from the Children with Disabilities (CWD) social care service. The guidance outlines how the differing needs of children and young people with special educational needs and disabilities can be met, the types of services which are available and how these can be accessed.

## 1. Our Approach

Supporting children and young people with special educational needs and disabilities (SEND) is an integral part of Rutland County Council's early intervention offer and our services are guided by a range of legislation including.

- Chronically Sick and Disabled Persons Act (1970),
- Carers of Disabled Children's Act (2000),
- Children's Act 1989 (2004),
- Carers Equal Opportunities Act (2004),
- The Breaks for Carers of Disabled Children Regulations (2011),
- Children and Families Act (2014),
- The Special Educational Needs and Disability Regulations (2014),
- The Special Educational Needs (Personal Budgets) Regulations (2014),
- Working Together to Safeguard Children Guidance (2018).

We work closely with our partner agencies to provide joined up high quality support to children and their families where a child/young person is aged 0- 25 years and has a special educational need and/or disability and/or a long-term complex health condition.

1. A child or young person is disabled under the Equality Act (2010) if he or she has a physical or mental impairment that has a 'substantial' and 'long-term' adverse effect on his or her ability to do normal day to day activities.
2. A child or young person has Special Educational Need under the Children and Families Act (2014) if he or she has a learning difficulty or disability which calls for special educational provision to be made for him or her.

Rutland County Council works in partnership with our partners agencies, in health, education and the voluntary sector to offer a wide range of services to support the development of children and young people with SEND and to assist children and their families to lead lives which are as fulfilling as possible. Our services for children and young people with SEND in Rutland County Council are responsible for arranging support for children and young people with SEND and to support their carers. This includes:

- Assessing the needs of children and young people and their carers.
- Providing a social worker, early help worker or a SEND case officer as the need arises.

- Maintaining a register of children and young people with SEND.
- Providing short breaks for children and their families.
- Providing information about services which are available on our Local Offer website.
- Providing support for parent/carers of children with SEND.

Rutland County Council and its partners are committed to:

- Meeting the needs of children and young people with special education needs and disabilities and their families/carers needs.
- The active participation of children, young people, families, and carers in their intervention plan and in shaping our services.
- Ensuring stable, secure, safe, and effective care for all children at home, in school and in their community.
- Protecting children from harm and neglect.
- Promoting aspirational and realistic educational outcomes for children and young people.
- Planning and supporting young people to enjoy childhood and prepare for adulthood so that they can live as independently as possible and contribute as active citizens.

What we endeavour to do

- Through our integrated early help offer we will support children and young people with SEND and their families as soon as additional needs emerge including in the early years.
- We try to ensure through our Aiming High offer and our Early Help Assessments that the needs of a child and the family are met as soon as possible and at a low level to avoid unnecessary statutory intervention or repeat assessments for families.
- We involve parents and carers and children and young people in the design and evaluation of our services and hopefully ensure their satisfaction levels are high.
- We offer support to siblings and family members of children with SEND to ensure their needs are recognised and met and they receive relief from their caring duties.

What we want to do better

- We will make information and advice for families simple and easy to follow through our Local Offer site.
- We will ensure we keep children safe and continue to support families but minimise the disruption and number of meetings families need to attend and will integrate better our assessments and our review meetings.
- We will increase the personal choice children and young people and their families have by ensuring the child's voice is central in our plans and promoting the use of personalised budgets.
- We will collaborate with our colleagues in schools to identify emerging needs and support them to maintain, in the interests of a child their place in school and in their home.
- We will ensure value for money by providing a robust decision-making process to our packages of support including school and residential placement decisions and costs.

## 2. Assessing needs

We recognise that children and young people with SEND are children first and foremost and children with impairment second and therefore we assess children and young people, not on their levels of disability, rather on the impact their impairment has on their overall quality of life and that of their family.

Children with disabilities are regarded as Children in Need (CiN) under Section 17 of the Children Act (1989) and are therefore entitled to an assessment of their needs. For this purpose, children are assessed under the definition of disability as outlined within the Children Act (1989) – Section 17 (11).

