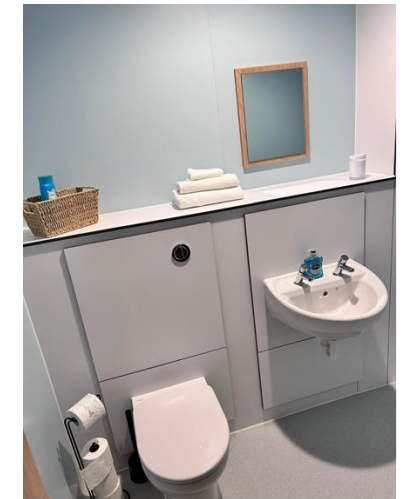
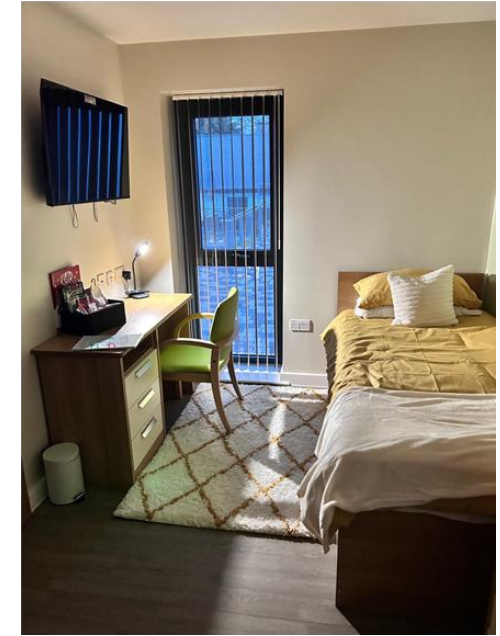


Bwthyn Y Ddol / Eryri

Nicola Orme



Introduction to the service



Families in scope

Bwthyn Y Ddol

- Families where there is a high opportunity of returning home
- Families committed to making changes
- Children returning to their County - Conwy or Denbighshire, as part of transition/ step down plan
- Children in need of 24 hour observation and assessment

Eryri

- Children with emergency family crisis - significant abuse/harm from parent/carers
- Immediate placement breakdowns
- Children who are PPO'd
- Children living with parents who won't engage in a Care and support and whose risk significantly increase
- Children once they are fit for discharge with no identified long term residential placement available, (subject to risk assessments) with robust transition and support plan.

Out of scope

Bwthyn Y Ddol

- Children without a named allocated worker
- Children where decision already made for long term care
- Children in PLO process
- Specialist assessments for Court
- The children with unstable mental health needs
- The children with long term profound physical disability needing long term care

Eryri

Children who need 136 assessments

Children with continuing mental health needs that remain unregulated

Conwy Edge of
Care

Denbighshire
Intervention Panel

Referral completed

managers.bydresidential@conwy.gov.uk & BYD.Admin@conwy.gov.uk

Initial Consultation
Meeting : RM, MDT Manager, DCC Manager, CP and SW

**Bed
available**
accept for
next stage

Panel meeting - Priority Scoring tool
to be completed for all those on
priority need list to determine who
needs the bed the most

Transition phase begins
Key worker allocated
MDT worker allocated
Review meetings to be arranged

