

**YWCA Yorkshire Green Gables Service**

**Selection & Allocation Process**

**Floating Support Service for Families**

**&**

**Supported Accommodation for young families or parents to be**

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**YWCA Yorkshire Green Gables Service**

**Selection & Allocation of Applicants**

**Introduction**

The purpose of our service is to assist and support vulnerable families to reach their full potential. In order for us to support any applicant a general assessment of needs is undertaken through the completion of a referral application. A meeting with the applicant is then undertaken to confirm the details given in the original application form and to gather as much information to ensure that we are the right service provider to support the needs of the whole family.

**Aim**

Our aim is to provide early help and respond to the needs of children, young people and families to ensure that they get the right support at the right time, with the hope parents provide a safe and nurturing home environment and sustain independent living in a secure family home.

**Objectives**

* Enable families to sustain their tenancies and engage in their local community positively to the extent of which they choose.
* Building on their strengths, help families to live well in their community where they have choice and control about how their needs are met.
* To provide resettlement and support to new parent/s with children in their care, to manage their accommodation.
* Give emotional support and advice, advocacy and liaison (support to raise self-esteem - identify and maintain emotionally healthy relationships), support to access specialist services where necessary.
* Establish and maintain social contacts and activities (support to find and access local community and leisure facilities, clubs, support groups).
* Advice and assistance in relation to personal safety and security (provide learning opportunities around keeping safe in all areas of life).
* Supporting with safeguarding, health and well-being both for the parent/s and child/ren.
* Support to access educational and employment opportunities including accessing relevant access to suitable childcare
* The Service shall support families to access specialist services including health, substance misuse and benefits services and voluntary organisations.
* Enable families to develop coping strategies and a support network which will help them achieve their optimum level in independent living and social engagement.

**Service Availability**

The number of contracted hours delivered per family will be flexible, based on individual needs recognising that some individuals with very complex needs will potentially have more intense support requirements. The number of hours per family will flex and respond to changes in need throughout their journey to provide support as and when it is required. As a minimum a 1-hour visit is given.

Pre-service Support (Interview)

Our interview process can support families who are living with friends, other family members or sofa surfing and need support to establish, set up and make other arrangements.

Our service can support families living apart or in unsuitable living arrangement which are not conducive to a family stable life. We will provide advice and guidance to access, set up and maintain a permanent home for the family and provide independently living skills to ensure tenancy sustainment as well as parenting skills (if appropriate).

Floating Support

* Support can be given to families for up to 18 months.
* All individual families will be given an allocated Project Worker
* The project is family lead therefore appointments can be available from 8am-7pm Monday – Saturday in consultation with the allocated project worker.
* Office hours are 9am-5pm, Monday – Saturday.

Accommodation Support

* Two-bedroom flats or two/three-bedroom houses available.
* All accommodation is fully furnished and decorated to a high standard.
* All tenures are assured short-hold tenancies.
* All communal areas are accessible to young women using the service.
* Support can be given to young families or parents to be for up to one year.
* The project is family led therefore appointments can be available from 8am-7pm, Monday-Saturday in consultation with the allocated project worker.
* Office hours are 9am-5pm, Monday – Saturday.

**Service Eligibility and Contact Details**

Floating Support

* Single parent or a couple age 16 and above, mothers to be should be at least 12 weeks into their pregnancy
* Mothers/fathers/carers who have a child/ren in their care of any age
* Have a need to develop parenting skills to maintain a safe and secure family unit
* Wish to participate in and complete a parenting skills program
* Have a tenancy/own home or living with friends or relatives
* Have a need for housing related support to establish and/or maintain and independent tenancy or licence
* At risk of homelessness or the breakdown of a tenancy or licence
* Be willing to work with the support service and other relevant agencies to complete an outcome focussed support plan

**YWCA Yorkshire, Green Gables, 63 Church Street, Conisbrough, Doncaster, DN12 3HP**

**Contact Number: 01709 911201**

Accommodation Support

* Parents should be aged between 16 – 25 years, children of any age or 12 weeks pregnant
* Live in the borough of Doncaster or have a local connection
* Need support to develop independent living skills, parenting skills and support to maintain a safe and secure family unit
* Be willing to engage with the support service and other agencies to complete an outcome focussed support plan
* Under 18-year-olds will be provided with an equitable tenancy agreement and will require a trustee.