Assessment provides an opportunity to gather information about a child and family to identify any additional support needs and to decide what help they may need. Where a statutory social care assessment has not taken place or prior to one being undertaken, there are a range of packages of care to meet the needs of a child or young person. In the first instance this may be done through [Early Help](#) using a Multi Agency Referral Form (MARF) however this does not replace our duty to complete a section 17 social care assessments where need indicates this is required.

### What does an Assessment involve?

An assessment involves gathering information about a child and family, so that a decision can be made about what help he or she may need. This includes asking a child or young person and their parents and carers for information about, for example, sleeping patterns, eating habits, how a child communicates, what activities they enjoy and whether there are any other children to look after in the family.

It is important that the starting point of an assessment focusses on the individual needs of a child, regardless of whether services exist to meet them, and that the assessing worker, where possible, communicates with a child to understand their wishes and feelings. The assessing worker may also want to speak to a child's health visitor, doctor, school or other relevant professional to help them get a full picture of their needs. To do so we will seek a child or young person's and/or parent/carers consent to share information that is in the interest of a child or young person.

Our assessments adopt a whole family approach, and we will consider the needs of parents and carers within this process, however a parent can ask for an individual carer's assessment. The carer's assessment focuses on the parents or carers and their needs and considers issues like the help a child needs and whether there is anyone else who helps, or if a parent is a lone carer. The carers assessment will consider a parent's well-being, including health and safety issues, and important commitments like relationships and employment. The aim of a carer's assessment is to give a parent or carer a chance to tell us about the things that could make looking after their child easier for them. This may result in getting services or direct payments to meet a parent or carers assessed needs.

After an assessment has been completed a decision will be made about the level of a child's needs and which services are required. Assessment may determine that there is no need for services, which could result in a child's case being closed with no further action taken. Assessment may find that the needs of the child or young person can be met through an early help intervention and are not at a child in need (CiN) level.

Under the current legal arrangements in Rutland County Council, children with disabilities are supported under Section 17 of the Children Act 1989, however there may be instances when children can receive support under Section 20 (4) or become a Child Looked After. Rutland County Council will be clear about the legal basis on which services are provided and will articulate this to children their parents and carers and to partner agencies and providers.

**The key question our Officers are expected to ask in deciding the approach to take is how to promote and safeguard the welfare of the child most effectively.**

See **Appendix A** Legal status of children with disabilities

### **3. Meeting children's needs and getting support**

The Council aims to meet the needs of all vulnerable children who may need help, however, as SEND and Social Care services have limited financial resources the assessment process helps to identify the child or young person's levels of needs and how these needs can best be met. This is known as thresholds to service.

Using thresholds helps to understand an individual child or young person's level of need and to what extent these needs require support enabling us to prioritise our resources and ensure that the children, young people, and families most in need get the support they require. If during assessment a need is not identified or if it is assessed as a need but does not meet the relevant threshold, Rutland County Council has no obligation to provide or arrange the service, but we will endeavour to meet the need, for example by signposting and contacting other agencies, local community, or voluntary groups for help.

Threshold criteria can differ from one authority to another, and this means if a family move to a different local authority area they may no longer qualify for the same level of help. Where parents/carers disagree with the assessment and applied threshold we will seek to resolve this together, however if not, then families are able to make a complaint through Rutland County Councils [Complaints Procedure](#) where the decision will be reviewed.

Our threshold for services span three levels as follows.

