

Social care position statement for services in the UK

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1. Purpose

- 1.1. To set out what NDCS regards as an acceptable social care service for deaf children and their families.

2. Background

- 2.1. Through their social service duties local authorities (and health and social care trusts should identify local populations of disabled children and children in need and ensure such children and their families have access to a range of services and social work support that promote children's social emotional, psychological and intellectual development. Services required range from preventative or early help services, such as provision of information and advice, provision of equipment, access to Early Years and family support, through to formal social work support, including child protection and support for deaf children in public care, adopted children or young people in the youth justice system.
- 2.2. Underpinned by principles of human rights and social justice, social work is a professional discipline that works with children, adults and families to enable them to take control of and improve their lives in conditions where their security, safety or ability to participate in civic life are restricted. This could be due to a range of issues; such as disability, poverty, abuse and ill-health.

2.3. Why do deaf children require social care support?

- 2.3.1. Language and communication is critical to a child's educational and intellectual development, their ability to socialise and make friends and their ability to communicate. Deaf children, including those with a mild hearing loss, require additional support from parents/carers and statutory services to ensure that their language and communication needs are met. Without the right support there is a risk to their social, emotional and intellectual development which, if not addressed, will have long-term consequences to their future life chances.
- 2.3.2. For example, research suggests that:
 - a) 40% of deaf children experience mental health problems compared to 25% of other children.¹
 - b) Deaf children are more likely to be abused than hearing children (studies show they are at least twice as likely to experience abuse as hearing children, with one study identifying an incidence of abuse being 3.4 times that of hearing children²).
 - c) Educational attainment of deaf children is below that of hearing children.³
 - d) Deaf children are more likely to be unemployed as young adults.⁴
 - e) Up to 40% of deaf children have additional disabilities.⁵

Thus there are good reasons for being concerned that deaf children may not achieve key outcomes; such as being healthy, keeping safe, educational success

¹ Department of Health (2005): *Mental Health and Deafness: Towards Equity and Access*,

² Sullivan P.M., Brookhouser P, Scanlan J. (2000) Maltreatment of deaf and hard of hearing children in Hindley, P & Kitson, N,(Eds) *Mental Health and Deafness* (pp.149-184), London :Whurr.

³ www.ndcs.org.uk/data

⁴ Office for Disability Issues Annual Report 2008: Annex one: Indicators data reported that between 33% and 52% of deaf adults are unemployed (95% confidence intervals) compared to 20% of non-disabled adults. Figures taken from Labour Force Survey. RNID (2006) *Opportunity blocked: The employment experiences of deaf and hard of hearing people* reported that one in five deaf adults are unemployed compared to one in twenty of the UK labour market.

⁵ Holden-Pitt and Diaz,1988;Stredler-Brown and Yoshinaga-Itano,1994; Fortnum et al.1996 Cited in *Complex Needs Complex Challenges*; A report on research into the experiences of families with deaf children with additional & complex needs ,University of Manchester (NDCS)

and economic well-being.⁶ Children's social care services can therefore play a crucial role in helping address the barriers and risks posed to the well-being of deaf children.

2.4. Key UK legislation

2.4.1. In the four countries of the UK:

- a) Deaf children who fall within the legal definition of being 'disabled' within statutory social care legislation and should therefore be regarded as 'children in need'. Case law has established that all 'children in need' are entitled to a statutory assessment of their social care needs.
- b) Deaf children are entitled to have their needs assessed for possible support from services within the Chronically Sick and Disabled Persons Acts (date varies across UK) within a statutory social care assessment of need.

2.4.2. Deaf children are protected through important equality and disability discrimination legislation that requires social services to:

- make reasonable adjustments to ensure disabled children, and therefore deaf children, are not placed at a substantial disadvantage compared to non-disabled children when accessing and receiving social services.
- promote equality of opportunity.
- pay regard to the Human Rights Act 1998. For example, under Article 8 disabled children have a right to have their 'private life' and 'family life' respected by the state.
- respect that parent/carers are entitled to a statutory assessment of their own needs where they are providing substantial and regular care for a deaf child.⁷

2.4.3. There has been an increasing shift in UK social care policy towards early intervention approaches and supporting children and families before problems escalate, and increasing requirements to work jointly with other statutory and non-statutory services. This is clearly welcome, however such changes must not undermine the right to statutory assessment to ensure that the social care needs of deaf children are appropriately recognised and that response is timely and proportionate.

Detailed advice on compliance with these duties for different aspects of social care support is contained in the appendices.

2.5. NDCS position statements

2.5.1. The appendices set out in detail the position of NDCS on how social care services should discharge their responsibilities to deaf children and their families. Each of the 10 appendices covers a particular aspect of social care provision for deaf children.

⁶ <http://www.teachingtimes.com/zone/every-child-matters.htm>

⁷ Carers (Recognition and Services) Act 1995 (England, Scotland and Wales) ;Community Care and Health (Scotland) Act 2002 ; s5 Carers and Direct Payments (Northern Ireland) Act 2002; s24 Social Services and Well –being (Wales) Act 2014 'Regular and substantial care' applies only in Scotland, Northern Ireland and Wales.

An overview summary is outlined below.

1. NDCS believes that children's social care services play a crucial role in promoting the welfare of deaf children. Social care services working with professionals in health and education services have a major role in preventing and responding to the significant developmental risks faced by deaf children.
2. Deaf children can develop linguistic competence (through sign or speech), intellectual skills, social and emotional well-being, reflective and self-evaluative skills at similar rates to other children if they are appropriately supported by family/carers, accessible universal services and statutory services - such as health, education and social care.⁸
3. Lack of communication can form a barrier to social, emotional and educational development and can potentially place a child more at risk of abuse. Social work support, in partnership with other services, should diminish the barriers and thus enable development on a par with hearing children and reduce the risk of abuse. Local authorities need to meet their obligations to deaf children as 'children in need' and provide services to minimise the effect of their disability and help them live as normal life as is possible.
4. Particular attention should be given to deaf children with additional and complex needs so that their language and communication needs are appropriately considered and not overshadowed by other important needs.
5. The level and type of social care support a deaf child and her/his family need will depend on individual circumstances, but could range from preventative services to restorative services and include:
 - a) Information and advice in the family's preferred language.
 - b) Support to help parents, and other relations, communicate with their deaf child.
 - c) Provision of equipment that promotes the safety and independence of the child.
 - d) Support for the deaf child and their family/carer, including opportunities to socialise with other deaf children and availability of deaf role models.
 - e) Constructive support to enable the deaf child to make a successful transition to the adult world.
 - f) Support for deaf children and young people in need of protection from abuse, including neglect.
 - g) Support for deaf children in public care.
 - h) Support of deaf young people in the Youth Justice system.
 - i) Support for deaf children who have been adopted.
6. In accordance with national frameworks and good practice guidance, social care involvement needs to be underpinned by a high-quality assessment of the needs of the child and the family to ensure appropriate support is provided (see Appendix 2). Social work support (via children's social care or social services) now sits within a model of escalating need in which all children's service providers (including universal to targeted services) should support children and families early on when additional support needs emerge. This is to prevent the needs of children escalating to where children's social care support is necessary. However, key UK legislation remains in place⁹ in which disabled children, and therefore deaf

