**Call Off Process and Paperwork for Short Breaks Provider Panel**

**Call Off Request**

**Individual Service Request**

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| In respect of Lot  |  | Geographical Delivery Area | Ferryhill |
| Date of Request | 08.09.2020 | Response Deadline | As soon as possible |
| Proposed commencement date | ASAP | Proposed end date | Ongoing |
| Child Initials and Party ID | SR 693079 | Gender | Female |
| D.O.B. | 13.07.2013 | Social Worker | Frankie Wilson |
| Ethnicity |  | Responsible Team | Children’s Disabilities 0-18 Years |

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| **Term Time** | **School Holidays** |
| Number of identified hours for Short break | 0 hours | Frequency (monthly)Term Time | Weekly | Number of identified hours for Short break | 8 | Frequency (weekly holiday time | Weekly |
| Please state if school holiday provision is in addition to term time provision or instead of |

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| 1:1 staffing |  | 2:1 staffing | X |
| Transport required |  | Adapted Vehicle required |  |

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| Over-view of young person/ family  | Please see below. |
| Family/ home situation | SR is a 7 year old girl who lives in a long-term fostering placement. She has strong attachments to her foster family, although she has taken a long time to trust and build these relationships. This is due to the harm she suffered in the care of her birth family and the trauma this has caused her which impacts upon her daily.When SR first entered Local Authority care she was a frightened little girl who could not look at her carers and got incredibly distressed around nappy changes and going in the bath; she would try to cover herself with a doll’s blanket. She also required an urgent operation to her heart as she had a hole in her heart and birth parents had neglected this health need.Over the last 5 years of being in foster care, SR has made huge improvements. However, she remains a little girl who is clearly traumatised by her experiences as a baby. SR’s foster carers require a regular break from their caring role as looking after SR is tiring and stressful for them.  |
| Needs of young person | SR has complex needs. She has global developmental delay, an issue with her thyroid, sight and hearing problems and significant emotional difficulties. She has had multiple health investigations to identify an organic reason for her health and emotional difficulties but to date no medical condition has been found.SR has no awareness of danger and requires constant supervision in order to keep her safe. When SR is upset, frustrated or distressed, her behaviour becomes very challenging and repetitive – she will continually nip and pull at the foster carers’ daughter, shriek, scream, and refuse to follow instructions no matter how many times she is told. She has also been known to damage belongings such as laptops. When SR is anxious, she has been known to pick at her own skin and zone out of everything that is going on around her. She requires support with all aspects of her personal care. She is also is non-verbal and communicates by using Makaton and making sounds which communicate how she is feeling (to those who know her well and are familiar with the sounds). SR needs outreach workers who are patient and understanding of her traumatic past and the impact this has on her behaviour. SR will need consistency of outreach workers due to her difficulty forming secure attachments to others. Outreach workers will need to be introduced carefully – they will need to meet SR in her home environment to begin building a relationship with her before taking her out in the community. |
| Hobbies and interests | She loves being outside and playing with sand and water. She loves her iPad and uses this to watch Pepper Pig and Paw Patrol for short periods of time. She also likes the family dog but needs to be carefully supervised around animals as she will sometimes try and nip them or pull at them. SR plays with age appropriate toys such as building bricks and cars for short periods of time but she is easily distracted and moves onto the next activity very quickly. She does not tend to spend any more than 5/10 minutes on one activity. SR enjoys spending time in environments where she feels safe e.g. with her foster family and at school.  |

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| **Over-arching Outcome** |
| *Improvement in family health at case closure / de-escalation.* |  | *Everybody has the opportunity to have the best health and wellbeing throughout their life, and can access support and information to help them manage their care needs.* |  |
| *Improvement and management of a mental health condition at case closure / de-escalation.* |  | *Everyone enjoys physical activity and feels secure.* |  |
| *Parents and children have improved family relationships at case closure or de-escalation.* |  | *People are protected as far as possible from avoidable harm, disease and injuries.* |  |
| *Improvement in parental wellbeing at case closure or de-escalation.* |  | *People are supported to plan ahead and have the freedom to manage risks the way that they wish.* |  |
| *Improvement in child’s development including physical social and emotional development at case closure / de-escalation.* |  | *People are able to find employment when they want, maintain a family and social life and contribute to community life, and avoid loneliness or isolation.* |  |
|  |  | *When people develop care needs, the support they receive takes place in the most appropriate setting and enables them to regain their independence.* |  |
|  |  | *Carers can balance their caring roles and maintain their desired quality of life.* |  |

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| **Individual Outcomes to be achieved**  | **Provider Response – how will these outcomes will be achieved?** |
| To implement routines and boundaries that enable SR to develop and maintain appropriate behaviours.  |  |
| For SR to experience a variety of structured and directed community-based activities. |  |
| To promote SR’s independence, communication skills, practical skills and social development.  |  |

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| **Type of short breaks which will be delivered to achieve outcomes****Provider to tick as many as appropriate** Half day = 3hours Full day = 6hours |
| [ ]  Specialist COS from the home 1:1 sessions blocks below 3 hours | [ ]  Specialist COS from the home (1:1) session blocks above 3 hours | [ ]  Specialist COS from Providers base (1:1) | [ ]  Buddy Services from the home (1:1) session blocks of below 3 hours | [ ]  Buddy Services from the home (1:1) session blocks of 3 hours or above  |
| [ ]  Specialist COS (2:1) session blocks below 3 hours | Specialist COS (2:1) session blocks of 3 hours and above | [ ]  Specialist COS (2:1) from Providers base | [ ]  Group based Breaks Standard HALF DAY  | [ ]  Group based Breaks Standard FULL DAY  |
| [ ]  Group based Breaks Specialist Support HALF DAY  | [ ]  Group based Breaks Specialist Support FULL DAY  | [ ]  Group based Breaks 1:1 Support HALF DAY  | [ ]  Group based Breaks 1:1 Support FULL DAY | [ ]  Group based Breaks Specialist Support HOURLY |
| [ ]  Family Activities Hourly Rate | [ ]  Family Activities HALF DAY | [ ]  Family Activities FULL DAY | [ ]  Transport - Adapted Vehicle HALF DAY[ ]  Transport Adapted Vehicle FULL DAY | [ ]  Transport Mileage |
| Please provide any additional comments in relation to the proposed service(s): |

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| Will there be any additional funding required from families to take part in the short breaks e.g. entrance fees etc. If yes, please give details. |  |
|  | Individual requirements*(to be completed by DCC)* |  | Can these needs be met and how?*(to be completed by the Provider)* |
| Communication needs (e.g. BSL, Makaton, PECS etc) | SR is non-verbal. She will indicate her wishes and feelings by making noises or signing using Makaton. SR needs carers who are familiar with her needs and behaviours to pre-empt and understand her communication methods. | [ ]  Y [ ]  N |  |
| Physical care needs  |  | [ ]  Y [ ]  N |  |
| Specialist equipment required |  | [ ]  Y [ ]  N |  |
| Medication Needs |  | [ ]  Y [ ]  N |  |
| Named child training required  |  | [ ]  Y [ ]  N |  |
| Other issues (e.g. aggression, risk, substance misuse etc) | SR can display challenging behaviours as outlined above. These behaviours have been known to last for full days at a time.  | [ ]  Y [ ]  N |  |

**We agree to provide the services detailed above under the contract Provider Panel for Short Breaks to meet assessed need (Pro Contract Ref DN264087)**

Signed by Provider \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed by Durham County Council \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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