

5.1 Agencies employ creative and imaginative approaches including the use of new technologies and multimedia or non-verbal communication to provide information and to ensure that the views of **disabled children** and families are heard.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
3.6	3.3	3.2	No responses

5.2 Disabled children and young people have equity of access to play and leisure services, including holiday play schemes, after school clubs and pre-school provision, with appropriate support if necessary.

5.3 Each LHB/LA area has a **Child Development Team** to facilitate multi-agency assessments and holistic care for **disabled children** and their families

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
4.2	3.9	3.8	No responses

5.3 Each LHB/LA area has a Child Development Team to facilitate multi agency assessments and holistic care for disabled children and their families

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
5	4.2	4.2	No responses

5.4 A hand held record is provided for all disabled children with complex needs that complements the Personal Child Health Record, in line with Welsh Assembly Government guidance to be issued in the Autumn of 2005.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
6	6	5.3	4.9

5.5 Disabled children with assessed complex needs have an individual multi-agency care plan, consistent with the Framework for the Assessment of Children in Need and their Families and the Education Act 1996, which includes arrangements for dealing with emergency situations.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
5.1	5	4.9	5



5.6 Parents/carers of disabled children are offered an assessment under the Carers and Disabled Children Act 2000 as required by the Framework for Assessment of Children in Need and their Families

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
6	6	5.8	5

5.7 Service providers jointly agree and provide a **key worker** service for families with disabled children with **complex needs**. Where appropriate and agreed, this could be the parent.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
3.3	3.2	3	No responses

Access to Services

5.8 Every LHB/ LA area has joint commissioning arrangements (building on the provisions of the Children Act 2004 and draft guidance) which support disabled children being maintained within their local community.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
5	5	4.7	4.5

5.9 Disabled children with complex health needs are offered, before statutory school age, ophthalmic and auditory examinations to determine whether these impairments are present.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
5.4	5	5	No responses

5.10 Disabled children and their families are offered early contact (before their primary dentition commences eruption between 8 and 13 months of age) with an appropriate member of the dental team for provision of preventative advice and information.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
4	3.9	3.6	No responses

5.11 Children with a **learning disability** have access to a network of appropriately skilled professionals, that can respond to both their mental health needs and learning disability, according to their assessed needs.

2008 - 2009	2007 - 2008	2006- 2007	2005 - 2006
3.3	2.9	2.9	No responses

5.12 If it becomes necessary to place a disabled child or young person out of area, prior to the child's placement, both receiving and home agencies agree placement arrangements, ensuring that the necessary services and funding arrangements have been agreed.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
6	5.3	4.9	4.9

5.13 Disabled children, young people and their families have access to services to meet their assessed needs, including **short break** and other services.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
4	3.4	3.2	No responses

5.14 There are **integrated community equipment services** that supply equipment to **disabled children** and young people, managed by a designated lead agency. The lead agency monitors that the following criteria are met:

- Assessment for equipment for **disabled children** is carried out by the most appropriate person in the multidisciplinary team within 4 weeks of referral;
- Equipment is supplied within 6 weeks of assessment according to jointly agreed eligibility criteria for **essential equipment**;
- The equipment store has dedicated resources for children which are distinct from adult resources;
- A supply of continence equipment is available to meet the assessed needs of children and young people;
- Local **emergency supplies** are immediately available;
- There are effective mechanisms in place for the retrieval of unwanted equipment. This includes databases that record where equipment is, when it is due for servicing, cleaning or requires repair;
- The child's equipment requirements are reviewed at least annually in accordance with individual assessed needs.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
3.9	3.4	3	No responses

5.15 Disabled children are able to use the equipment they need in all the places where they spend time e.g. school, home, leisure settings and during **short break care**.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
3.5	3.3	3	No responses

5.16 There are facilities for **personal care** available in all locations in hospitals and other health, education and social care settings. Adapted toileting and **personal care** facilities are available in health, education and social care locations e.g. toilet chairs and safety straps that meet nationally set standards.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
4	3.7	3.3	No responses

5.17 There are agreed protocols and standards for wheelchair/ specialist seating services that include:

- Providing a comprehensive service which meets particular needs of **disabled children**;
- Provision of clear information for professionals, parents, carers, children and young people regarding access to seating and wheelchair services;
- A single referral process which encompasses services provided through the Artificial Limb and Appliance Services and those provided by **rehabilitation engineering**;
- Assessment within 6 weeks of the referral being received;
- Provision of a wheelchair or equipment within 8 weeks of assessment;
- Quality assurance systems;
- Repair and maintenance procedures;
- Review of the child's needs as a minimum on an annual basis in accordance with individual assessed needs.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
3.5	3.3	2.9	No responses

5.18 There are agreed multi-agency protocols and standards for the provision of **communication aids/tools/systems** as follows:

- When a child is judged to have special communication needs by a professional, they are referred for urgent speech and language therapy assessment;
- When referrals are made to speech and language therapy for **communication aids/tools/systems**, the assessment is commenced within 3 months of referral and the device is provided within 3 months of completion of the assessment; There is joint commissioning of **communication aids/tools/systems** agreed between education, social services and the NHS trust/LHB/HCW, enabling the communication device to be used both in school and at home

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
4	3.3	2.9	No responses

5.19 Where families require housing adaptations or assistance in moving home, clear information is given to all families about local authority policy and assistance is provided in the completion of forms for those families that require it.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
6	6	6	6

5.20 Local authorities and registered social landlords have up to date registers of adapted properties to assist with transfer requests to appropriate adapted housing without undue delay.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
4	4	4	4