⁸ Yoshinaga-Itano, C. (2000) *Successful outcomes for deaf and hard of hearing children* – Conference on Newborn Hearing Screening, Diagnosis and Intervention, Milan)

children, are entitled to a statutory assessment of their needs and this duty remains within children's social care.

7. NDCS expects social care services to have in place:
 - a) Arrangements for ensuring that services are clearly advertised and that it is easy for families and professionals to make initial contact.
 - b) Clear referral pathways for both families and other professionals/agencies.
 - c) Access to advice and support from an identified social care professional with specialist understanding of the complexity and variety of deaf children's developmental challenges.
 - d) A strong, preventative focus to social care provision for both the deaf young person and their family.
 - e) An acceptance that deaf children meet the definition of children in need under the Children Act 1989; Children (Scotland) Act 1995; Children (Northern Ireland) Order 1995, and that a statutory assessment will be completed if requested by a deaf child and/or their parents.
 - f) Arrangements to ensure that key staff within the relevant social care team and at key referral points into children's social care have a good knowledge of the range of implications of deafness in childhood, and a strong understanding of the positive developmental potential of deaf children.
 - g) Clear arrangements/protocols for professionals working with deaf children and their families to consult with an identified social worker for specialist advice and guidance in supporting early help/support plans. The social worker will have a specialist understanding of the complexity and variety of deaf children's developmental challenges and their potential social care needs.
 - h) Processes should be in place to ensure specialist social care advice given by the identified social worker contributes to:
 - on-going training requirements within children's social care and early intervention professionals
 - the review of relevant policy and procedures within children's social care and wider local safeguarding arrangements.

The identified social work professional should be either:

 - a designated social worker within the relevant social care team
 - another specialist social worker team within the authority
 - a specialist social worker from another local authority or commissioned provider organisation
 - an independent specialist social worker.

The identified social worker must demonstrate continuous professional development relevant to their specialist duties in order to provide evidence of their competence to undertake this role.
8. Social care services should ensure deaf children and their families can communicate effectively with social care staff in a language and medium in which they feel comfortable (Appendix 1).
9. The standards contained in *Deaf Child: Positive Practice Standards in Social Services*, produced in 2002 by the Association of Directors of Social Services, the Local Government Association, the National Children's Bureau, British Deaf Association, RNID (now Action on Hearing Loss) and NDCS still remain largely relevant to practice across the UK today. Social care practice should comply with these standards.

http://www.ndcs.org.uk/professional_support/our_resources/social_care.html)

This publication is currently being updated (at May 2016).

10. To comply with their disability equality duties, local authorities should collect management information that will enable them to assess the impact of their social care policies and practices on deaf children and their families (see Appendix 8).

3. Social care position statements

Appendix 1: Position statement on effective communication¹⁰

- A.1.1 Social care services should ensure deaf children and their families can communicate effectively with social care staff in a language and medium with which they feel comfortable. The child's communication strengths, needs and preferences should dictate how the child is engaged, rather than the level of skills/experience or expectations of those professionals supporting the child. This requires:
- a) Provision of a suitable environment for discussion. For example, use of a quiet room that has been acoustically treated, has good lighting to enable lip-reading and sign reading, is plainly decorated, has curtains to cut out glare and provides for the use of sound enhancement aids.
 - b) The provision of communication services according to the assessed communication needs of the deaf child/families/carers and appropriate to the complexities of the issues under discussion. This involves ensuring the deaf person has access to communication support appropriate to their needs (e.g. sign language interpreters, lipspeaker, note-takers, Makaton or other augmentative communication modes, etc., and interpreters for family members where English is a second language).
 - c) Robust procedures for the employment of specialist communication professionals, such as interpreters, are in place. This should include clarity about which organisation pays for this service (e.g. social care and/or the police).
 - d) A clear understanding of the different kinds of communication professional that may be available (e.g. lipspeakers, deaf relay interpreters) and a means to match required professional skills to particular situations.
 - e) Established standards of minimum qualifications and appropriate training/experience required of interpreters to undertake work (e.g. Member of the Register of Sign Language Interpreters with child protection training).
 - f) In the first instance, consultation with the deaf child to establish and assess language preferences and preferred method of communication. If this is not possible professionals, such as specialist social workers, speech and language therapists or teachers of the deaf will be able to advise on a child's level of communication and provide the support required to enable a child to engage in meaningful decision making and planning. It is essential to also consult with the child's parents/carers who can also offer useful advice on their child's communication needs. This should help inform, along with wider professional opinion, the child's communication needs where the deaf child is unable to identify their own preferred method of communication.
 - g) The child should be given information which enables them to understand the role of social services and systems should be in place so they can contact these services independently if necessary. This should also include signposting to other resources, such as the NSPCC.
- A.1.2 The assessing social care professional should have an understanding of the potential difficulties when communicating with deaf children. For example:
- they may pretend to understand communication and nod agreement without understanding what was said

¹⁰ The voluntary organisation Triangle has produced a very helpful DVD *Three way street* on communication which includes deaf children. More details on www.triangle.org.uk

- they might have low expectations about their level of participation in discussions
- it takes far more effort for deaf children to concentrate on a lengthy conversation
- their lack of familiarity with open ended-questions.