All applicants must meet the qualifying criteria to join Doncaster Housing Register. This is to ensure that Green Gables can ensure applicants have a successful planned move from the service.

Applicants who do not qualify for Doncaster Housing Register include:

1. Applicants or members of the household who have a history of significant anti-social behaviour which may include violence or threats of violence to staff or agents of Doncaster Council, St Ledger Homes, registered providers, previous landlords or the police
2. Applicants with a history of significant unsatisfactory tenancy conduct
3. Applicants with housing related arrears that are equivalent to 8 weeks rent arrears

**YWCA Yorkshire, Green Gables, 63 Church Street, Conisbrough, Doncaster, DN12 3HP**

**Contact Number: 01709 91120**

**Referral Process Family Support Service**

Stage 1:

* On request for a referral form to the service all applications will be sent out promptly or will be advised on how to complete our on-line referral form. Green Gables will accept the ‘Single Point of Access’ referral form.
* On receipt of the referral form a telephone assessment is made within in one working day to go through the first stage of the initial application process.
* The referring agent and applicant will be informed of the outcome of the first stage and if successful move into the second stage. Further information regarding other support will be provided at this stage.

Stage 2:

* Once an interview date has been arranged, we will contact the referring agent and they will be invited to accompany the applicant to complete a joint evaluation (initial assessment) to identify support needs (See appendix 1 -Skills Assessment)
* If it is felt that the family would benefit from an immediate Early Help Assessment we would make this recommendation to the referring agent and notify the early help hub.
* On completion of an interview (initial assessment) a decision will be made on the suitability of our service to meet the applicant’s needs.
* In urgent cases following assessment, to minimise risk and deal with immediate challenges, support interventions and referrals to other agencies or/and through the Early Help module may need to be initiated with the family’s agreement.

**Referral Process Accommodation**

* On request for a referral form to the service all applications will be sent out promptly or will be advised on how to complete our on-line referral form. (See attached referral application 4.2)All applications received are monitored through the referral tracking process. See appendix 1. Green Gables will accept the ‘Single Point of Access’ referral form.
* A telephone call is made within in one working day inviting the applicant to interview on receipt of a completed referral form.
* Once an interview date has been arranged, we will contact the referring agent and they will be invited to accompany the applicant to complete a joint evaluation (initial assessment) to identify support needs (See appendix 2 - 4.3 Skills Assessment
* If it is felt that the family would benefit from an immediate Early Help Assessment we would make this recommendation to the referring agent and notify the early help hub.
* An interview will be offered within five working days. On completion of an interview (initial assessment) a decision will be made on the suitability of our service to meet the applicant’s needs.
* In urgent cases following assessment, to minimise risk and deal with immediate challenges, support interventions and referrals to other agencies or/and through the Early Help module may need to be initiated with the family’s agreement.

**Declined Applications**

Where it is felt universal services can meet the needs of the family and support needs are minimal applicants will be given advice and information of alternative support providers. All attempts will be made to work with any risks associated with any family unit.

* Our accommodation is within close proximity to those of other young families and the general public. In order to minimise the dangers associated with fire, young families with proven offences of arson will not be considered.
* To aim to eliminate risks to young women living in our accommodation, many having suffered violence and abuse in the past, referrals for young families with proven histories of violent and threatening behaviour will rarely be accepted.
* It is expected that anyone who has formerly been addicted to drugs and/or alcohol will have been drug free for at least 12 months before a referral will be considered.

**Right to Appeal**

If an application is not successful, there is a right to appeal. The appeal should be made in writing to the Project Manager at the address shown below. It will then be referred to the Chief Executive for consideration under the YWCA Yorkshire complaints procedure.

