

Giving
disabled children
a brighter future



WAKEFIELD AWARENESS & SUPPORT PROJECT (WASP)



WASP



WASP is funded by Wakefield CCG and delivered by KIDS.

WASP is unique in its approach in supporting families of young people either on the Autistic Spectrum (diagnosed or under investigation) or who have other neuro-developmental conditions. WASP is not diagnosis led.

WASP offers two distinct elements which work in collaboration with each other to support both the parents/carers and the young person with a bespoke package of support.

The Projects Aim

The Aim of the project is to work alongside existing commissioned services to identify young people with ASC or other neuro-developmental conditions who require support around their emotional wellbeing in order to prevent a deterioration which may require more potentially intense intervention. Intervention practitioners work with the young person to provide time limited interventions to support their wellbeing and resilience and to signpost to other available services.

In addition to this a second program runs alongside to work with the parents/carers of the young person. This intervention aims to allow parents with lived experiences to support others and to build resilience/confidence in order that they can support their young person in seeking appropriate help in the future.

REFERRAL PROCESS

WASP receive their referrals from their partners in the project WESAIL Banardos. WESAIL are commissioned to take referrals and complete an initial triage process.

Jack's parents had Initially contacted WESAIL for support. Following a conversation with the duty worker at WESAIL a referral form for WASP was completed.

Once WASP have received the referral form an initial phone call is made to the family to obtain consent. Following consent being received by the family the WASP intervention Coordinator contacts the family to triage the referral and establish an intervention plan.



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Jack was referred to the WASP project on the 17th August 2020 and was assessed as meeting WASPS level 4 criteria:

<p>Level 4: Priority Targeted dual stream support</p>	<p>Click for more info Wakefield Autism Support Project (WASP)</p> <p>Any or all of Levels 1,2 and 3 plus:</p> <ul style="list-style-type: none"> • complex, multi-agency needs • Possible safeguarding concerns • assistance in overcoming serious breakdown in communications with school/LA/other services • requires intensive support due to personal circumstances (e.g. low literacy levels, learning or sensory difficulties, English as a second language) 	<ul style="list-style-type: none"> • <i>Families will be on the brink of crisis often having exhausted the support of other services.</i> • <i>Outcomes for the families will revolve around solving the immediate difficulty and ensuring lines of communication are in place with other services prior to exit</i>
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During the initial phone call between dad and a WASP practitioner dad explained how Jack's behaviours had been escalating since he turned 16 and that he was presenting daily with behaviours that challenge, and dad was the primary target. Both parents identified that as a result of this escalation they were struggling to manage and keep each other safe.

Parents did implement strategies, however, with the escalation in behaviour they were regularly relying on support from the police to keep themselves safe.

Prior to WASP becoming involved the family had on one occasion phoned 999 for an ambulance to try and get crisis support through A&E as advised by their GP. They had also made 6 calls to 999 for police assistance in the last 18 months.

Parents told WASP the following information:

- Jack had attacked both parents on occasion leaving several bites and bruises on them
- Jack often damaged property in the home for example on one occasion smashing the WIFI box.
- Jack's violent outbursts often resulted in his parents having to restrain Jack and then calling the police for everyone's safety.
- Verbal aggression along with physical aggression was also directed towards parents.

INITIAL INTERVENTION PLAN

- Referral made to Occupational Therapy to assess sensory needs
- Meeting with social worker to discuss respite. WASP coordinator submitted a referral for an assessment for short breaks
- Meeting with college to understand how Jack presented when attending lessons.
- One to one face to face interventions to be delivered in the family home by WASP. This includes parent support.
- CAMHS assessment was put through by WASP
- WASP advised the parents to book a Learning Disability health check.



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Escalation of incidents

In November Jack's behaviour began to escalate again leading to a serious incident. On the 4/11/20 the social worker working with the family emailed the WASP practitioner to inform them of an incident at the family home. The WASP practitioner received a missed call from Dad shortly after receiving the email. The WASP practitioner contacted the parents. During the call the situation could be heard to be escalating with Jack's behaviour becoming more aggressive, with threats to stab his parents with a knife being made. The practitioner involved contacted the police and other senior team members whilst staying on the phone to the family to offer support and reassurance. Following this incident and a case discussion between WASP practitioners the decision to escalate the situation was made and an emergency meeting arranged with members of the Local Authority and CCG to highlight the situation and plan a response to support the family.

The following actions were agreed at the meeting;

- The family would be transferred to the Complex Care Team to provide a disability focused assessment of need and consider identification of emergency respite care.
- An emergency Paediatrician appointment to assess Jack was organised by the CCG with a WASP practitioner supporting the family to attend.
- Liaison to take place between the Complex Care needs team, and social worker within the adult team to complete an adult social care needs assessment.
- Referral for an Educational Psychology made and accepted for assessment along with a Clinical Psychologist assessment.

Following the meeting Jack immediately began to receive overnight respite of two nights per week. Due to a further escalation in incidents after the meeting a 7 night residential placement was agreed at a local setting. WASP supported parents around visits and Child in need meetings. The Paediatrician appointment was arranged for Jack to have a full health assessment. The WASP practitioner accompanied the family to support and also detail observations they had noted during sessions with Jack. Appropriate referrals to neurology and Special Educational Needs dentist for full examination occurred as a result.

The 'Team around the Family' now includes a Child and an Adult Social Worker, CAMHS, specialist respite and College. Jacks EHCP needs and provision will now be reviewed and considered taking into account information from Education, Health, and Social Care.

The case is now closed to WASP

**Thank you for Listening
Any Questions?**