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**Joint Policy and Protocol  
on  
Support for Disabled Parents**

**February 2003**

**Community Care Services  
And  
Children & Families Services  
Working Together**

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## 1. INTRODUCTION

### 1.1 Purpose of the Policy and Protocol

**The Policy and Protocol is based on the social model of disability and aims to make sure that disabled parents and their children -**

- have their health and social care needs properly considered (assessed), and that,
- services are focused on meeting those needs effectively.

### 1.2 Definitions

According to the **Social Model of Disability** , **disability** is :

*the loss or limitation of opportunities for people with impairments to take part in society on an equal basis with others due to social and environmental barriers.*

Impairments or individual medical conditions of any kind, whether they have resulted from injury, illness or birth, become a disability because of the social and physical barriers that the individual faces.

The social model of disability is therefore about civil and human rights and responsibilities and removing the barriers to independence and equal opportunities faced by disabled people.

For the purpose of this policy, the term '**Disabled Parent**' includes any person with a physical, sensory, or learning impairment, long-term illness including HIV\*. '**Disabled Parent**' includes prospective parents, same sex couples, and those who raise, adopt, step or foster children as well as biological parents.

The Disability Discrimination Act (1995) a **disabled person** as someone who has "a physical or mental impairment which has a **substantial and long-term adverse effect** on his/her ability to carry out normal day-to-day activities".

Support will be offered to people needing short-term assistance during a period of rehabilitation following illness or hospital treatment.

The Children Act (1989) defines a "**Child in Need**" as follows:

For the purposes of Part III of the Act a child shall be taken to be "in need" if

- (a) he is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining a reasonable standard of health or development without the provision for him of services by a local authority under this Part;

- (b) his health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services;
- (c) he is “disabled”.

\*(There are also separate protocols addressing the specific needs of parents with mental health problems, and families living with HIV, which should be read in conjunction with this Protocol as necessary.)

### 1.3 Principles

- Disabled parents have a right to be supported in fulfilling their roles and responsibilities as parents.
- Parental responsibility should remain with the child's/children's parents, unless the law says otherwise.
- As a general rule, the way in which parenting tasks are carried out and the way children are brought up should be the decision of the parent(s).
- The needs of children are best met when disabled adults' support needs are acknowledged, assessed, facilitated and regularly reviewed.
- Children have the right to be protected from harm and to receive services when their health or development is likely to be impaired without such provision.
- The aim of support services is to assist disabled parents to enjoy a normal family life comparable to that enjoyed by non-disabled parents.
- General eligibility criteria for services should recognise the support needs of disabled parents.
- Services should be offered in a way that does not undermine parental responsibility and decision making.
- Support services should be made available to any disabled parent who needs them.
- Support should be available regardless of which parent is disabled and whether one or both parents are working.
- A joint approach between Children & Families Services and Community Care Services to both assessment and service provision is likely to be in the best interests of parents and children.

- The appointment of a disabled parents 'Link Worker' within Community Care Services will facilitate the accessibility of services to disabled parents. This Link Worker will liaise with colleagues in relevant Children & Families Services Teams, including the Parents Support Worker.
- Arrangements between teams and services should be flexible to make sure that disabled parent's needs are met.
- Where a child is assessed as a 'child in need', financial arrangements between Community Care Services and Children & Families Services will be agreed.
- Lead responsibility for service provision and support to disabled parents should lie with Community Care Services. Children & Families Services should only have lead responsibility where a child appears to be 'in need'.
- Where there are child protection issues or children requiring alternative care, lead responsibility should lie with Children & Families Services.

#### 1.4 **Provision of services**

The key to effective provision of services for disabled parents is flexibility to allow the parent to receive support in a way that is most beneficial to them and their child, enabling them to retain control of their child's upbringing. There should be the following possibilities:

- Support provided to parents who wish to undertake most parenting tasks themselves, possibly using Direct Payments/the Independent Living Scheme.
- Support involving some parenting tasks undertaken by an assistant, under the direction of the parent.
- Support that enables parents to have adequate rest.
- Sufficient flexibility to enable parents to vary their involvement in parenting tasks according to variations in their health and ability at different times.