**Janine Egan, Project Manager, Flat 9 Green Gables, Wath Road, Mexborough, S64 9ED**

**Support available**

YWCA Yorkshire is fully committed to safeguarding the welfare of all children and young people. It recognises its responsibility to take all reasonable steps to promote safe practice and to protect children from harm, abuse and exploitation. When managing risks, we will promote independence through being transparent in our approach and explore appropriate risk taking with the Service User. Appropriate risk taking will be promoted throughout the whole of the needs assessment process rather than being risk avoidance.

We will provide support to families who are already living in their accommodation but require parenting and/or independent living skills as well as housing related support to maintain their accommodation, avoid crisis and prevent homelessness.

We will support families to access:

1. Help with welfare benefit applications and other information including information, advice and guidance on budgeting and personal finances
2. A benefit check, ensuring benefit entitlements are in place to maximise income
3. Other statutory or voluntary or privately provided services, education and/or employment
4. Educational, training, volunteering, work and social opportunities
5. Facilities and opportunities for healthier living
6. Parenting Skills
7. Health services including antenatal support, health visitors, and midwives
8. Family hubs and parenting support in the community
9. Referral to Doncaster Trust Services parenting programs if required
10. Drug & Alcohol services
11. Mental Health services
12. Domestic Abuse services
13. Formal advocacy services
14. Other health related services including GP, Sexual Health, Dentist and Smoking Cessation
15. Registration and support to engage regularly with Family Hubs and Community Led Support drop in’s

**Assessing Priority Need**

* The initial assessment completed at interview will provide information to enable the project to have a ‘planned approach’ through pre-empting the potential support the applicant would require when accessing the service. (see appendix 1 initial assessment)
* Applicants are assessed by allocating appropriate points to the most significant parts of the referral application and interview process. (see appendix 3 Priority Need)
* All applicants and referring agents will receive an invitation to interview within 5 working days of receiving the application form. Where an applicant finds it difficult to attend the interview we will try and reduce barriers by offering other solutions e.g. funding, other interview location.
* In conclusion of the interview, the applicant and the relevant agency will be informed in writing of the team’s decision. (Within 7 working days)
* If successful the applicant and referring agent will either be given a start date or moving in date or be placed upon our waiting lists where they will be contacted by telephone every 4 weeks to keep them informed of vacancies if any at the project. It is important that the referring agent and the applicant contact the service with any changes that may affect their application. Where the project cannot contact the applicant, the applicant will be given 14 days to confirm to the project whether they still require the service or not. Failure to respond to the 14-day letter will result in the applicant being removed from the waiting list and the referring agent will be informed.
* All un-successful applicants and referring agents will be notified in writing why they haven’t been successful and alternative services of support will be offered.
* Housing Options will be contacted each time we have a vacancy in our accommodation service.
* **Where there are multiple needs all children and young people who access the service may be subject to an Early Help assessment – the family should be made aware of this by the referring agent. If the family is subject to a Child Protection or Child In Need plan a generic family assessment will be completed.**
* **Any applicant age 16/17 years of age will be referred to Doncaster Children’s Service via the Early Help Hub. The support needs will determine the referral pathway.**



**Appendix 1**

**Initial Skills Assessment**

This is the first step in developing a holistic person-centred assessment to identify the support needed once accepted onto service. This initial assessment will influence future support and risk management plans.