5.21 Information is made available to families of disabled children regarding entitlement to Disabled Facilities Grants.

2008 -2009	2007 - 2008	2006 - 2007	2005 - 2006
6	6	6	6

Quality of Services

5.22 Following diagnosis or identification of additional needs, families receive: time to ask questions, and continuing opportunities to participate, in an or diagnosis, written in a language that is easily understood by parents; The opportunity for a follow-up contact 7-14 days later by an appropriately trained professional to discuss any queries; Contact details to enable the family to contact a professional for advice when they need it; Contact details for local and national support organisations, if appropriate.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
5.5	5.5	5.3	5

5.23 Children with **complex healthcare needs** who attend mainstream or **special schools** have access to school nurses, who are employed by the NHS. Children in special schools have access to nurses at all times when children are on the premises and these school nurses also act as an expert resource for **disabled children** in mainstream schools.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4.9	4.3	3.4	No responses

5.24 Children and young people who need **palliative care**, whether in the chronic or terminal phase, are supported at home, whenever possible. Alternative or additional sources of support, for example, provided by **children's hospices**, are available for families who require them.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4.3	4.2	4	No responses

5.25 The multidisciplinary team involve families as active partners in setting goals for their children and agree the methods by which these can be achieved and the most appropriate location.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
6	6	5	4.9

5.26 Children and young people who require therapy services receive an assessment within 12 weeks of referral, with the appropriate resources commissioned. Waiting times are monitored and action taken when target waiting times have not been met.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4	4	3.5	No responses

5.27 Disabled children and young people are offered annual oral health assessments and preventative advice by professionals with appropriate expertise, and in settings appropriate to each child e.g. using mobile services at home or in school, as well as care in hospital or community practices.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
3	3	3	No responses

5.28 There are clear protocols on the early referral to education for children below the age of 2 years who have severe, long-term and **complex needs**. Health, social services and education jointly agree on each child's assessed needs and how those will be met, so that no child is delayed from starting school.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4.4	4	3.7	No responses

5.29 A **school health care plan** is designed for every child with **complex needs** to identify the child's needs and how they will be met in the school setting.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
5	5	5	No responses

5.30 There are agreed joint education and training programmes for professionals who work with **disabled children** (in addition to the core training referred to in Chapter 2), which includes:

- Training on the social model of disability;
- Information about the health conditions or impairments including sensory impairments;
- The social, emotional and material needs of families with a disabled child;
- Communication with children who do not use speech or who find interaction difficult;
- Management of **challenging behaviour**, including restraint training;
- *Disability Discrimination Act 1995*³⁹ and inclusion policies;
- The *Special Education Needs Code of Practice for Wales*⁴⁰;
- Legal and professional indemnity of staff providing health/nursing care procedures;
- Manual handling training.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
3.3	3.2	3	No responses

5.31 Parents/ carers and other non-professionals are offered appropriate and on-going training to assist them in meeting the needs of their **disabled child**. As a minimum this includes:

- Appropriate training in the use of equipment. The arrangement of this training and support is coordinated by the person ordering the equipment in collaboration with the supplier;
- Manual handling training;
- Specialist parenting skills and understanding child development;
- Management of **challenging behaviour** if needed;
- Communication with children who do not use speech, if needed;
- Specialist administration of medication if needed.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4	4	3.5	No responses

Transitions

5.32 There is an inter-organisation system to identify children who will require transition into adult services in the year before their 14th birthday (in year 8). This informs the strategic planning for all organisations.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4	4	3.6	No responses

5.33 A **key transition worker** is appointed to all disabled young people at age 14. It is their responsibility to ensure that the young people, their families and all relevant agencies are appropriately involved in the planning process. The **key transition worker** co-ordinates the planning and delivery of services before, during and after the process of transition and will continue to monitor and have contact with the young person until the age of 25 years.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
3.7	3.1	3	No responses

5.34 Information about how to gain access to services and facilities is available to disabled young people in the local community including information about:

- Employment;
- Housing;
- Training;
- Leisure;
- Educational opportunities;
- Access to independent living;
- The process of transition to adult services within the local authority and health service;
- Support to maximise the use of Direct Payments to 16 & 17 year olds;
- Health promotion;
- Support groups and voluntary organisations.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4	3.7	3.3	No responses

5.35 There is one **joint organisations transition plan** produced for each disabled young person which forms the basis of the **Unified Assessment** within adult services and specifies arrangements for continuing support and services, including:

- Personal assistance;
- Housing requirements (including supported housing);
- Education, training and lifelong learning, including opportunities for work experience;
- Careers including specialist advice;
- Employment;
- Social relationships including leisure activities;
- Short breaks;
- Practical and other skills;
- Health needs including genetic counselling and sexual health;
- Continuing care;
- Appropriate transport;
- Communication needs;
- Domiciliary and day care;
- Financial support (including benefits and direct payments);
- Details of financial arrangements for specialist services required to address particular needs.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
3.5	3.3	2.8	No responses

5.36 The **joint organisations transition plan** is reviewed at least annually or, in the case of young people who are looked after, every six months in accordance with statutory regulations *Children (Leaving Care) Act 2000*. During the year before their 18th birthday the plan is reviewed each term.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
4.2	3.4	3	No responses

5.37 Aggregated information derived from **joint organisations transition plans** is sent to the area's Young People's Framework Partnerships to inform strategic planning.

2008 - 2009	2007 - 2008	2006 - 2007	2005 - 2006
2.7	2.3	2.2	No responses