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CRITERIA ASSESSMENT AND/OR SUPPORT FROM FOR WHOLE LIFE DISABILITY TEAMS (including Transfer Requests)

Citizens may be eligible for social care services from Nottingham City Council under the Children Act and Care Act if their needs are sufficient to meet the eligibility threshold.

If a child or adult has a Permanent & Substantial Disability, they will be eligible to receive any identified support from The Whole Life Disability Service, where this was diagnosed or identified at birth or within childhood.

An assessment of need is required for any child or adult with an appearance of need for care and support, regardless of their financial situation.

For Children/family

A child may have eligible needs if:

The disabled child requires:

- Substantial assistance to spend time with their friends, peer groups/social activities, that cannot be met by universal or targeted services.
- Substantial assistance to take part in leisure activities, beyond that can be met via universal/targeted services.
- Assistance developing independence, choice and control according to their age and development and these needs cannot be met via access to universal and targeted services.
- The parent has a need for a short break that cannot be met by their child accessing universal or targeted services or informal support.
- The child has a need for aids and adaptations to support activities of daily living and enable safe care.
- Or the disabled child is at risk of significant harm or family breakdown
- Or the disabled child is Looked After.

For Adults

an adult will have eligible needs if they meet all of the following:

- they have care and support needs as a result of a physical or mental condition;
- because of those needs, they cannot achieve two or more of the outcomes specified;
- as a result, there is a significant impact on their wellbeing.

The outcomes are specified in the regulations, and include a citizen's day-to-day outcomes such as dressing, managing and maintaining nutrition, making use of necessary facilities or services in the local community including public transport and recreational facilities or services, maintaining personal relationships, working etc.



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Whole Life Disability Criteria:

- The person is a child or adult who becomes or became disabled at birth or during childhood and this is enduring.
- If they have a physical or learning **disability** that has a '**substantial**' and 'long-term' negative effect on their ability to do normal daily activities.
- When they are an adult and have previously been known to the Disabled Children's Team or have come through the Whole Life Disability Team during childhood.
- They have a diagnosis of Learning Disability or Intellectual and Developmental Disability during their childhood. (Up to the age of 18).
- If the case is already open to another children or adults team, the Primary Support Need must relate directly to a learning or physical disability acquired in childhood.

They **would not** meet the criteria if:

- *The person is identified as having a learning or physical disability and has had no services or support because of those needs, but their primary need is now because of another condition such as dementia, substance misuse, or sudden severe physical injury etc.*
- Where the person is not known to Whole Life Disability Team and there is a dispute; any safeguarding or assessment will remain with Safeguarding or Duty teams whilst the dispute is resolved.



Appendix 2 GUIDANCE

Whole Life Disability Teams

The Whole Life Disability Teams are composed of social workers, community care officers, disabled children support workers, occupational therapists, and other skilled social care staff, who are able to work with disabled children, young people, adults and their families or carers.

Both teams are co-located with Community Learning Disability Nursing and Occupational Therapy who understand the needs of people with disabilities who have long-term complex health and social care needs.

The teams are able to draw upon other specialists from within the Nottinghamshire Community Healthcare Trust's Intellectual and Developmental Disability Directorate such as Psychiatry, Psychology, Physiotherapy, Speech and Language Therapy etc., and maintain wider links with both children's and adult's health and education colleagues.

Advice and consultation is available from the team to assist in good decision-making.

Age of onset in childhood

In the majority of cases there will be documented evidence that a citizen will have an **permanent** and **substantial** disability from childhood and it is essential that this is explored before a referral or transfer request to the Whole Life Disability Team. Where there is no such evidence, e.g., the citizen is newly resident in Nottingham or carers/families have provided all care/support previously, and the referrer believes the citizen does have a permanent and substantial disability, a screening visit may be required, but this will be determined by the Whole Life Disability Team on a case by case basis following its own initial enquiries.

A joint visit by the team involved and WLD may be needed and the existing team would retain primary responsibility until a determination has been made.