A.1.3 A significant number of children with other disabilities or complex needs have a hearing impairment. There can be a tendency to overlook the deafness when other conditions require intensive and constant attention. Social care services should:

- help develop communication skills
- understand the child's way of communicating to ensure that her/his needs, wishes and aspirations are acted upon
- not mistake communication difficulties due to deafness for a lack of ability in the child to understand issues.

Communication and child protection

A.1.4 Effective communication is vital in order to:

- conduct assessments of children suspected of being abused
- allow the child to express her/his wishes and feelings, attend court and to have her/his experience understood
- undertake therapy and counselling following abuse.

Communication requirements and child protection procedures are considered in more detail in Appendix 6.

Appendix 2: Position statement on assessing the social care needs of deaf children and their families

Summary position regarding assessment of need

- A.2.1. At the point of hearing impairment diagnosis parents/carers of deaf children should be notified of their child's right to a statutory Child in Need assessment of the needs of their deaf child's and the family's needs. This assessment should be provided if requested by parents or it may be undertaken as result of a referral to social services because of a concern over the child's welfare.
- A.2.2. Government guidance across the UK¹¹ now supports early intervention approaches with children and families where there are emerging needs that are not of a safeguarding nature. Supporting deaf children and their families in those critical early years through early help approaches is to be welcomed. However, such approaches should not replace the right to a social care statutory assessment or be a requirement prior to a statutory assessment being undertaken.¹²
- A.2.3. Where parents/carers choose to be supported by early help approaches these must be informed by specialist social care advice and guidance. This is to ensure that the needs of the child are assessed correctly so that the appropriate support can be provided,
- A.2.4. A statutory children in need assessment or an early support assessment will require the consent of parents/carers¹³ and also the deaf child, depending on their age and understanding, and based on an informed decision about the scope of the different assessments.
- A.2.5. Both parents/carers and the deaf child/young person should be fully involved in the assessment and given the communication support to be able to do this, both as part of the family and as an individual in their own right.
- A.2.6. Deaf children and young people who are not in receipt of children's social care support should be offered an assessment of their social care needs either at:
- the first identified transition stage as part of an statutory review of educational provision
 - or
 - at the request of the deaf child, young person or their parents/carers.

Educational assessments

- A.2.7. Where deaf children are having their educational needs statutorily assessed, parents/carers should be offered a statutory assessment of their child's social care needs.¹⁴ Protocols should ensure multiple assessments are effectively co-ordinated in order to prevent duplication and to support a "tell them once" policy.

¹¹ In Scotland this is enshrined in the Children and Young People (Scotland) Act 2014 with the requirement to undertake wellbeing assessments (part 4) and produce a Child's Plan.

¹² Established within case House of Lords in R (G) v Barnet LBC under the Children Act s17 1989 s17 duties

¹³ Parental consent is not required for children in need of protection assessments where there are issues of neglect, emotional abuse or sexual abuse

¹⁴ In England this is supported within the SEND Statutory Guidance paragraph 9.47SEN Code of Practice 2015 and section 9 SEND Regulations 2014. Outside England the process of statutory education assessments suggests consideration of the holistic needs of the child including social care needs and supports multi-agency cooperation.

Deaf blind/visually impaired children

A.2.8. If a child has vision impairment as well as being deaf or is deafblind, then (in England and Wales) a statutory assessment must be offered and must also meet the requirements of the statutory guidance on social care for deafblind children and adults. In England, *Care and Support for Deafblind Children and Adults Policy Guidance* (2014) is issued jointly under section 7 of the Local Authority Social Services Act 1970 and in Wales, National Assembly for Wales Circular No 10/01). Requirements include the assessment being undertaken by a person/team that is specifically trained to assess a deafblind child and the need for one-to-one support, assistive technology and rehabilitation.

Early Help/Early intervention approaches

A.2.9. Early help approaches govern the delivery and response of children's services across the UK. Considerable evidence has now established the importance of children's early years experiences to their long term development and life chances (Allen 2011). The development of language and communication in the early years is critical to the outcomes of a deaf child in adolescence and adulthood and children's social care should explicitly recognise this within its policies and procedures.

A.2.10. Following diagnosis of a hearing loss, deaf children are likely to be involved with a number of different statutory agencies and therefore a multi-agency approach should always be taken to consider their holistic needs.

A.2.11. For early help assessments to appropriately identify the support deaf children may need, the following must be in place:

- a) The lead professional has an awareness of the risks a hearing loss can present to the child's social, emotional and educational development and of potential safeguarding issues related to a child's deafness, including parents capacity to meet those needs.
- b) Awareness of the services that can support the social care needs of deaf children and their families.
- c) Established multi-agency links with other professionals such as health (e.g. audiology/speech and language) to ensure there is an understanding of the child's language and communication needs and how parents/carers are able to meet those needs.
- d) Specialist advice within children's social care is offered to support the lead professional role and ensure appropriate needs and services are identified.

A.2.12. An assessment must seek to identify all the factors in the child's or young person's life that may be benefitting or adversely affecting their wellbeing. This will help establish how best to support the child or young person when they experience difficulties. It will include but is not limited to, recognising individual, family and community strengths as well as difficulties relating to poverty, health, disability or communication needs and how these needs might be met.

A.2.13. The aim of an early help assessment and support that is specific to a child's hearing loss should be to:

- a) Provide access to unbiased information on the communication options that are available to parents/carers and the practical implications that are required to achieve these
- b) Ensure parents/carers fully understand their child's language needs and the support they can give to help their child develop.

- c) Ensure parents/carers have access to genetic counselling and the option to meet deaf role models.
- d) Where necessary, to offer services to support parents/carers to develop their child's language and communication.
- e) Ensure the child has access to mainstream services which can meet their needs, including their social needs such as opportunities to socialise with other deaf children.
- f) A clear focus on achieving key outcomes/targets; such as the level of communication and social interaction between family members and the child, the use and maintenance of hearing equipment, keeping audiology appointments.

Trigger for an early help/support multi-agency assessment

A.2.14. All children diagnosed with a permanent hearing loss should be offered either an early help assessment or a statutory social care assessment because of the risk a hearing loss presents to a child's development and wellbeing.

Social care statutory 'child in need' assessment

A.2.15. Statutory social care assessments must be undertaken by a qualified social worker¹⁵ and follow national guidelines and prescribed timescales for their completion. The social worker should have knowledge of childhood deafness and its implications and have experience and skills in assessing deaf children and planning support.