Children with SEND - Services Threshold Chart		
Level of Needs	Examples of need	Service Provision Examples
<p><b>LEVEL ONE: Universal intervention (Low Level needs)</b> – Children at this level may have a small number of low-level additional needs, such as speech and language delay, which can be met by a single agency, the family, community or access to a universal provision such as schools, GPs, Health Visitors, Children Centre etc.</p>	<ul style="list-style-type: none"> <li>• Low level needs which can be met by a single service.</li> <li>• Can achieve full potential and additional services will provide added value, speech and language support, nursery input.</li> <li>• Social Isolation.</li> <li>• Additional low level learning needs.</li> </ul>	<ul style="list-style-type: none"> <li>• Children’s Centre</li> <li>• Health Visitor.</li> <li>• School Nursing.</li> <li>• Community groups.</li> <li>• Nursery.</li> <li>• Early Years inclusion support.</li> <li>• GP provision.</li> <li>• Schools.</li> <li>• Support groups in the community.</li> <li>• SEN support.</li> <li>• Young people services.</li> </ul>
<p><b>LEVEL TWO: Early Help intervention (Additional Needs)</b> - Children likely to have a number of additional needs and are unlikely to achieve full potential without additional support above universal provision. Children likely to require a lead professional and coordinated support through a ‘Team around the family’ approach.</p>	<ul style="list-style-type: none"> <li>• Needs may require co-ordination of a number of services around a child, such as school, GP, or health visiting services</li> <li>• Requires additional support to access services, including education.</li> <li>• Additional support required to achieve full potential.</li> <li>• Need as identified by national assessment such as DLA/PIP – see <a href="#">short breaks</a>.</li> <li>• Requires additional support to engage in personal care.</li> <li>• General health problems which have a day-to-day impact on a child and family such as heart conditions, cerebral palsy.</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="#">Aiming High Short Breaks</a> Activities.</li> <li>• Aiming High Short Breaks Grant inc use of personal assistant.</li> <li>• Direct Payments.</li> <li>• 1 to 1 support from an Early Help support worker.</li> <li>• Parenting Support including groups.</li> <li>• Speech and Language Therapy, Occupational Therapy etc.</li> </ul>

<p><b>Level TWO: Targeted intervention (Children with complex health and disabilities) -</b> including profound impairments and life limiting conditions where services are already in place to meet these needs and as such there are no safeguarding concerns and a child does not require statutory help and protection.</p>	<ul style="list-style-type: none"> <li>• Children with Autistic Spectrum Disorder with severe learning disabilities and behaviour which is particularly challenging or whose behaviours is associated with other impairments.</li> <li>• Severe and challenging behaviours that impact on all areas of functioning.</li> <li>• Profound and life limiting conditions.</li> <li>• Child/Young person requires specialist input and provision.</li> <li>• Requires co-ordination of multiple services to ensure needs remain met.</li> <li>• The required level of parental care needed is in place, but parents need access to targeted and specialist services to support their</li> </ul>	<p>As per level 2 early help plus:</p> <ul style="list-style-type: none"> <li>• Enhanced Aiming High grant (Direct Payments) to support care, short breaks and respite with a higher level of funding provided above the basic Aiming High rate.</li> <li>• Family support through an Early Help support worker.</li> <li>• Special Education Provision including an Education, Health, and Care Plan.</li> <li>• Supported transport.</li> </ul>
<p><b>LEVEL THREE: Specialist (Complex Needs requiring Social Care) -</b> Children with complex health and disabilities including profound impairments and life limiting conditions where parents/carers are unable to and require additional support to provide care. Children who, due to their level of complex needs, have safeguarding needs and require protection.</p>	<ul style="list-style-type: none"> <li>• Severe and challenging behaviours that impact on all areas of functioning.</li> <li>• Profound and life limiting conditions.</li> <li>• Child/Young person requires specialist input and provision.</li> <li>• A high level of impact on sibling and parent/carers capacity to support child and subsequent risk of family breakdown.</li> <li>• Safeguarding needs requiring protection to prevent harm.</li> <li>• Child/young persons need, and behaviours pose a risk to self and others.</li> <li>• Child has autism spectrum disorder and likely to require physical constraint and behaviour is regularly harmful to self or others.</li> <li>• Child with significant medical needs requiring frequent medical support and treatment.</li> <li>• Level of care/parent care required to meet the needs cannot be provided without additional specialist provision.</li> </ul>	<ul style="list-style-type: none"> <li>• Social Care support through a CiN plan.</li> <li>• Respite from caring duties ranging from medium to long term short breaks, including overnight</li> <li>• Special Provision including residential care and education.</li> <li>• Supported transport.</li> <li>• Direct payments.</li> <li>• Specialist care packages under Chronically Sick and Disabled Persons Act.</li> <li>• Education, Health and Care Plan.</li> </ul>

See **Appendix B** for case examples.