Defining a Learning Disability or Intellectual and Developmental Disability

A learning disability is not a disease and is not an illness; it is not acquired in adulthood. A learning disability will usually be evident from childhood, and in many cases the cause of the learning disability may not be clear. In other cases, genetics, chromosomal abnormalities or environmental factors may be cited as the cause.

All 3 of the following elements must be met for a person to be considered to have a learning disability:-

- Significant impairment of intellectual functioning
- Significant impairment of adaptive/social functioning
- Age of onset in childhood



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It is also worth noting that each learning disability condition or syndrome has different symptoms and behaviours associated with it, and the way in which these manifest themselves can and do depend on the individual.

Once labelled it is extremely difficult to lose that label so it is essential that before stating that someone has a learning disability that all is done to ensure that the three particular areas – Intellectual Impairment, Adaptive/Social Dysfunction and Early Onset are considered in as much depth as possible. It is also important to remember that people whose functioning is close to the borderline may meet the criteria for a diagnosis of learning disability at some time in their life and not at another.

Adaptive/Social Dysfunction

This can be very difficult to categorise or quantify precisely, owing to the range of social, self-care, functions (communication home living, social skills, use of community resources, self-direction, health and safety, literacy and numeracy, leisure, work) and person's social context. However there is a standardised informant based questionnaire (*the Adaptive Behaviour Assessment System*), which scores in the same way as IQ tests. Sometimes an Occupational Therapy assessment may provide additional information.

Gender, sexual orientation, religion, age and culture are all important aspects that are taken into consideration when measuring social impairment.

Clinical psychologists are available for advice on interpreting IQ or ABAS scores.

Aspergers/Autism/ADHD

Autism is a broad spectrum and many diagnosed on the spectrum i.e., with Aspergers, would not have needs for a specialist Whole Life Disability service, but may need support periodically at vulnerable periods in their lives. However, it is important individual decisions are need-based on impact of their conduct and capacity to raise a case within Whole Life Disability should not influence a decision.

Specialist adult health services use the diagnosis of Asperger Syndrome only for people whose intellectual functioning is unimpaired, but this is not necessarily the case for paediatric services, so a young person with diagnosis of Asperger's Syndrome may require further assessment as to whether they meet the criteria for Nottingham City Asperger Service or the Learning Disability Service. Attention Deficit Hyperactive Disorder (ADHD) does not necessarily mean a citizen has a major impairment of function or has serious behaviour issues, or they may have a serious impairment of function but no intellectual impairment.

Neurological Conditions

Many Neurological conditions do not manifest themselves until adulthood and would be excluded from access to a WLD Team. It is where the Neurological condition adversely affects the person as a child and there is clear evidence of this that someone with a neurological condition would be included.



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Access to Whole Life Disability Team

A referral or transfer request to the Whole Life Disability Team will depend on diagnosis or a specialist professional view, having best evidence. Every effort should be made to access children's services' information to help in decision-making.

Things to consider:

- has there been a clear diagnosis since early childhood?
- has the person been to a specialist school or were they statemented at an early point of school life or have an Education, Health & Care Plan or received substantial support in a mainstream school setting?

If the child/adult has been through school without substantial support all their lives, is identified as having learning difficulties and have behavioural issues they are less likely to meet the criteria for Whole Life Disability social care involvement, but may be eligible for social care services from a social care assessment team. However, it may be necessary to request a formal assessment from Whole Life Disability as people sometimes attribute all difficulties to behavioural problems when there is in fact a cognitive impairment.

Screening

WLD social care workers will, when possible, undertake screening assessments with workers from Duty/Community Prevention/Assessment/Review teams to help in deciding which team is most appropriate.

At the point of referral or transfer, please also be clear why you feel the case should transfer to a WLD team.

Decision-making

If the person is already with a team other than the Duty Team or has received services via another team, it is expected that they will stay with that team. However, there may be exceptions whereby the person is of an age or level of need relevant to their disability, where the WLD Service is more appropriate and will need to be discussed on a case by case basis using the criteria and guidance.