Focus of a statutory social care assessment

A.2.16 A statutory assessment will cover many aspects of an early help assessment but will provide a greater level of analysis, particularly where the child/young person is not making good progress.

A.2.17 Triggers for statutory social care assessment include:

- a) A diagnosis of a permanent hearing loss where there is a request by parents under the relevant provisions with the Children Act 1989; Children Scotland Act 1995 and the Children (Northern Ireland) Order 1995.
- b) It is felt the support provided to a deaf child and their family via early help approach is not achieving the expected outcomes for the child (including the child's language and communication development). This may be due to the resource capacity of agencies or difficulties in areas of parenting capacity.
- c) It is felt that specialist social care advice and support is required from a professional with knowledge of deafness/hearing loss in childhood and with the experience and skills to accurately assess needs and plan for possible support services.
- d) Where a deaf child is having their educational needs assessed for additional support and this is in agreement with parents/carers and deaf child or young person.

Undertaking assessments

A.2.18 In undertaking either early help or statutory assessments the practitioner needs to:

- a) Assess deaf children on the basis of an ability to reach developmental milestones commensurate with targets set for all children, as outlined in best practice guidance and legislation. (Unless the child has multiple and

¹⁵ According to Statutory guidance in England Social worker must be registered with the HCPC. (Para 26 Working Together 2015)

- complex disabilities. A deaf child with complex needs should be enabled to reach the same milestones as a hearing child with similar disabilities.)
- c) Appreciate that deafness can create communication difficulties in families and make it difficult to maintain ordinary relationships.
 - d) Realise that good communication is fundamental to good parenting and caring.
 - e) Recognise the importance to deaf children of being able to communicate their basic wants and needs to their parents/carers and have social interaction on a level with hearing peers.
 - f) Recognise the importance of language acquisition to personal, social and intellectual development.
 - g) Have an awareness of the importance of providing social opportunities to alleviate social isolation and for deaf children to have a positive identity.
 - h) Be fully aware that parents inattention to their deaf child's language and communication needs, including failure to support the use of hearing equipment such as hearing aids and failing to attend audiology clinics, can result in significant harm to the child's development and wellbeing and hence could constitute neglect and emotional abuse (see Appendix 6).
 - i) Be aware of the child's preferred mode of communication and meet those needs so that she/he is fully engaged in the assessment (see Appendix 1 and Appendix 6).
 - j) Recognise that deaf children may have other disabilities or complex health needs but that their communication remains critical to accurately assess and provide the support required to meet their individual needs.

A.2.19 Families/carers and the deaf young person should be fully involved in assessments and given the communication support to be able to do this, both as part of the family and as an individual in their own right.

A.2.20 Assessments should be carried out in accordance with the frameworks developed in each of the four countries of the UK and accompanying good practice guidance.

A.2.21 Assessment must consider independence, personal safety and all aspects of staying safe in accordance with legislation and best practice guidance.¹⁶ For example, visual alerts to fire/someone at the door etc. and mobile phones, which enable the child to develop independent living skills.

A.2.22 Throughout the process of referral, allocation and assessment clear channels of communication are essential between and within all agencies involved with the child. Particular attention must be paid to information sharing about deaf children's needs, their method of communication and their safety and welfare so that each organization and the child and family have a common understanding of identified need and the agreed plan to meet those needs.

Contribution to Education Assessment

A.2.14 Social care assessments should contribute to education assessments of deaf children in accordance with the statutory frameworks in the 4 countries of the UK. The focus needs to be on the factors in the child's life that may impact on their educational progress and attainment and the support required to address these difficulties.

Government standard (England):

¹² For example Children's Services and Disabled Persons Act 1970

The government has set a standard that:

The social care needs of all families with a deaf child should be reviewed as part of an initial assessment by the Lead Professional. In all areas there should be available a member of Social Care staff, with appropriate expertise in working with deaf children and their families to respond to the identified needs.

Quality Standards in the Newborn Hearing Screening Programme (NHS July 2008)

<http://hearing.screening.nhs.uk/standardsandprotocols>

Standards for Paediatric Audiology Services

Multi-agency working outlining the need for social care involvement to support holistic needs of deaf children and families is also outlined in the Quality Standards for Paediatric Audiology (Wales) and in Quality Standards for Paediatric Audiology Services (Scotland) (Standard 8a.2)

<http://gov.wales/topics/health/publications/health/guidance/qualitystandards/?lang=en>
<http://www.gov.scot/Publications/2009/04/27115728/0>

For example:

- a) In England, statutory guidance Working Together to Safeguard Children (2015) states that:

“Where a child and family would benefit from coordinated support from more than one agency (e.g. education, health, housing, police) there should be an inter-agency assessment.” (paragraph 8)

- b) In Scotland under the Getting It Right For Every Child framework: *A wide range of practitioners are required to think about children’s and young people’s wellbeing in the course of their day-to-day activities when exercising functions under the Act*”. Statutory Guidance on the Children and Young People (Scotland) Act 2014.

And also

“Where children are within the Children’s Hearing System....the relevant agencies must work together to ensure an integrated assessment of all of the child’s or young person’s needs”. Paragraph 8 of the Statutory Guidance (2010) on implementation of the Additional Support for Learning (Scotland) Act.

Appendix 3: Position statement on provision of information and advice

- A.3.1 Once a child has been diagnosed as being deaf, parents will need information and advice on the implications of their child's development and the support available to them. Local authorities, through children's social care or by other formal arrangements, should provide families/carers of deaf children and young people with information that will enable them to make their own choices and seek the services they need. The information should:
- be full, unbiased, clear and balanced about the implications of deafness and the options for their child available at the time of identification of deafness
 - set out the full range of provision and services including support for communicating with the child, the provision of equipment, deaf awareness courses for parents, the availability of Disability Living Allowance (DLA)/Personal Independence Payment (PIP), the availability of deaf role models, access to childcare, access to short-term breaks, access to health services - such as speech and language therapy, details of other support organisations and parent groups and eligibility criteria
 - be available in plain English, the main community languages and in accessible formats, including sign language
 - be accessible to deaf children and young people as well as parents/carers.
- A.3.2 Local authorities should identify a person(s) or organisation with responsibility for the provision of information.