|  |  |
| --- | --- |
| **Name:** | **Date & Time:** |
| **Interview Location:** | **Present in Interview:** |

|  |  |
| --- | --- |
| **Referral Form Application**  (tick to confirm) | |
| Confirm age & D.O.B □  Confirm N.IN.NO □  Current Partner Details □  Child/ren Details □  Are you/partner pregnant □  (If yes what is the due date………………………..) | Overview of service & key work commitment □  Explain EHA & Single Agency Form □  Explain Data Protection □  Explain Confidentiality & Information Sharing □  Provide Green Gables Information Booklet (send in post if phone interviewed) □ |

|  |  |
| --- | --- |
| **Child/ren’s Details (If not included on referral form)** | |
|  |  |

|  |  |
| --- | --- |
| **Accommodation Only** | **Responses** |
| Have you held a previous tenancy? |  |
| Awareness of Move-On Qualification is essential (58 hours) in total |  |
| If you have answered Yes is there any outstanding council tax or rent arrears?  Previous St Leger tenant - rent arrears? Eviction? Damage to property? Anti-social behaviour? Money owed to St Leger/repairs for damage to property? |  |
| Connection to Doncaster - lived for past 3 years, have close family members or work? |  |
| Benefit entitlement - Is the client in receipt of benefits Yes/ No - if not are there any reasons that the client will not have entitlement? |  |
| Leaving care - Is the client leaving the care of the Doncaster Council Yes / No - if Yes, the local authority may have some liability for payment for our supported accommodation if benefits are not yet in payment |  |

Pathway Journey

Please use the scoring below to identify the level of support needs.

Critical (1-2)

**Cannot see a clear pathway:** Living in crisis or struggling to recognise problems, doesn’t identify the benefits to change.

Intensive (3-4)

**Accepting support with my pathway:** Willing to accept and engage with support. Starting to accept and recognise the need to take responsibility for problems.

Moderate (5-6)

**Working through my pathway:** Introduced coping strategies and has a range of problem solving skills, feels motivated towards change and willing to receive help, has the ability to deal with change.

Low (7-8)

**Completed my pathway:** Built good resilience tools to deal with adversity and support is no longer required.

|  |  |  |
| --- | --- | --- |
| **Outcome** | **Support & Tier Level Needed**  **CIML** | **Initial to Confirm Transfer into Support Plan** |
| 1. **Health** |  |  |
| 1. Does the client need support to better manage their physical health? (sexual health, diet, hygiene, smoking, registration with health services, increase physical activities? |  |  |
| 1. Does the client need support to manage their mental health? (hygiene, emotions/feelings, access to specialist services, aids/adaptations, bonding & attachment) |  |  |
| 1. Does the client need support to better manage their substance misuse issue? |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| **Outcome** | **Support & Tier Level Needed**  **CIML** | **Initial to Confirm Transfer into Support Plan** |
| 1. **Emotional Wellbeing** |  |  |
| 1. Emotional & social response the individual gives to others, managing behaviours |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| 1. **Lifestyle** |  |  |
| 1. Include lifestyle, self-control, substance use/abuse, violent, aggressive, inappropriate behaviour, effects on children |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| **Outcome** | **Support & Tier Level Needed**  **CIML** | **Initial to Confirm Transfer into Support Plan** |
| 1. **Identity** |  |  |
| 1. Self-esteem & confidence, family dynamics, self-image, social presentation |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| 1. **Relationships** |  |  |
| 1. Ability to empathise, build stable & affectionate relationships with others, making friendships |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| **Outcome** | **Support & Tier Level Needed**  **CIML** | **Initial to Confirm Transfer into Support Plan** |
| 1. **Independence** |  |  |
| 1. The development of practical, emotional & communication abilities to increase independence |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| 1. **Education & Learning** |  |  |
| 1. Does the client need support to participate in training/education? |  |  |
| 1. Does the client need support in accessing/participating in leisure/cultural/faith and or informal learning including parenting? |  |  |
| 1. Access to employment, being work ready, volunteering? |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| **Outcome** | **Support & Tier Level Needed**  **CIML** | **Initial to Confirm Transfer into Support Plan** |
| 1. **Safety & Protection** |  |  |
| 1. Does the client need support to comply with statutory orders and related processes in relation to offending behaviour/ASB, probation, police, court orders? |  |  |
| 1. Does the client need support to better manage self-harm? |  |  |
| 1. Does the client need support to avoid causing harm to others i.e. Safeguarding CP/CIN? Include ability to keep safe, children safe from danger. |  |  |
| 1. Does the client need support to minimise harm/risk from others i.e. Domestic Abuse, Bullying, Inappropriate Visitors, Court Proceedings, Court Orders, CSE |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| 1. **Family** |  |  |
| emotional warmth with child/ren, Include participation in learning, group work, provides child/ren with Boundaries/learning/stimulation, support in establishing contact with family? |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |
| **Outcome** | **Support & Tier Level Needed**  **CIML** | **Initial to Confirm Transfer into Support Plan** |
| 1. **Housing/Social Community &Finances** |  |  |
| 1. Does the client need support maintain their accommodation; avoid eviction, tenancy rights, ASB, repairs? |  |  |
| 1. Does the client need support to secure/obtain settled accommodation i.e. housing, bonds? |  |  |
| 1. Does the client need support to establish contact with external services/groups within the community, knowing where to go for support? i.e. schools/children centre/Library/Housing, voting, establishing good networks? |  |  |
| 1. Living arrangements, environment, amenities, finances, budgeting, maximising income (benefit support), reduce debt, rent arrears, gambling? |  |  |
| **Further Details including Risk Management** | **Action Plan** | |
|  |  | |