#### **Support tasks to enable the parenting role -**

- Helping a parent to attend doctor and hospital appointments by providing practical support to get to and from the appointment.
- Assisting a parent to wash/bath and dress their child.
- Assisting a parent to prepare drinks and meals for their child.

- Assisting a parent to prepare child play resources, involve children in play activities and tidy up afterwards.
- Preparing a family meal/carrying out household duties while the parent helps their child complete their homework/plays with child (i.e. relief care)
- Providing child care while a parent rests/prepares the evening meal/does the family shopping.
- Making arrangements for taking a child/children to school

## 1.5 Standards

### Information about and Access to services

- The Parents Support Worker (C&F), Young Carers' Support Worker (C&F), and the Link Worker (CCS) and a parent representative will meet quarterly to ensure that joint information is up-to-date.
- The availability of services for disabled parents should be publicised in places parents are likely to visit, for example, baby clinics, GP surgeries, schools, playgroups, libraries, as well as places disabled people are likely to visit.
- Staff in these establishments should be aware of the support available for disabled parents regarding their parenting role.
- Care should be taken to make sure that information about services is available in a range of accessible formats.
- Publicity materials should be developed which inform disabled parents of the various services available to them as potential service users. This publicity should be welcoming, friendly and reassuring.

## 2. REFERRAL, ASSESSMENT AND CARE PLANNING PROCESS

### 2.1 Referrals to Child Care Teams

- Child care teams should record whether a parent is disabled.
- A decision should be made as to whether the child is potentially a 'child in need' according to local criteria and timeframes for decision-making.

- If a child is not identified as 'in need', and a parent is disabled, there should be an automatic referral to Community Care Services (see Appendix 1), following a discussion with the parent(s).
- If a child is potentially 'in need', a referral should be made to Community Care Services and arrangements made for a joint initial assessment.
- If a child is identified as a 'young carer' there should be an automatic referral to Community Care Services and a joint assessment carried out to determine any unmet child or adult needs (see Young Carers Joint Protocol).

## 2.2 Referrals to Community Care Services Teams

- Community Care Services teams should record whether there is a child in the family.
- Ideally, at the first visit, the children should be seen, where practicable, and a decision made as to whether they are potentially 'in need' according to RBK's "Duties, priorities and guidance" document (Appendix 2).
- If the children are not 'in need', Community Care Services will carry on with their usual assessment and care planning process. This will always include frequent consideration of whether the child's needs are being met.
- If the children are potentially 'in need', a referral should be made to Children & Families Services (see Appendix 3) and arrangements made for a joint initial assessment.
- If there are concerns about possible significant harm to a child, an immediate referral should be made to the duty officer on the relevant Children and Families Services locality team:
- If a child is identified as a 'young carer' there should be an automatic referral to Children & Families Services and a joint assessment carried out (see Young Carers Joint Protocol).

## 2.3 Assessment - Principles

The assessment should include the following components -

- Consideration of the personal care/assistance needs of the disabled parent.
- Consideration of the disabled parent's support needs in his or her role as a parent (see Annex for list of parenting tasks)
- Consideration of the needs of each individual member of the family and the needs of the family as a whole.