Relevant UK legislation

Local authorities (and Trusts in Northern Ireland) have statutory duties towards children in need¹⁷ (including disabled children), which includes a duty to provide information on relevant services; including voluntary organisations that are likely to support and promote the welfare of such children.

Country specific legal duties

In England the Children and Families Act 2014 requires local authorities to provide a 'Local Offer'¹⁸ giving children and young people with special educational needs or disabilities and their families information about what support services across education, health and social care the local authority think will be available to them in their local area.

¹⁷ All UK Children Act legislation; Children Act 1989/Children Northern Ireland Order 1995 Children (Scotland) Act 1995

¹⁸ Section 30 Children and Families Act 2014

Appendix 4: Position statement on supporting families/carers

- A.4.1 Local authorities through either children's social care or through other multi-agency arrangements should offer support to families and carers to:
- a) Enable them to nurture the development of their deaf child.
 - b) Diminish barriers so as to maximise development opportunities for the deaf child.
 - c) Enable the deaf child to develop a positive identity.
 - d) Ensure that the deaf child is provided with the same opportunities as other children to participate fully in age appropriate provision and extended services at school and in their local community.
 - e) Ensure the deaf child can communicate within the family.
 - f) Promote the independence of the deaf child.
 - g) Ensure that parents receive the right level of support as carers.
 - h) Ensure that young carers are not taking on inappropriate levels of caring for their siblings.¹⁹
 - i) Enable families/carers to access other services.
- A.4.2 Support should be provided at an early stage to prevent greater need developing. Families should be assessed and provided with a range of support services dependent on the needs and wishes of the family. The range of services should include:
- a) Provision of information and advice (see Appendix 3).
 - b) Social and emotional support for parents/families.
 - c) Access to equipment (see Appendix 5).
 - d) Supporting communication between the deaf child and their family/carers (including access to communication classes).
 - e) Provision of a key worker.
 - f) Access to short-term breaks and holiday schemes (including those aimed at raising the confidence and self-esteem of deaf young people).
 - g) Support if parents experience difficulties with parenting.
 - h) Access to all of the above for BME families, including access to opportunities for mentoring, home support, deaf clubs and deaf children's activities to address the issue of isolation that children from BME families can face.
- A.4.3 Social care staff and professionals outside children's social care supporting deaf children should be trained in deaf awareness and must have access to specialist social work advice relating to deafness.
- A.4.4 Social care staff and professionals outside children's social care supporting deaf children should be trained to understand cultural attitudes towards deafness in different communities. In some BME communities negative attitudes towards disability can contribute to fewer opportunities for BME deaf children.

¹⁹ The health and well-being of young carers - <http://www.scie.org.uk/publications/briefings/briefing11/index.asp>

Relevant UK legislation

Carers

- Local authorities have a duty to inform all carers of their right to a Carer's Assessment when they are providing regular and substantial care for a disabled child.²⁰ This is separate from the needs of the disabled child they care for.
- Parents/carers have a right to request an assessment of their own needs where they are providing substantial and regular care for a disabled child and the local authority must undertake this where they are satisfied that the child and/or parent/carer is likely to require services.²¹
- When a Carer's Assessment is being completed, they must take into account work, lifelong learning and leisure.²²

Disabled children

- Parents of disabled children can request a statutory assessment of their child's needs. Statutory assessment should be a holistic assessment that considers not only the disabled child's needs, but any support needs of parents/carers due to their parenting role.
- In Scotland the Children and Young Persons Act 2014 makes provision of wellbeing assessments (Part 4) and the production of a Child's Plan (Part 5).

²⁰ Carers (Equal Opportunities) Act 2004; Community Care & Health (Scotland) Act 2002; Carers and Direct Payments (Northern Ireland) Act 2002

²¹ S17ZD Children Act 1989; Carers and Disabled Children's Act 2000; Carers (Equal Opportunities) Act 2004 / Community Care and Health (Scotland) Act 2002; Children (Northern Ireland) Order 1995; Carers and Direct Payments (NI) Act 2002; s15 Social Service Well-Being Wales Act 2014

²² Carers (Equal Opportunities) Act 2004; Carers and Direct Payments (NI) Act 2002

Appendix 5: Position statement on providing equipment

- A.5.1 Social care services should provide appropriate equipment for deaf children that will promote their safety, independence and communication at home and with friends²³ and that enables them to have access to the same information at the same age as other children. Families and deaf children should be trained and supported in the use of the equipment.
- A.5.2 Hearing access technology used in the school, such as radio aids, should be available for use at home and socially to aid consistency in communication support.²⁴ It is vital that agencies working with deaf children recognize this and reflect this in their shared assessment and funding arrangements.
- A.5.3 Examples of equipment should be available to deaf children and young people and their parents/carers including radio aids, flashing light alerting systems/pager systems, loop systems, wake-up devices and mobile phones with good texting facilities.

Key relevant legislation

The Chronically Sick and Disabled Persons Act is applicable to all disabled children under 18 across the UK²⁵. The services it can provide follow a statutory child in need assessment under the relevant country specific law and local eligibility criteria. This Act lists a range of services which can support disabled children to live at home with their families and access community facilities. This Act allows for important environmental equipment/assistive technology to be provided to deaf children to secure their safety and welfare and promote their independence if this is assessed as being necessary by children's social care.

Country specific legislation

In England, when a child is being considered for an Education Health and Care plan, there should be consideration of whether the child has any social care needs which could result in the provision of services under the Chronically Sick and Disabled Persons Act 1970. This is determined following a statutory child in need assessment.

Within the rest of the UK statutory guidance covering similar specialist education provision requires the consideration of whether a child has any non-educational needs; for example, health and social care where specialist educational provision is being considered or is likely to be provided for them.

²³ Chronically Sick and Disabled Persons Act 1970, (Scotland) 1972, (Northern Ireland) 1978.

²⁴ Such auxiliary aids provided to access education can be provided by schools under the 'reasonable adjustments' requirement under the Equality Act 2010 (England, Wales, Scotland) or via a personal budget as part of an EHC plan (England)

²⁵ Chronically Sick and Disabled Persons Act 1970 (England and Wales), (Scotland) 1972, (Northern Ireland) 1978.