#### **4. Children with Disabilities Service (Level Three: Social Care Provision)**

The Children with Disabilities Service sits in level three specialist provision and provides social worker support to those children, young people, and families with the most complex needs. In Rutland, this service sits within the Early Intervention, as known as Early Help, service of the County Council. All children and young people are assessed on an individual basis to account for their unique needs and where a statutory social care assessment determines that the needs of the child or young person fall within level three specialist support a child or young person is deemed a Child in Need (CiN) and is allocated a social worker.

The child or young person will have a CiN Plan and a suitable package of care which will help meet their needs, will be agreed with the child and parent/carers. The CiN plan will be reviewed regularly through a CiN review meeting which includes parents/carers, the child/young person and professionals working with a child and aims to monitor progress in all areas of development right through to adult independence.

Children, young people and families can receive support through a social worker if the following conditions apply.

1. The main need for services is a result of a child or young person's disabilities or intrinsic condition/s.  
and
2. These conditions have a substantial impact on the quality of life for the child, young person and their family.  
and
3. The needs of the child and family cannot be met by universal and targeted services on their own.

#### **5. Support for Children with an Education Health and Care Plan (EHCP)**

Special educational needs and disability (SEND) can have a significant impact on a child or young person's ability to learn. As such children and young people with more complex SEND may be eligible for an Education, Health, and Care Plan (EHCP).

EHCPs, as outlined within the SEND Code of Practice (2015), are for children and young people aged up to 25 years who need more support than can reasonably be provided from within the resources normally available to mainstream early years providers, schools and post-16 institutions. An EHCP will identify the education, health and social care needs of a child or young person and will set out the additional provision which is required to meet those needs. Developing an EHCP involves the direct participation of children, parents, and carers to co-produce a plan that identifies the most appropriate support required and secures the best possible outcomes for children.

A request for an EHC assessment can be made by anybody who feels an assessment may be necessary. Parents and carers can make a request for an assessment by completing the [assessment request](#) located [within our Local Offer website](#).



Where a child or young person has an Education, Health and Care Plan (EHCP), any support offered via our early help or social care services will be included and reviewed as part of this plan. We will not expect children or parent /carers to experience separate review meetings and separate plans.

## 6. Reviewing Support

Where services are already being provided, the assessment should be reviewed regularly and if circumstances have changed, a re-assessment or review can take place. A child's care plan will be reviewed regularly to make sure the support to a child remains appropriate. Once the social worker or practitioner (depending on level of need) has gathered enough information through the assessment or re assessment, a decision can be made about the support to meet a child's needs.

In Rutland a multi-agency panel, comprising Rutland County Council officers, health staff, and representatives from schools, approves the package of services that may be offered. A care plan should then be agreed between social care services and a child, young person, and family, to meet any identified needs.

## 7. Alternative Education Provision

A child may be at risk of missing their education entitlement because of a medical need or additional social and emotional need and or challenging behaviour that puts them at risk of exclusion. The Inclusion team at Rutland County Council will collaborate with schools to assess a child's needs and put in place a curriculum and programme of work to enable them to maintain their education. This may include additional support in school, support to manage a move to a new school, home tuition or access to an alternative learning programme.

## 8. Further Information

Further information about the support services available for children with SEND in Rutland can be found on our [Local Offer](#).

### Useful links

[SEND Local Offer](#)

[Aiming High Service](#)

[Early Help Strategy](#)

[SEND and Inclusion Strategy](#)

[Rutland Parent Carer Voice](#)

[SENDIASS Rutland \(Independent Support\)](#)

[Support for children, young people and families](#)

[Contact Early Help](#)

[Children Centre Services](#)

[Services for young people](#)

[Rutland County Councils Complaints Procedure](#)

## **Appendix A**

### **CHILDREN WITH DISABILITIES – LEGAL STATUS**

The SEND and Inclusion service have reviewed Rutland County Council's responsibility to safeguard and promote the welfare of children with special educational needs and disabilities, (SEND), and agreed the legal status of those children, specifically those in receipt of 38 week or 52-week education and care provision and those receiving short respite care, provided and funded by Rutland County Council.

