**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 | Durham |
| Date of Request | 29/10/20 | Response Deadline |  |
| Proposed commencement date | As soon as possible | Proposed end date | To be reviewed in 6 months from commencement |
| Child Initials and Party ID | HH551351 | Gender | male |
| D.O.B. | 24-Oct-2005 | Social Worker | Michael Cleland |
| Ethnicity | British | Responsible Team | Families First Aycliffe |

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| **Term Time** | **School Holidays** |
| Number of identified hours for Short break | 4 hours | Frequency (weekly, bi-weekly, monthly) | weekly | Number of identified hours for Short break | 12 | Frequency (weekly, bi-weekly, monthly) | weekly |
| Please state if school holiday provision is in addition to term time provision or instead of. |

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

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| Over-view of young person/ family  | He Is a very isolated teenager, has no friends his own age and spends a lot of time in his own room on the Internet. He has no contact with his father, his siblings and most of it of his family. He Is a very intelligent your man but lacks the basic social skills and can act very inappropriate. Most of his time is spent on his own or with his mother which can create a stressful environment. |
| Family/ home situation | He lives at home with his mother and doesn’t often see anyone else apart from at school, before covid he was in residential at school mon-fri which was he enjoyed and seemed to help him and also give his mother the respite needed.His mother is on her own with him with very limited and irregular support and respite. She was working full time up until residential closed and is currently unable to work due to the current climate and home situation. |
| Needs of young person | He is diagnosed autistic and hearing impaired so may need things explaining in a clear and visual way. He can get very angry and frustrated easily so needs patience and understanding and is very particular and strong willed so things need to flexible and sometimes introduced slowly.He also needs lots of motivation to do things sometimes. |
| Hobbies and interests | He doesn’t have many hobbies but if motivated he could have. Hes interested in computers, gaming and electronics, cars, vehicles, go karting, quad bikes. He enjoys bike riding, scooters, extreme sports and boxing. |

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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-esnt 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?** |
| Increased socialisation for HH and to reduce his isolation and improve his mental health |  |
| For HH to engage in activities he enjoys and to learn new skills |  |
| To provide respite for his mother and to help improve her mental welbeing |  |
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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) | [x]  Buddy Services from the home (1:1) session blocks of below 3 hours | [x]  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 | [x]  Group based Breaks Standard HALF DAY  | [x]  Group based Breaks Standard FULL DAY  |
| [ ]  Group based Breaks Specialist Support HALF DAY  | [ ]  Group based Breaks Specialist Support FULL DAY  | [x]  Group based Breaks 1:1 Support HALF DAY  | [x]  Group based Breaks 1:1 Support FULL DAY | [x]  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) |  | [ ]  Y [x]  N |  |
| Physical care needs  |  | [ ]  Y [x]  N |  |
| Specialist equipment required |  | [ ]  Y [x]  N |  |
| Medication Needs | HH takes risperidone first thing in the morning and last thing at night | [ ]  Y [x]  N |  |
| Named child training required  |  | [ ]  Y [x]  N |  |
| Other issues (e.g. aggression, risk, substance misuse etc) |  | [x]  Y [ ]  N | HH has been known to become frustrated in his house and smash items to relieve this. HH has never used physical violence towards anybody |

**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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

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