Appendix 6: Child protection

- A.6.1 Research indicates that deaf children are considerably more vulnerable to abuse than other children. Social care services therefore need to be aware of the reasons deaf children may be at greater risk from abuse than other children and reflect this in their policies and procedures when assessing the social care needs of deaf children. These additional vulnerabilities should also inform inter-agency protocols and assessment thresholds across children's services.
- A.6.2 The vulnerability of disabled children with communication difficulties who are in need of protection was highlighted in practice guidance published in England in 2009.

“Communication barriers mean that many disabled children, including deaf children, have difficulty reporting worries, concerns or abuse. Some disabled children do not have access to the appropriate language to be able to disclose abuse; some will lack access to methods of communication and/or to people who understand their means of communication.”²⁶

Also framework guidance issued by Ofsted in England in 2015 states that Local Safeguarding Children's Boards should have:

“an understanding of the local safeguarding response to deaf and disabled children in all aspects of [its] functioning”²⁷

Communication, Language and neglect

- A.6.3 Communication and language development is critical to a child's social, emotional and intellectual development. Social care services therefore need to be fully aware that poor communication between the family and the deaf child is potentially a form of neglect and emotional abuse. Similarly a failure to address a child's hearing needs through, for example, missing audiology appointments and ensuring hearing equipment such as hearing aids are maintained and used can pose a significant risk to a child's social, emotional and educational development. This has implications for the application of thresholds for support and intervention across children's services from early help support services to statutory social care support. However, it is important to consider the reasons for this as well as the impact on the child. Questions need to be considered about the help offered to the family to aid communication.

Child protection investigations

- A.6.4 Child protection investigations should be undertaken by staff who are deaf aware, have expertise in child protection and must involve a specialist social worker in deafness to ensure the communication issues are fully taken into account (see Appendix 1). The specialist social worker should either be an identified champion within the authority who is suitably trained to provide the necessary advice and support or alternatively there are clear arrangements to commission advice from an outside specialist social worker, either from another local authority or an existing independent and registered social worker. Where one of these three elements is missing arrangements cannot be regarded as adequate.

Timescales

²⁶ *Safeguarding Disabled Children: practice guidance*. Department for Children, Schools and Families 2009

²⁷ *Framework for the evaluation and inspection of services for children in need of help and protection - review of LSCBs*, Ofsted (2015)

A.6.5 Child protection investigations must take place within the same timeframes as those that are applied for all children subject to the relevant statutory guidance and local protocols. For example, whilst there are likely to be additional resources required to achieve this for a disabled child, it is important that there are no delays in completing these enquiries in the timescales set out for all children. It is therefore important that children's social care services and other child protection agencies identify these resources to ensure they fulfill their anticipatory duties under the equality and discrimination legislation.²⁸ This may mean considering developing cross-authority or regional arrangements to ensure access to qualified registered interpreters with appropriate child protection training and expertise.

Child protection investigations and communication

A.6.6 Effective communication is vital in order to:

- conduct assessments of deaf children suspected of being abused
- allow the deaf child to express her/his wishes and feelings, attend court and to have her/his experience understood
- undertake therapy and counselling following abuse.

Talking to deaf children

A.6.7 Many deaf children are educated in mainstream schools within an oral approach and have spoken English as their main means of communication. However, social workers need to bear in mind there is often a significant linguistic delay resulting in difficulties with comprehension and vocabulary acquisition. These children will have difficulty understanding the subtleties of language and may have difficulty explaining the nature of the abuse. The child's hearing loss can result in a delay in social maturity and in understanding what is acceptable behaviour.

A.6.8 The child's pronunciation may also be unclear to unfamiliar adults and on a video recording the child's speech may not be clear. In such circumstances, a specialist social worker or a teacher of the deaf should be invited to a strategy meeting to address how the teacher, or another professional, may act as a facilitator in the interview process and assist with any transcript of the recording. The possibility of someone known to the child inhibiting or prompting the child in the interview must also be taken in to account. This must be undertaken in a manner that does not invalidate the recording as evidence in any subsequent proceedings.

A.6.9 For a child who communicates using sign, a Sign Language Interpreter who is either a member of the National Register of Communication Professionals working with Deaf or Deaf blind People or the Scottish Association of Sign Language Interpreters²⁹ must be used. Failure to use a qualified and registered interpreter may jeopardise a successful prosecution of the perpetrator of abuse and deny the deaf child access to justice. The word 'interpreter' should only be used for qualified persons who have had training and are qualified and registered. Others should be termed facilitators.

²⁸ The Equality Act 2010 (England, Wales & Scotland); The Disability Discrimination Act 1995 & The Disability Discrimination Order 2006 (Northern Ireland)

In England, according to Ofsted requirements, Local Safeguarding Children's Boards must, , must have an understanding of the safeguarding response to deaf and disabled children in all aspects of its functioning

²⁹ *National Registers of Communication Professionals working with Deaf and Deafblind People* <http://www.nrcpd.org.uk/>
Scottish Association of Sign Language Interpreter <http://www.sasli.co.uk/policies/registration-policy/>

- A.6.10 Teachers of the deaf should not be used as interpreters, because:
- they will rarely be qualified sign language interpreters (their training only requires a BSL level 1 qualification, which may be sufficient to give a signing vocabulary of a 3-5 year old deaf child)
 - they are unlikely to be familiar with or trained in child protection assessment processes.
- A.6.11 It is unlikely that a specialist social worker will be a qualified and registered interpreter so their expertise could be challenged in court.
- A.6.12 The use of family members should be avoided because they:
- may be abusers
 - cannot be impartial
 - are not bound by a code of confidentiality.
- A.6.13 Protocols should be in place between social care and the police regarding funding interpreters and other specialist communication support and advice. This includes funding for BME and BSL.
- A.6.14 Where an interpreter is required they must be invited to attend the Child Protection Strategy Meeting. This will provide an opportunity to:
- a) Share all information known about the family background and allegations.
 - b) Clarify the child's language.
 - c) Discuss seating arrangements in the interview or Child Protection Conference.
 - d) Discuss camera angles if it is an 'Achieving Best Evidence' interview (both the interpreter and the child's communication must be seen on video).
 - e) Share the names the child uses for body parts and sexual abuse if appropriate.
 - f) Discuss support for the interpreter.
 - g) Discuss how to avoid the interpreter's use of signing and touching parts of the body being construed as 'leading'. It will be necessary to plan and record this prior to interview.
 - h) Establish whether the interpreter needs time in addition to the rapport stage to be able to engage with the child.