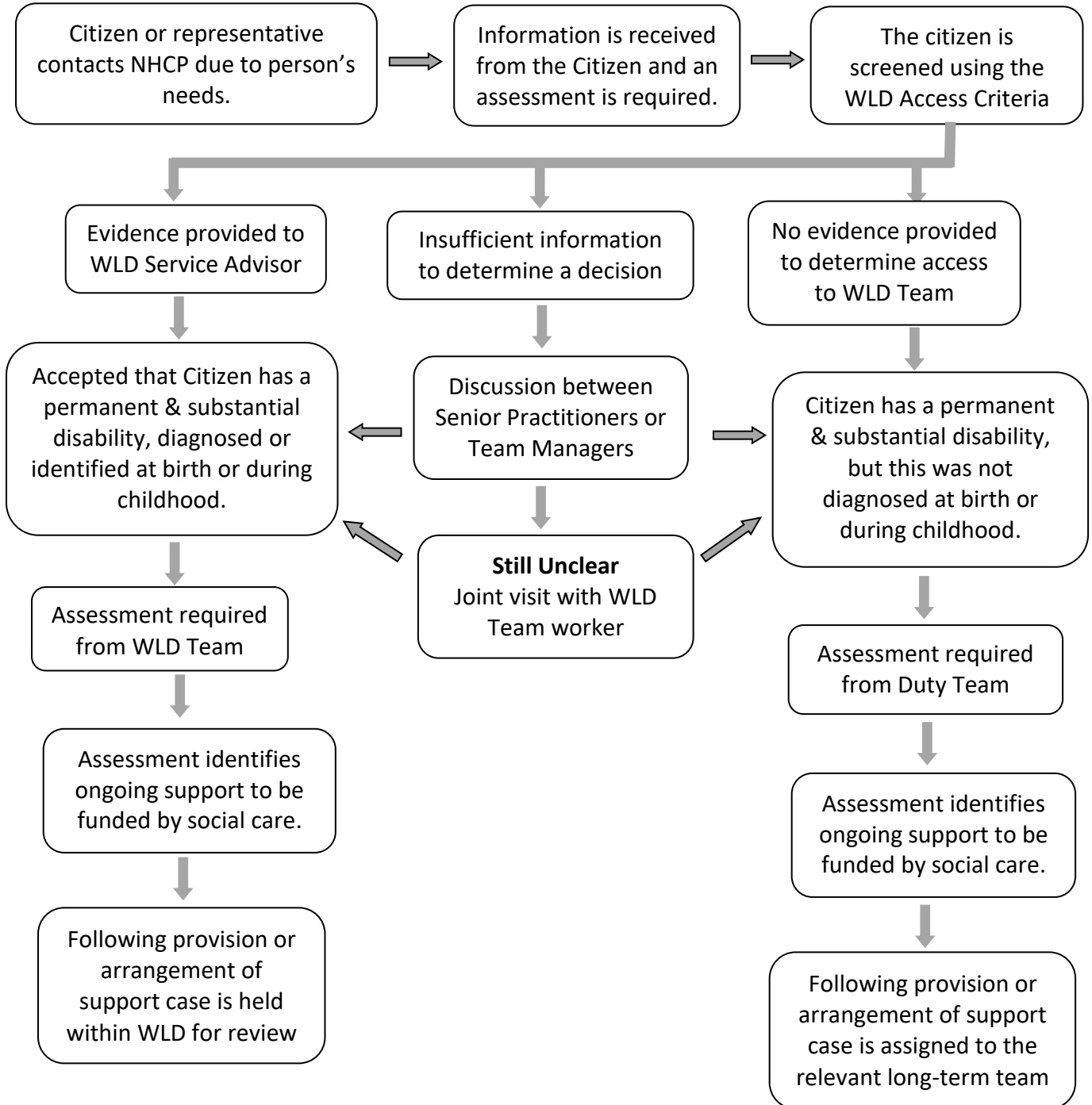
It is with the relevant WLD Manager to accept if the child or adult is eligible for a WLD social care service. This will be dependent on the provided evidence, criteria and guidance until a decision is made the existing team remain responsible for the case.

