# Corporate Director: Vicky Schofield

**Service Director: Jenny Lingrell**

**Specialist Short Breaks Team Team**

Room 229, County Hall

Wakefield WF1 2QW

T 01924 306065; E SEND@wakefield.gov.uk

Typetalk calls welcome

Dear Parent/Carer

The Summer Playscheme Groups for disabled children and young people between 5 and 17 years of age are once again being organised by Wakefield Council. We have a long track record of successful schemes and receive great feedback from our attendees.

The Summer Groups will offer children in Wakefield the opportunity to enjoy group activities in a supportive and safe environment. This year’s Provider Information is attached and gives more information about each provider, the venue, times and activities available. Each young person is eligible for up to 1 week.

Transport

As in previous years, transport to and from the Summer Playscheme Groups is **not** provided.

Activities

We are working with Providers to deliver a mix of group activities across the Wakefield District. Please note that not all of the Providers cater for personal care and/or health needs. We will check suitability based on the completed All About Me form (also attached).

Applications

To apply for a place, please complete in full the **Preference Form**, the **All About Me Form** and **Consent** **Form**. Due to the high demand for places, we cannot guarantee that everyone who applies will be allocated a place. Places will be allocated based on suitability and availability (on a first come, first-served basis). It is important you tell us which dates your child is unable to attend so we can allocate alternative dates if the preferred week is not available.

**If your child already receives support through Specialist Short Breaks, they will not be able to apply for a place on the summer groups.**

**All forms attached with this letter must be completed in full in order for the application to be accepted. The deadline for applications is Monday 24th June 2024.**

Please send completed applications by post or email to:

**Post**

Specialist Short Breaks Team

Room 229, County Hall

Bond Street

Wakefield

WF1 2QW

**Email**

Email the forms to [sendshortbreaks@wakefield.gov.uk](mailto:sendshortbreaks@wakefield.gov.uk) and we will acknowledge receipt of your email.

Successful Places

If your application is successful, you will receive a confirmation letter with more information by Friday 5th July 2024.

Payment

The confirmation letter will also include information about payment, if applicable. All payments **MUST** be made before the start of the Summer Groups. If payment is not received by **Monday 15th July 2024** your child’s place will be cancelled. If your child is eligible for free school meals their sessions will be free of charge.

If you require more information or help, please feel free to call the Specialist Short Breaks Team on 01924 306065 or email [sendshortbreaks@wakefield.gov.uk](mailto:sendshortbreaks@wakefield.gov.uk)