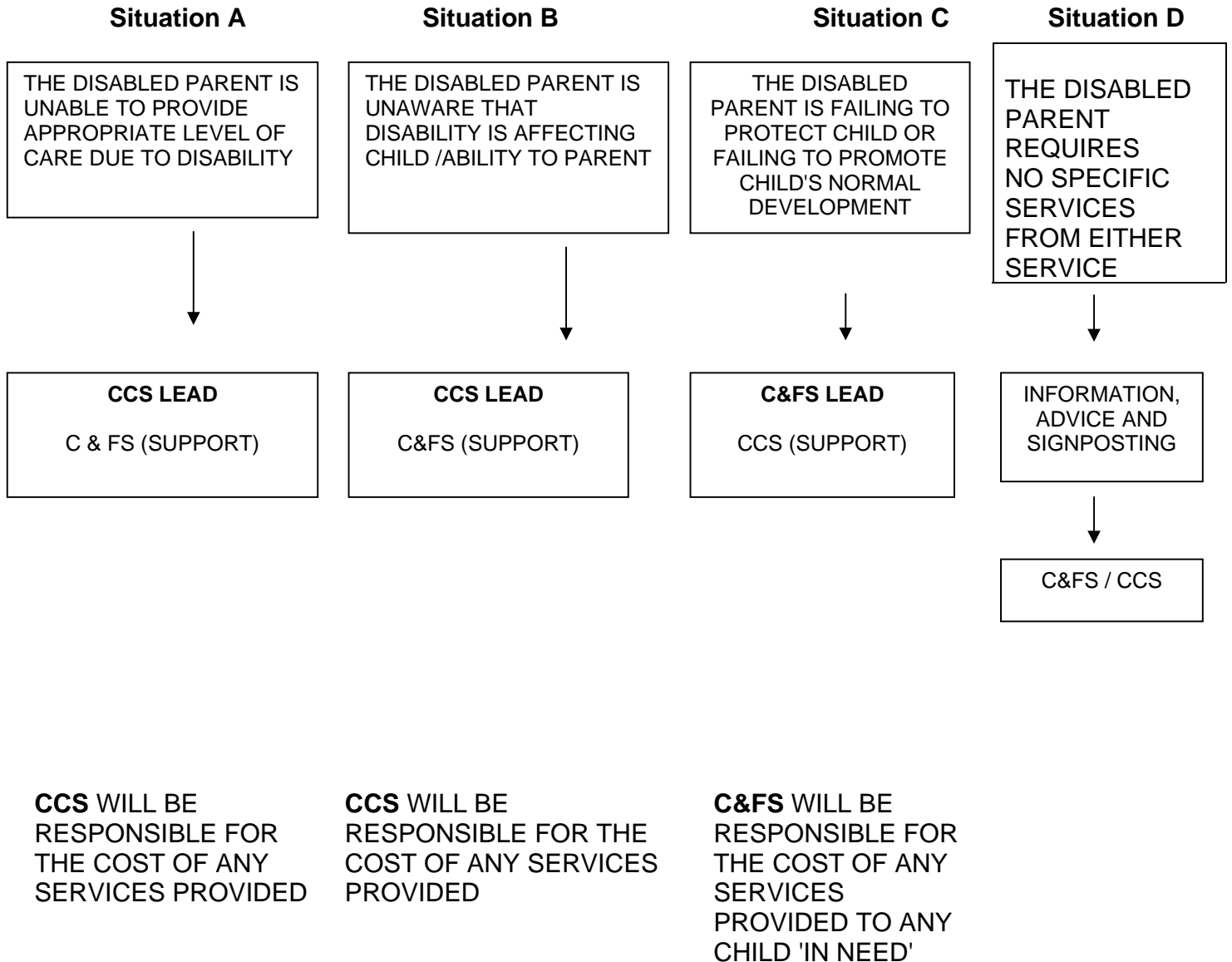
- Consideration of the needs of the other parent. This should include assessment of the need for support in coping with the extra physical, mental and emotional strain placed on the other parent, with the aim of reducing the likelihood of family breakdown.
- Use of the **Framework for the Assessment of Children in Need and Their Families 2000** as a way of identifying a child's developmental needs and parents' capacity to meet those needs.
- Consideration of the needs of each child individually to make sure they can enjoy a normal childhood without assumptions being made about their willingness or ability to carry out caring duties or housework to any greater extent that they would if neither parent was disabled. This consideration should also take into account any behavioural, emotional, learning or health difficulties that the child may have.
- Ensuring the assessment process is undertaken within the required timescales, particularly where the children are young or the parent has a terminal illness.
- Making sure the assessment is carried out by the designated link worker from the relevant team who specialises in the consideration of the needs of disabled parents within the social model of disability. Where this is not possible, the care manager making the assessment should consult the link worker before any decisions are made.
- Full involvement of the disabled parent and the other family members in the assessment process itself, in decisions about the support services to be taken up, and in the evaluation of the services provided by Community Care Services/Children & Families services.
- Making sure parents and children receive copies of assessments in formats accessible to each individual.
- Making sure parents and children are told how to challenge or make a complaint about any part of the assessment and care planning process.