Under the current legal arrangements in Rutland County Council, children with disabilities are supported under Section 17 of the Children Act 1989, however there may be instances when children can receive support under Section 20 (4) or become a Child Looked After. Therefore, the service wants to be clear about the legal basis on which services are provided and to be able to articulate this to partners, providers and parents.

**The key question our Officers are expected to ask in deciding the approach to take is how to promote and safeguard the welfare of the child most effectively.**

The young people this affects currently have complex and enduring needs. The driving factor for the decision on their level of support and their placement are different and individual to each child.

The service has concluded that the decision to determine the legal status of a child with SEND is complex and the service will need to give careful consideration to the needs of each individual child and family.

The service receives legal oversight on individual case decisions and thus mitigates the risk of legal challenge. The integrated nature of our structures and service provision as well as our size, lends itself to sensitive yet robust decision-making processes and there are layers of professional decision making and case management in place.

In summary, any decision to provide support or provision will be informed by an assessment of the child's needs and should take account of parenting capacity and wider family and environmental factors, the wishes and feelings of the child and his parents and the nature of the service to be provided. Therefore the level of monitoring and safeguards increases in line with the levels of need of the family and the levels of services required to meet these needs, hence the service may have in place in future children being supported through a Section 17 or a Section 20, (4) or a Child Looked After status and are satisfied to progress in this way.

## Appendix B – Case Examples

<p>Threshold Level/Questions for eligibility for children with disability services:</p> <ol style="list-style-type: none"> <li>1. The main need for services is a <b>result of</b> a child or young person’s disabilities or intrinsic condition/s.</li> </ol> <p>AND</p> <ol style="list-style-type: none"> <li>2. These conditions have a <b>substantial impact</b> on the quality of life for the child, young person and their family.</li> </ol> <p>AND</p> <ol style="list-style-type: none"> <li>3. The needs of the child and family <b>cannot be met by universal and targeted services</b> on their own.</li> </ol>	
<p><b>Anonymous - Case Screening using this Threshold Document:</b></p>	
<p><b>Needs</b></p>	<p><b>Analysis against above 3 steps:</b></p>
<p>Child A</p> <ul style="list-style-type: none"> <li>• Child has a diagnosis of downs syndrome and resulting learning difficulties which are lifelong.</li> <li>• Child has needs which impact on all areas of functioning but are not severe and challenging in comparison to others.</li> <li>• Attends special school and his educational needs are being met.</li> <li>• Parent support capacity in the home makes a difference and reduces risk and vulnerabilities for the child.</li> <li>• Requires support in adult life to be independent but as a child is in a well-supported network meaning his needs are met.</li> <li>• Child A is likely eligible for adult social care and although his needs are met currently preparing for adulthood will be a key support need.</li> </ul>	<ol style="list-style-type: none"> <li>1. Question 1: Yes – the main need for services arises from child’s disabilities.</li> <li>2. Question 2: No - The needs and condition of child A is lifelong and these impact on family life, however these are currently managed and parent capacity ensures child A’s needs are met thereby reducing the impact.</li> <li>3. Question 3: No - the needs of child A can be met within targeted services, such as enhanced short breaks and with this in place parents are able to manage and a social worker is not required.</li> </ol> <p>Based on the above and in screening against the criteria child A <b>would not be open to CWD social care</b>. However, it must be noted that the home life and parent involvement contribute to managing the needs, were support to be different child A would be eligible - as such cases are <u>kept under review</u> to ensure needs are met accordingly.</p>
<p>Child B</p> <ul style="list-style-type: none"> <li>• B has a diagnosis of autism spectrum disorder. Moderate level of associated needs – verbal can communicate and has held conversations with new social worker confidently, learns and aspires to attend college.</li> <li>• Child B can struggle in social situations, but this does not result in significant events such as harm to self or others.</li> <li>• Attends special school which is meeting needs.</li> </ul>	<ol style="list-style-type: none"> <li>1. Question 1: Yes – the main need for services arises from the Child B’s disabilities and diagnosis of ASD.</li> <li>2. Question 2: No – Whilst child B will have lifelong needs child B attends school, engages with their PA, is experiencing social situations and aspires to go to college. There does not appear to be significant events which impact on family more than would be expected than with a child who has ASD.</li> </ol>