Yes but no bed
available: on
Priority need list

**Community
intervention
only**

MDT worker
allocated
Review meetings
set up

**Further Info
Required**

Back to consultation
up to 1 week later:
admin to book
review

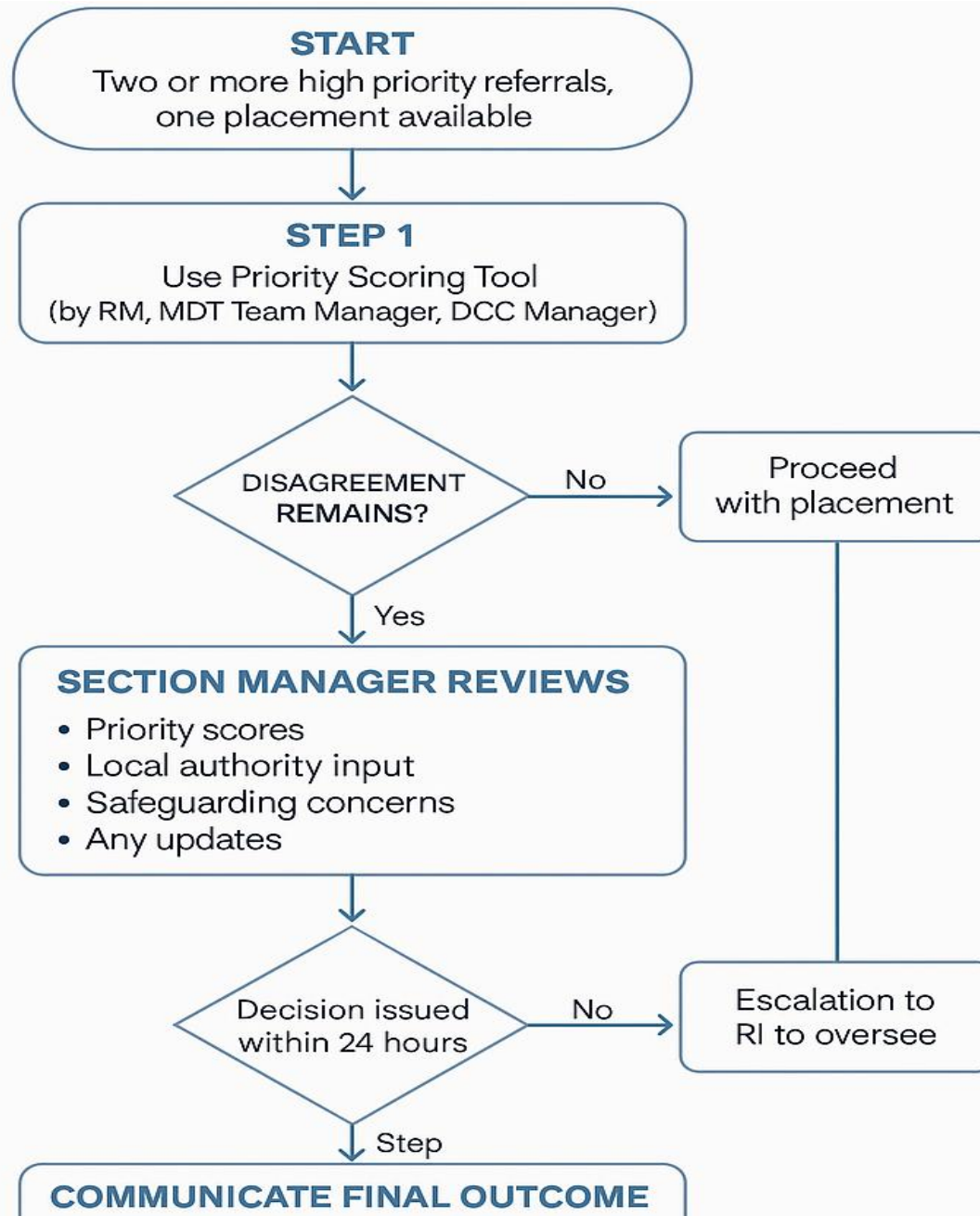
No does not
meet criteria

Refer back to Edge of
Care

Priority Scoring Tool



Microsoft Word
Document



Start: Two or more high-priority referrals, one placement available

Step 1: Use Priority Scoring Tool

Scoring by RM, MDT Team Manager, DCC Manager

Disagreement remains?

Step 2: Escalation to Section Manager

Section Manager reviews scores, LA input, safeguarding concerns, updates

Section Manager available?

Decision issued within 24 hours

Escalation to RI to oversee

Step 3: Communicate Final Outcome


Managers informed of decision and rationale

Unsuccessful referrer offered alternatives

Child remains on priority list (admin updates)

Outcome logged for quality assurance

Transition Phase

- Aim for 1 week – maximum of 2 weeks.
 - No timescale – Depends on family.
 - Meet YP & family – Therapeutic Team.
 - Documentation given to YP/Family/Carers.
 - Complete interest checklist/ All About Me.
 - Complete My Star & Family Star.
 - Visit to the residential setting/ Proactive approaches.
 - Planning residential element i.e. what it looks like, how often will family visit, sleepover/weekends. (Alignment meeting – expectations/boundaries/pocket money)
 - Regular Review Meetings – BYD Therapeutic Worker.
- 