## 2.4 **Lead Responsibility for Assessments and Funding**

- Generally, Community Care Services will be the lead agency responsible for completing an assessment to identify the needs of the disabled parent and their family. In these circumstances, it is expected that there will be consultation with Children and Families Services to ensure a joined up approach.
- Where a child / children of a disabled parent are perceived to be potentially 'in need' (i.e. meet the eligibility criteria for a service in their own right) the Children and Families Services will be the lead agency responsible for undertaking an assessment of the child's needs. Such an assessment will be undertaken in tandem with an

assessment of the disabled parent's needs that will be carried out by the Community Care Services.

**Figure 1** illustrates the respective responsibilities of Community Care Services and Children and Families Services in assessing disabled parents in four situations:



**SITUATION A**

- Where it appears that a disabled parent requires additional practical / facilitative help to look after their child / children an assessment will be undertaken by a designated worker from the

Community Care Services. This worker will consult with the Parent Support Worker from Children and Families Services to identify the most appropriate resources for the child.

- For instance, a child might need after school club/holiday place. The CCS Care Manager will consult with Parent Support Worker to identify appropriate services.
- The cost of any services provided as a result of this assessment will be met by **CCS**

N.B. Where there is difficulty in taking a child to school, the CCS Care Manager (in consultation with the Parent Support Worker) will try to help parents to make satisfactory arrangements.

### **SITUATION B**

- Where it appears that a disabled parent does not understand / recognise the impact of their disability on their child or their ability to parent a joint **CCS** and **C&FS** assessment should be undertaken. This assessment will be led by the designated **CCS** worker unless it becomes clear that the child is a child 'in need' when the C&FS worker will become the designated worker for the child / children.

Where a parent appears isolated and his/her child has limited opportunities for social contact which, if not addressed, could affect their development, The CCS Care Manager will discuss this with the parent to attempt to resolve the difficulty.

- The cost of any services to provide practical / facilitative help to the family will be met by **CCS**, such as arranging holiday schemes.
- If the child / children are assessed as 'in need' additional services necessary to safeguard their normal development will be provided by **C&FS**. **C&FS** will meet the cost of such services.

### **SITUATION C**

- Where it appears that a child is suffering or likely to suffer significant harm, e.g. where a child has an unexplained injury, **C&FS** will lead an assessment under Section 47 of the Children Act 1989.
- Where it appears that a child may require services, even if this is unrelated to their parent's disability, to secure a reasonable standard of health and development **C&FS** will lead an initial and core assessment, under Section 17 of the Children Act 1989.
- **C&FS** will meet the cost of any support services for the child recommended by these assessments, e.g. Child-minding, short breaks. **CCS** will meet the cost of any services to support the parent, e.g. providing help if parent needs to take a rest.

## **SITUATION D**

- Where a parent happens to be disabled, but who does not require additional support in his/her parenting role, he/she will be provided with information and advice about services universally available to parents in the borough. This material will indicate the accessibility of such services, and will be available to parents in this group/category in a range of formats.

This information/advice can be provided by either Community Care Services, or Children and Families Services.

### **2.5 The Assessment Itself**

- At the start of a joint assessment, a discussion or telephone conversation should take place between the social worker/care manager from each service, to share information and to plan how to take matters forward.
- In this discussion, a recommendation should be made as to the most appropriate service to take the lead [Refer to **Figure 1**].
- The assessment should be completed within Teams' response timescales following referral to Children & Families Services/Community Care Services.
- Where the assessment is led by Community Care Services, it will follow normal Community Care Services procedures.
- Where a joint assessment is agreed the Children and Families Services social worker will be expected to see the child and complete the Department of Health assessment framework documentation.
- The Community Care Services care manager should complete the appropriate assessment documentation.