|  |  |
| --- | --- |
| **Other Information:** | |
|  | |
|  | **Yes / No** |
| Do you have any pets? |  |
| Are you receiving support from any other agency? |  |
| Are there any risks to self/others/staff from people who live or visit the property? |  |

|  |  |
| --- | --- |
| **Confirmation of Support Needs** | |
| I agree that the Early Help Assessment process has been explained to me. I understand the Green Gables Data Protection and Confidentiality policy. I understand that information will be shared with the referrer, social worker (if applicable) and any other services that may be able to offer support to me and my family. I agree the information I have provided is accurate. | |
| **Client Signature:** | **Date:** |

|  |  |
| --- | --- |
| **GG Signature:** | **Date:** |
| **Referral Signature:** | **Date:** |
| **Overall Support Tier:** Critical / Intensive / Moderate/ Low | |
| **Only for 16/17 Year Olds:**  Any young person requiring the support of our service or if the young person is in housing crisis or has nowhere settled to stay (including sofa surfing) a referral will be made to Children’s Services via the Early Help Hub, unless there are additional safeguarding concerns in which case the referral will go directly to Referral & Response Team on: 01302 737777  **Referral made to Early Help: Yes or No (please circle)** | |

**Appendix 2 (Accommodation Only)**

**Priority Need Assessment**

|  |  |
| --- | --- |
| **Details** | **Please indicate** |
| Name of Applicant: |  |
| Contact Number: |  |
| Flat/House/FS |  |

|  |  |  |
| --- | --- | --- |
| **Priority Need** | **Point Available** | **Points Allocated** |
| AGE |  |  |
| 1. 16-17 *accommodation only* 2. 18 – 25 *accommodation only* | 20  10 |  |
| CURRENT HOUSING SITUATION |  |  |
| 1. Homeless other e.g. sofa surfing, living in hostel, fleeing domestic abuse 2. Unsuitable accommodation e.g. risks, hygiene, property, living with family (negative). 3. Living with family (Positive) 4. Own tenancy | 15  10  5  5 |  |
| DEPENDENTS |  |  |
| 1. 3-6 months into pregnancy 2. 7-9 months into pregnancy 3. Children | 5  10  15 |  |
| SOCIAL CARE |  |  |
| 1. Child Protection 2. Child in Need | 20  10 |  |

|  |  |  |
| --- | --- | --- |
| **Date entered onto waiting list:** | | |
| **Date of contacted** | **Case Notes updated Yes / No** | **Staff Initials** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**LEVEL OF SUPPORT** (please tick appropriate level as identified from skills assessment and in line with DMBC Safeguarding Threshold, Continuum of Need)

1. Level 1 / Low level support □
2. Level 2 / Moderate support □
3. Level 3 / Intensive support □
4. Level 4 / Critical intervention □