Use of Registered intermediaries³⁰

- A.6.15 Deaf children should be offered an intermediary from the outset of an investigation through to interview and trial to ensure that communication between the child and the criminal justice system is accurate, complete and coherent.

As with interpreters, intermediaries should be involved at the outset in the initial child protection strategy meeting in order to help plan how the investigation is to take place and to learn about the specific communication needs of the child in order to inform how any interview is to take place. An initial meeting or meetings with the deaf child may be required with the intermediary accompanied by the investigating officer or involved social worker in order to help the intermediary understand the specific communication needs of the deaf child.

³⁰ An intermediary is someone who can help a deaf child understand questions they are asked and who can then communicate their responses. They can help deaf children who are witnesses at each stage of the criminal justice process, from police investigations and interviews, through pre-trial preparations to court. Intermediaries perform an important function, helping deaf children gain equal access to justice.

Access to advocates

A.6.16 Deaf children should be offered an independent advocate who can support them through child protection processes. Independent advocates provide independent and confidential information, advice, representation and support and can play a vital role in ensuring children have appropriate information and support to communicate their wishes and feelings in a range of settings, including child protection conferences.

Independent advocates must hold a certificate in independent advocacy and have undertaken deaf awareness training. Where deaf children or young people are sign language users then advocates must be accompanied by a registered sign language interpreter (See Appendix 1).

Child protection plan

- A.6.17 If it is decided that a deaf child requires a child protection plan the following points should be considered:
- a) The plan needs to set out how the communication needs of the child will be met.
 - b) The necessary communication support must be available to the deaf child so that she/he can be involved in the review of the plan.
 - c) If this plan involves supervised access arrangements to deaf parents, it is important that the member of staff supervising the contact can communicate fluently to prevent inappropriate influence.
 - d) The past experience of deaf and disabled adults may mean that they too have experienced abuse in childhood - i.e. historical abuse, which also needs to be recognised and may require investigation or the provision of therapeutic services.
 - e) Deaf children should be provided with therapeutic support following abusive experiences. Without this support unresolved issues can show in other ways such as self-harm and challenging behaviour.

Relevant UK Legislation

All UK authorities have a duty to investigate where they believe a child in their authority is suffering harm or at risk of suffering significant harm and decide whether any action is required to safeguard and promote their welfare.³¹

³¹ Section 47 Children Act 1989 (England and Wales) / Section 66 Children Northern Ireland Order 1995/Section 53, 56 Children (Scotland) Act 1995

Appendix 7: Deaf children living away from home, children in care and children who are adopted

Residential establishments

- A.7.1 Social care services must ensure that when deaf children are placed in residential schools or children's homes they are fully aware of their rights, are able to act upon them and can develop and maintain a range of relationships.

This will include:

- a) Access to complaints procedures that they can understand easily.
- b) Access to an advocate of their choice.
- c) Access to technology that will enable communication outside the establishment.
- d) Privacy.
- e) Communication support within the establishment.
- f) Provision of information on how to get help in appropriate formats.
- g) Opportunities to sustain relationships with families/carers and friends.
- h) Meeting the child's communication needs, including ensuring that staff are deaf aware, hearing equipment is available, there is a good acoustic environment, and there are qualified communication support workers if the child relies on sign to communicate.³²

Fostering

- A.7.2 Social care services should ensure deaf children placed with short-term and long-term foster carers live in appropriate environments with people who can communicate easily with them in a meaningful way and in the language with which the deaf child is most comfortable. Carers should be able to meet the needs of deaf children and validate their cultural and linguistic identities.
- A.7.3 NDCS recognises that the low incidence of deafness may make it difficult to identify carers who are sufficiently fluent in sign language where the child's main mode of communication is signing and who can meet other essential criteria for being a foster carer, particularly where short-term care is required. However, foster carers should demonstrate a commitment to develop communication skills and receive support from social care services to do so.
- A.7.4 To help ensure carers can meet the needs of deaf children, social care services should provide a range of services including:
- a) Deaf awareness training and support.
 - b) Communication training and support.
 - c) Advice and help on supporting the deaf child with school work.
 - d) Access to parent support groups.
 - e) Access to deaf role models.
 - f) Access to voluntary organisations.
 - g) Provision of equipment (see Appendix 5).
- A.7.5 The deaf child should be fully involved in the assessment and consulted about their placement. They should have access to an advocate of their choice and know who to go for help if they are experiencing any difficulties or have problems.
- A.7.6 Deaf awareness training should be provided for staff in Fostering and Adoption Services. The child's assigned social worker should also have deaf awareness

³² It is assumed such factors will be a key consideration for education services placing a deaf child in a residential school.

training and be able to communicate effectively with the deaf child. The social workers in the fostering and adoption service and the child's assigned social worker should receive deaf awareness training. Both should be supported by a social worker with a specialism in deafness, particularly the assigned social worker, who will need to develop skills in communicating with deaf children. Where the child uses sign then either her/his social worker should be able to sign to at least Level 3 or be accompanied by a registered interpreter on visits.

- A.7.7 Local authorities and Health and Social Care Trusts should discharge their anticipatory duties under equality and discrimination legislation and take a proactive approach to identifying suitable carers for deaf children who come into public care and offer those carers support and training.

Care reviews

- A.7.8 Deaf children in public care should be given the communication support to fully participate in their annual care ('Looked After') reviews. This should include a registered interpreter where the child uses sign as the main method of communication as well as access to an independent advocate to support them to put forward their wishes and feelings and inform them of their rights.

Deaf children and adoption

- A.7.9 Adoption services should ensure deaf children are carefully matched with adoptive parents who can meet their needs, communicate easily with them in a meaningful way in the language with which the deaf child is most comfortable and support them in a way that validates their cultural and linguistic identities.
- A.7.10 Adoption and adoption support services should include:
- a) Deaf awareness training and support for the parent and wider adoptive family.
 - b) Communication training and support for the parent and wider adoptive family.
 - c) Advice and help on supporting the deaf child with schoolwork.
 - d) Access to parent support groups.
 - e) Access to deaf role models.
 - f) Access to voluntary organisations.
 - g) Provision of equipment (see Appendix 5).
- A.7.11 The deaf child should be fully involved in the matching process and have access to an advocate and support with communicating their views.
- A.7.12 Deaf awareness training should be incorporated into disability training provided for staff in the adoption service and they should also be able to access advice and support from specialist social workers in deafness.
- A.7.13 Local authorities should discharge their anticipatory duties under their equality and discrimination legislation and take a proactive approach to identifying suitable adoptive parents for deaf children.