Phase 1: Up to 8 Weeks

- Weekly Sessions – Min of 2 Home Visit with YP/Parent/Carer and 2 Direct sessions with YP.
- Daily Residential Team Observations to Support Assessments.
- Engagement and Relationship Building.
- Assessment, Formulation and Re-Formulation.
- Baseline Measures and Weekly Mood Ratings with YP.
- Weekly Review Meetings and Extra time for BYD Planning (Multi-agency and MDT) and Parents if Appropriate.
- Daily Residential Handover Meetings.
- BYD Team Monthly Formulation Meetings.
- Individual Assessments Completed.
- Neurodevelopmental Profile Completed/Started.
- Observations at Home and School.
- Eco map, Miracle Question, Value and Strength Cards, Sensory Questionnaire.
- 6-8 Weeks – Family mid Review Meeting – Initial Assessment and Formulation Report – Action/ Intervention Planning.

MDT Process

Reports:

- **Community** = 3 weeks.
- **Emergency** = 3 weeks.
- **Residential** = 6 week report.
- **If work completed in the community first and then move in to BYD** = timescales will be discussed at individual basis / at the review to see whether we have enough information to provide report in three weeks of moving in or whether we need to restart the 6 week report due to changes that have occurred / engagement difficulties.

The reports will be QA by MDT Team Manager (signature on report).

Reviews:

Reviews – to align with the individual reports:

- Week one of moving in
- Week 3- if this has been agreed at first review.
- Week 6
- Week 12

Community Cases:

- 3 weeks
- 6 weeks
- 12 weeks.

However there may be a need for an urgent MDT for child if there are any concerns / reoccurring concerns such as child going missing from home.

Phase 2: 8 Weeks +

- X2 Sessions Family/Carer – X2 YP
- Daily Observations Supporting Residential Team.
- Assessment, Re-Formulation and Intervention Continues.
- Continue Weekly YP Mood Ratings
- Continue to Inform Action Planning at Multi-Agency and MDT Levels.
- Start Interventions Moving Home to Family/Carers.
- Transitioning to Alternative Care Placement.
- Planned Paced Closure/Discharge from BYD.
- Repeat Baseline/Bespoke Measures.
- Update All Child-Centred to YP/Family/Carers.
- Write End of Intervention Reports – Up to date Formulation of Child and Family System.
- Reports – Person Centred to YP/Family/Carers.
- Professional Report to Referrer.
- Gain Service User Feedback (YP and Family/Carer).
- Collaborative Recommendations.
- Close – Follow Up 3 Months Later By BYD Admin Feedback Form.

Tools

- Consent
- Risk checklist/Safety Plans
- Semi-structured Interviews
- Motivational Interviewing
- Time-lines
- Discrepancy Matrix
- Interest Check List
- Sensory Questionnaire
- Part 6
- Care and Support Plan

- Ecomaps
- Observations - Behavioural, Relational, Systemic & Psychological Functioning.
- Specific Measures*
- Collaborative Formulation
- What Matters
- Value and Strength Cards
- Miracle Question

- Agreed formulations
- Repeat any specific measures*

Measures

- SDQ (C= & P)
- CGAS (MDT)
- Outcome Star
- GBOS/Goals
- SDQ (P,C,T)
- SCORE 15*
- WEMWEBS
- RCADS or MFQ
- 5 P'S/PTM Framework

Referral and Initial Contact.

Social Worker/EDT Submits Referral.
Immediate Phone Confirmation.
Out of Hours Managed By On-Call Manager.

Admission Process

- Low level compatibility assessment
 - Basic Data collected
 - Signed S76
- Child Welcomed and Key Worker Assigned.



Full Initial Risk & Compatibility Assessment. (Within 24 hours)

Management Team Conducts Impact Risk Assessment
If Issues, Safety Measures Implemented Personal Plan Created Within 24 HRS.

Unplanned Admissions Meeting

– Determines Placement Length, Risk Strategies, Includes Social Worker, Residential Manager, MDT.




Planned Admissions Process Bwthyn Y Ddol

-  Referral to LA Placement Panel
-  Suitability Assessment and Transition Plan

Return home pathway

Weekly MDT Reviews
Referral edge of care /intensive support panel
Final Assessment Before Discharge

Departure and Aftercare

-  Move-on Plan Within 72 Hours
-  Structured Aftercare Plan (Planned)
-  Feedback Collected For Improvements