#### **The assessment should –**

- Identify the health and social care needs of the adult service user;
- Explore how permanent and substantial the adult service user's impairment is;
- Identify the child's developmental needs, and the parents' capacity to meet those needs within the context of their environment;
- Take account of known variations in need for assistance, such as additional support during school holidays, at weekends, etc.;

- Agree a joint action plan with the parent(s) and child which identifies the services (care package) to be provided, responsibility for provision and timetable for review. This plan should include contingencies such as fluctuating medical conditions, the hospitalisation of parent or child, failure of equipment, partner incapacity and absence.

**At the end of a joint assessment, a care plan should be agreed between Children's & Families Services and Community Care Services.**

## 2.6 Uncertainty Regarding Financial Responsibilities

Where there is a lack of clarity concerning the allocation of resources to support a care package, the relevant Team Managers should attempt to agree a compromise solution within the principles and practice standards set out in this protocol.

N.B. Any initial lack of agreement regarding funding should not delay the setting up of services to meet assessed needs

## 2.7 Charging for Services

In line with Community Care Services' policy, charges will be made to the disabled parent for services provided to support him/her in their parenting role.

If services are provided **to a child in need** by Children and Families Services, there will be no charges for those particular services.

## 3.0 SERVICES

### 3.1 Support tasks to enable the parenting role -

The key to effective provision of services for disabled parents is flexibility to allow the parent to receive support in a way that is most beneficial to them and their child, enabling them to retain control of their child's upbringing. Support tasks may include:

- Helping a parent to attend doctor and hospital appointments by providing practical support to get to and from the appointment.
- Assisting a parent to wash/bath and dress their child.
- Assisting a parent to prepare drinks and meals for their child.
- Assisting a parent to prepare child play resources, involve children in play activities and tidy up afterwards.
- Preparing a family meal/carrying out household duties while the parent helps their child complete their homework/plays with child (i.e. relief care)

- Providing child care while a parent rests/prepares the evening meal/does the family shopping.
- Making arrangements for taking a child/children to school

### 3.2 **Care Packages**

Care Packages will be provided through the usual channels available to the Community Care Services Teams/Child Care Teams. Staff providing packages that relate to children should be subject to statutory checks for children's services. Care Plans will be drawn up and copied to CCS/C&Fs staff where there is involvement of those staff.

### 3.3 **Direct Payments**

When disabled parents wish to purchase their own care packages via the Independent Living/'Direct Payments' Scheme, the care manager from Community Care Services should carry out this part of the service planning.

### 3.4 **Unmet Need**

Unmet needs for services should be recorded and monitored so that current services can be re-designed or new ones developed to meet the needs of disabled people as necessary.

## 4 **REVIEW**

- Timescales for review will be identified at the point that a joint care plan is agreed, in accordance with agreed Children & Families Services/Community Care Services timescales.
- The review process should take account of the fact that disabled people's needs constantly change in both foreseen and unforeseen ways. The timescale for review should therefore be set in response to the particular circumstances surrounding the disabled parent's needs, the changing needs of the child and the complexity and size of the package being provided.
- There should always be the flexibility for a case to be re-reviewed at any time or re-opened speedily if they have been closed.

### THE PARENTING ROLE

The following tasks should be considered as part of the parenting role -

- Meeting the child's personal care needs (as appropriate to the child's age and any disability).
- Providing meals and drinks for the child.
- Washing the child's clothes.
- Meeting the health care needs of the child – e.g. visits to clinic, GP, vaccination, hospital appointments etc.
- Playing with the child, indoors and outdoors.
- Taking the child to the playgroup/school/other activities.
- Being fully involved in the child's education and helping with homework.
- Having friends round to play.
- Supervising the child, appropriate to child's age.