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**ITT Schedule 1 Specification – Appendix 1 Summary of Needs**

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| **ID Number** | 406456 |
| **Start Date** | As soon as possible |
| **Please add comments/details if a transition period is required.**  |  |
| **Predicted end date/ length of stay (if not permanent)** | TBC |
| **Actual end date/ length of stay (if known)** |  |
| **Type of Service** **Please note that the Council terms and conditions applicable will be attached to this Quotation.** | **Day Opportunities** |

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| **Details of the Social Worker** |
| **Name of Social Worker** | **Linda Neary** |
| **Telephone Number** | **01325 406143** |
| **Mobile Telephone Number** |  |
| **E-mail Address** | **Linda.neary@darlington.gov.uk** |

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| **Details of the Placement Officer**  |
| **Name**  |  |
| **Telephone Number** |  |
| **E-mail Address** |  |

**PEN PICTURE SUMMARY OF NEEDS AND OUTCOMES**

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| **Summary of Requirement**  | A short break service to provide six hours per week support with 1-1 adult care, within a home from home environment.It is hoped that the child will have 6 hours for one day on Saturday or Sunday. No more than 30 miles from Darlington. A provider is required to provide opportunities during each visit, for the child to access the community and appropriate structured social activities outside of the setting.Support from carers experienced in working with young children with ASD and significant developmental delay. |
| **Detail assessed needs to be met by the Services**  | Sensory resources, activities and strategies which cater for the child’s sensory needs.Regular movement breaks throughout the day to ensure the child is ready to engage.Low sensory stimulus environment to prevent sensory overload allowing the child to feel calm and able to engage.Toileting activities to take place in the bathroom/WC to allow the child to feel more comfortable in that environment and for the child to relate toilet activities to the bathroom.For the child to be encouraged to participate in play and have some independence away from the family.Adult involvement in the child’s play to imitate what the child does, using intensive interaction strategies and then to extend the activity in various small steps. (Including hand over hand support, providing opportunities for the child to imitate). |
| **Detail outcomes**  | For the child to become increasingly less likely to explore objects by putting them in their mouth (PICA) so that the child will remain safe.For the child to enjoy their learning which will give them a sense of achievement.For the child to have learning opportunities in line with their ability.For the child to be more readily open to follow direction, supported by visual cues and resources.For the child to express emotions and accept support strategies when frustrated and needing help. For the child to make progress with their toileting, whereby they are able to request a nappy to be changed when soiled.For the child to develop relationships with care givers for a positive sense of wellbeing.For the child to be able to show awareness of those in their environment and to gradually increase their ability to engage in brief interactions.For the child to be encouraged by those who care for them, to build on their relationships at home and within the community.For the child to have positive relationships and enjoy some independence. For the child to access appropriate structured activities in line with their developmental level, considering the child's motivators at a gradual pace, to prevent them from being socially isolated, particularly focusing on their early social skills. For the child to extend the time they are able to have a shared focus with an adult in their play. For the child to be able to consistently communicate their wants and needs across a range of environments and situations.For the child to be encouraged to participate in self-care activities.For the child to remain safe when inside and outside of the setting and to develop an awareness of their own safety. |
| **Anonymised Information specific to the individual placement e.g. any staffing requirements/training/DOLS considerations/locality etc** | The child has a diagnosis of ASD, PICA, severe learning disability, speech delay - pre verbal, sensory processing difficulties, intermittent glue ear, 4q22.1 micro deletion chromosome abnormality, Bicuspid aortic valve heart defect, Ventricular Septal Defect – holes in the heart, Kidney disease, hypermobility.  PICA is a psychological disorder which is characterised by an appetite or a compulsion to eat non-food substances that are largely non-nutritive.The child is doubly incontinent.The child attends primary school and has an EHCP in place.  |