<ul style="list-style-type: none"> <li>• Accesses short breaks service for support for child B and parents.</li> </ul>	<p>3. Question 3: No – the needs of child B can be met at a targeted intervention level.</p> <p>Based on the above and in screening against the criteria child B <b>would not be open to CWD social care.</b></p>
<p>Child C</p> <ul style="list-style-type: none"> <li>• Child C has a genetic disorder, and he is subsequently non mobile and requires 24-hour postural care. Child C is severely disabled.</li> <li>• Child C has other health issues including epilepsy.</li> <li>• Child C has severely limited communication but can be obtained through some sign and body signals.</li> <li>• Child C attends a special school.</li> <li>• There are no concerns regarding parenting. Full time parent at home and parents feel that they don't require additional support through a social worker.</li> <li>• There are no safeguarding concerns and child C's health needs are being met through full time care.</li> <li>• There are 2 siblings in the household who are well adjusted and access their own activities.</li> <li>• Family requires regular respite and has had a PA.</li> <li>• Child C will be Eligible for adult social care support.</li> <li>• Child C is eligible for services under CSDCA.</li> </ul>	<ol style="list-style-type: none"> <li>1. Question 1: Yes – the main need for services arises from child C's disabilities.</li> <li>2. Question 2: YES - The needs and condition of child C are severe and lifelong and impact on family life and quality of life.</li> <li>3. Question 3: No – Child C would be open to social care; however direct payments provide total choice and control over the support for child C's needs. Parent's capacity and willingness to meet child C's severe and complex needs mean there are no safeguarding concerns and child C's needs such as health are being met.</li> </ol> <p>Based on the above and in screening against the criteria child C <b>would not be open to CWD social care.</b> However, this is based on the parental capacity and use of targeted provision to meet his needs. Without this child C would require social care through a Social Worker and as such would be kept under review. Child C remains eligible for services under the CSDCA.</p>
<p>Child D</p> <ul style="list-style-type: none"> <li>• Child D has a diagnosis of ASD and a significant level of autistic needs which impact on all areas of his functioning.</li> <li>• Child D is nonverbal with very limited understanding.</li> <li>• Child D has no self-care and independence capacity which warrants constant supervision to avoid harm to self.</li> <li>• Child D has aggressive outbursts associated with autism and physically hurts self and others.</li> <li>• Child D is incontinent.</li> </ul>	<ol style="list-style-type: none"> <li>1. Question 1: Yes – the main need for services arises from child D's diagnosis of ASD.</li> <li>2. Question 2: YES - The needs and condition of child D are severe and lifelong and impact on family life and quality of life.</li> <li>3. Question 3: YES - Child D's needs have a significant impact on family life and require constant supervision at home and whilst at school to ensure child D and others remain safe. Parents require support to manage the needs of child D.</li> </ol>

<ul style="list-style-type: none"> <li>• Strong family networks and parents providing appropriate care however his needs are so high they have a significant impact on family life – requiring parental support and constant supervision.</li> </ul>	<p>Based on the above and in screening against the criteria child D <b>would be open to CWD social care.</b></p>
<p><b>Summary</b></p>	
<ul style="list-style-type: none"> <li>• The threshold document provides a clear format for assessing needs and understanding where children with disabilities require support i.e., determining if needs are associated with a disability and the impact of this.</li> <li>• The screening of cases identified that where children have severe and life limiting needs, they may still not require a social worker due to the family situational factors and capacity. In such situations parents/carers would be agreeing needs could be met at a targeted level.</li> <li>• The role of parents and family are a critical factor in determining point 3 of the screening when assessing if a child meets threshold.</li> </ul>	