Appendix 8: Monitoring and review

A.8.1 To comply with their disability equality duties local authorities should collect management information that will enable them to assess the impact of their social care policies and practices and contribute to the strategic planning of services for deaf children.

A.8.2 Management information on social care services cases should identify children with disability by main type and secondary types of disability. For example, local authorities should:

- liaise with audiology services and education to establish the number of children with a hearing impairment
- record the number of children with a hearing impairment who have received early support assessments and received early support services
- record the number of children with a hearing impairment who have received a Children in Need assessment and received Children in Need services
- record the numbers who are referred to social care who subsequently require a child protection plan
- record the number of children with a hearing impairment who are in public care.

A.8.3 UK strategic bodies with statutory safeguarding duties³³ should be aware of the risks deafness poses to the safety of deaf children and young people and keep under review the safeguarding arrangements statutory services make for deaf children.³⁴

Relevant UK legislation

Maintain a register of disabled children (UK).

All local authorities in the UK have a duty to maintain a register of disabled children.³⁵ In Wales additional legislation requires local authorities to keep a register of children and adults with hearing impairments.³⁶ In England local authorities must identify adults (18 years and above) who may need care and support.³⁷

Equalities legislation requires public services to monitor the impact of their policies and services on disabled children.

³³ Local Safeguarding Children's Boards (England and Wales); Child Protection Committees (Scotland); Safeguarding Board of Northern Ireland

³⁴ In England this is a government recommendation in the NHS/Department of Health report *Deafness and Mental Health: Towards Equity and Access*, 2005

³⁵ All UK Children Act legislation; Children Act 1989/Children Northern Ireland Order 1995 Children (Scotland) Act 1995

³⁶ Section 18 Social Service Well-Being (Wales) Act 2014

³⁷ Section 2 The Care Act 2014

Appendix 9: Expertise and skills of social care teams

- A.9.1 It should be clear which social care teams hold designated responsibility for deaf children. This team must have access to a qualified registered social worker who has the relevant expertise in assessing and supporting deaf children. This may be someone within the team or commissioned externally.
- A.9.2 Expertise, in addition to the regular training, skills and knowledge of the social care professional should encompass:
- An understanding of the complexity and variety of linguistic and psychosocial developmental challenges deaf children might face.
 - An awareness of Deaf cultural identity and its implications for deaf children and their families.
 - Experience of the range of 'normal' developmental trajectories of deaf children.
 - An ability to recognise and assess the strengths and needs of individual deaf children within their particular familial and social environments.
 - Formal minimum qualification of either NVQ level 3 or equivalent³⁸ in BSL³⁹.

'Expertise' defined solely by the presence of communication skills (e.g. 'a worker in the social care team is learning to sign') should not be regarded as adequate.

'Expertise' defined by the application of generic children and families or disability related skills/experience in conjunction with communication support (e.g. 'an interpreter is available') should not be regarded as sufficient.

The identified social worker(s) must demonstrate continued professional development relevant to their specialist duties in order to provide evidence of their competence to undertake this role.

- A.9.3 Where specialist deaf or sensory social care teams do exist, supporting both deaf children and adults, it must be ensured:
- Specialist social workers are also appropriately trained to work with children and families.
 - Formal arrangements exist that outline co-working procedures with children and families' social workers as may be required (including specifically in respect of section 47 enquiries, see below).
 - If the deaf/sensory specialist team is structurally located within adult services, formal procedures exist to ensure access to information held in children's services (e.g. adults and children's services computer systems may not necessarily interface with each other).

Government standard (England):

The Government has set a standard that:

The social care needs of all families with a deaf child should be reviewed as part of an initial assessment by the Lead Professional. In all areas there should be available a member of Social Care staff, with appropriate expertise in working with deaf children and their families to respond to the identified needs.

Quality Standards in the Newborn Hearing Screening Programme (NHS July 2008)

<http://hearing.screening.nhs.uk/standardsandprotocols>

³⁸ Equivalent across UK Occupational Language Standards. CILT, National Centre for Languages 2010

³⁹ Or Irish Sign Language in Northern Ireland

Appendix 10: Policy on Advocacy

- A.10.1 Deaf children and young people can have reduced opportunities to communicate and this can often lead to greater reliance on a restricted number of adult caregivers to provide the support to meet their communication needs. This is likely to make them more vulnerable to being harmed.⁴⁰
- A.10.2 Legislation requires social care to offer an independent advocate to children in specific circumstances (see box below). However, it is important when providing any social care service that children's social care considers whether a deaf child or young person requires the support of an independent advocate in order for their wishes and feelings to be suitably promoted. This could be where the wishes of the child conflict with their parent or carer who is informally advocating for them. Where an early help professional feels that a deaf child would benefit from an independent advocate they should first seek advice from children's social care and discuss whether a statutory social care assessment would better support the child and family.
- A.10.3 The involvement of an independent advocate is separate from the requirement for children's social care to arrange a registered interpreter or specific communication professional in all circumstances where there is direct contact with a child who requires additional communication support.
- A.10.4 It is important that independent advocates hold a qualification in advocacy and are able to provide a suitable enhanced disclosing and barring certificate.

Relevant UK legislation

UK legislation requires that in certain circumstances vulnerable children and young people and adults should have access to independent advocacy. This includes:

- children and young people who are in public care (looked after children)
- children who are receiving social care services and wish to make a complaint about the service provided
- children who are subject to safeguarding investigations, safeguarding procedures and care proceedings.

In England under the Care Act 2014 the local authority has a duty to provide an independent advocate when undertaking any of the statutory assessments where it is satisfied that the child, young person or adult without such support would have substantial difficulty participating in the assessment and there is no other appropriate person who is able and willing to help them.⁴¹

⁴⁰ *We have the right to be Safe: Protecting Disabled Children from Abuse: NSPCC 2014/ Deaf and Disabled Children talking about child protection NSPCC 2015 Research Report (K201503)*

⁴¹ S67 Care Act 2014.