Disputes/Disagreements

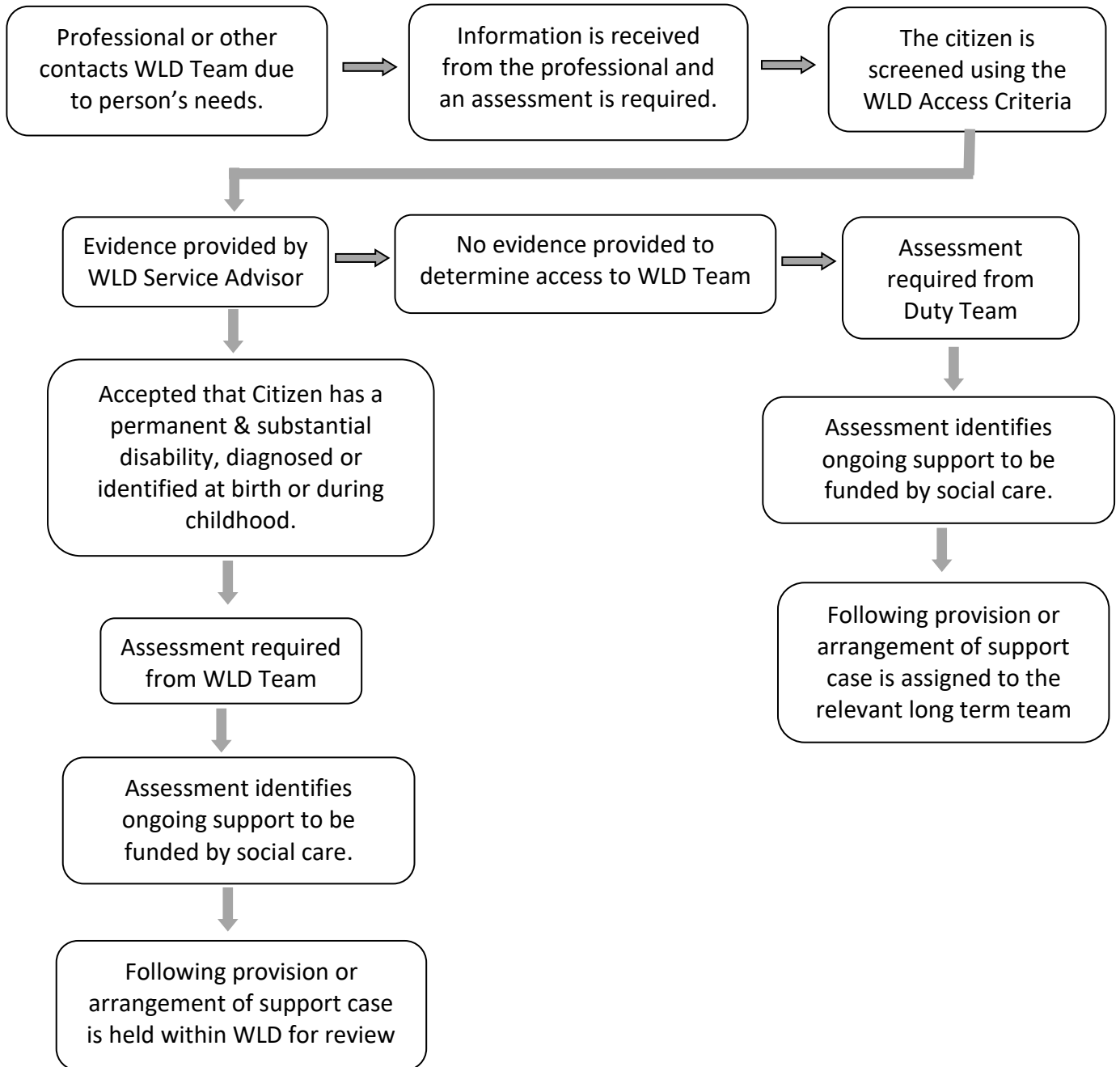
It is expected that initial discussions will take place between the Senior Practitioners. If agreement still cannot be reached, the matter will be resolved via Team Managers.

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General Process for accessing Whole Life Disability Service via Nottingham Health and Care Point



General Process for accessing WLD Service via WLD Team





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