Yours Sincerely

Laura Cole

Laura Cole

Acting Specialist Short Breaks Manager

**Play Scheme Provider Information 2024**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Provider** | **Address** | **Age** | **Activities** | **Days and Times** | **Approximate Staffing Ratio**  **Staff:Child** | **Cost per week** \*\* |
| **Carers Trust** | Standbridge Lane Community Centre, Standbridge Lane, Wakefield WF2 7NP | 5 – 17 years | Fun filled summer days for children and young people with disabilities throughout August 2021 for children and young people up to 17 years   * Enjoy making new friends * Chances to find different things to be good at * Accessible venue with space to enjoy being active and play games * Specially trained staff available to provide personal care * Support for a wide range of complex needs   Able to support CYP requiring personal care and medication. | Monday – Friday (5 days)  10am - 3pm  Week 1: 29th July – 2nd August  Week 2: 5th – 9th August  Week 3: 12th – 16th August  Week 4: 19th – 23rd August | Minimum of 1 staff to 2 young people (depending on need) | £47.00 |
| **Endorphins** | Lock Lane Sports Centre  Lock Lane  Castleford  WF10 2JU | 8 – 18 years | Whether it’s dance, drama, arts & crafts, gaming or other games and activities, this group is a safe and supporting inclusive sessions which is a great way for SEND children and young people to have fun, make friends and flourish.  Able to support CYP requiring personal care and medication. | Monday – Friday (5 days)  10am - 3pm  Week 1: 29th July – 2nd August  Week 2: 5th – 9th August  Week 3: 12th – 16th August  Week 4: 19th – 23rd August | Minimum of 1 staff to 3 young people (depending on need) | £55.00 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Old Quarry Adventure Playground** | Sycamore Avenue  Knottingley  WF11 0PJ | 5 – 12 years | Typical activities:  Adventure play, bouncy castle, water play, team games, arts and crafts, music, den building, natural construction, tie-dye, campfire cooking, messy play, exciting outdoor environment.  Unable to support CYP requiring medication and personal care.  **Please Note:**  Old Quarry is open access and other children will also be able to access the playground | Monday – 10am – 1pm  Thursday – 11am - 2pm  Friday – 12pm – 3pm  (3 days)  Week 1: 29th July – 2nd August  Week 2: N/A  Week 3: 12th – 16th August  Week 4: 19th – 23rd August | Minimum of 1 staff to 2 young people (depending on need) | £25 |
| **Snydale Riding for the Disabled Association** | Snydale RDA  Commonside Farm  Old Snydale  WF7 6HE | 5 – 17 years | Provide disabled children with great experiences and the opportunity to develop their communication skills and confidence through horse riding.  You will spend time with the ponies and enjoy time horse riding.  You will also have opportunity to do some arts and crafts. | Wednesday – 10am – 2pm  Thursday - 10am - 2pm  Group A (will attend both weeks)  Week 1: 31st July – 1st August  Week 2: 7th – 8th August  Group B (will attend both weeks)  Week 3: 14th – 15th August  Week 4: 21st – 22nd August | 1 staff to 1 young person | £20.00 |
| **Sport Works** | Netherton Junior & Infants School  Coxley View  Netherton  WF4 4LR | 5 – 16 years | Participants with learning and/or physical disabilities can access a wide range of fun, multi-sport activities at our sessions that will be delivered to meet the needs of the children. Activities include practical games, multi-sport, dance and inclusive play, table tennis, football, cricket, dodgeball, tennis, rugby, basketball – to name just a few!  Our coaches offer enriching activities such as arts & crafts, sensory play, outdoor activities, parachute games, music and much more!  Able to support CYP requiring personal care and medication. | Monday – Wednesday (3 days)  10am – 3pm  Week 1: 29th – 31st July  Week 2: 5th – 7th August  Week 3: 12th – 14th August  Week 4: 19th – 21st August | Minimum of 1 staff to 3 young people  (depending on need) | £30.00 |
| **Stride Theatre** | Camphill Wakefield  Wood Lane  Chapel Thorpe  Newmillerdam  WF4 3JL | 5 – 17 years | Stride aims for sessions to be fun, ranging from activities of drama, dance and singing to more sensory play, stories and crafts. The young people are the decision makers in our space, we facilitate what they want to do!  Our aim is to create a fun and safe space for young people to develop their confidence, communication and engagement.  Able to support CYP requiring personal care and medication. | Monday – Friday (5 days)  10am - 3pm  Week 1: 29th July – 2nd August  Week 2: 5th – 9th August  Week 3: 12th – 16th August  Week 4: 19th – 23rd August | Minimum of 1 staff to 2 to 3 young people  (depending on need) | £55.00 |
| **WF Youth** | Wakefield Youth Work Team  Crofton Young People’s Centre  High Street Crofton  WF4 1NF | 11 - 17 years | WF Youth aim to offer a youth club style environment with chill out zone, music, films, games and crafts. WF Youth will plan activities and local trips to prepare them for adulthood and develop social skills.  Able to support CYP requiring personal care and medication. | Monday – Friday (5 days)  10am - 3pm  Week 1: 29th July – 2nd August  Week 2: 5th – 9th August  Week 3: 12th – 16th August  Week 4: 19th – 23rd August | Minimum of 1 staff to 2 young people (depending on need) | £36.00 |
| **YPEP** | The Northern Social  1 Sessions House Yard  Pontefract  WF8 1BN | 8-17 years | Young People’s Empowerment Project offer person-centred fun and exciting activities for children and young people with learning disabilities!  Activities available are cookery, arts and crafts, dance, music, sports, trips out and technology games.  Activities can be created to cater for individual needs.  Able to support CYP requiring personal care and medication. | Monday – Friday (5 days)  10am - 3pm  Week 1: 29th July – 2nd August  Week 2: 5th – 9th August  Week 3: 12th – 16th August  Week 4: 19th – 23rd August | Minimum of 1 staff to 2 to 3 young people  (depending on need) | £36.00 |

\*\*Due to funding received for the summer, children eligible for Free School Meals can attend free of charge.

#### Summer Playschemes – Preference Form 2024

#### Please complete all sections in full and please print clearly

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Does your child require personal care (whilst attending playscheme)? **(please circle)** | | | **Yes** | | **No** | |
| Does your child require medication (whilst attending playscheme)? **(please circle)** | | | **Yes** | | **No** | |
| Is your child entitled to free school meals? **(please circle)** | | | **Yes** | | **No** | |
| The summer playscheme will be running on the following weeks and dates below:  Week 1: Monday 29th July – Friday 2nd August  Week 2: Monday 5th August – Friday 9th August  Week 3: Monday 12th August – Friday 16th August  Week 4: Monday 19th August – Friday 23rd August  Each young person is eligible for 1 week. **You will need to fill in a preference form for each child**.  Please **tick** your child’s preferred provider/activity and week on the table below.  You can select up to 2 preferences in case your first choice is not available. | | | | | | |
| **Provider / Week** | **Preference**  **1** | **Preference 2** | **Provider /**  **Week** | **Preference**  **1** | | **Preference 2** |
| **Carers Trust** | | | **Endorphins** | | | |
| Week 1 |  |  | Week 1 |  | |  |
| Week 2 |  |  | Week 2 |  | |  |
| Week 3 |  |  | Week 3 |  | |  |
| Week 4 |  |  | Week 4 |  | |  |
| **Sport Works** | | | **Stride Theatre** | | | |
| Week 1 |  |  | Week 1 |  | |  |
| Week 2 |  |  | Week 2 |  | |  |
| Week 3 |  |  | Week 3 |  | |  |
| Week 4 |  |  | Week 4 |  | |  |
| **WF Youth** | | | **YPEP** | | | |
| Week 1 |  |  | Week 1 |  | |  |
| Week 2 |  |  | Week 2 |  | |  |
| Week 3 |  |  | Week 3 |  | |  |
| Week 4 |  |  | Week 4 |  | |  |
| **Old Quarry** | | | **Snydale RDA** | | | |
| Week 1 |  |  | Weeks 1 & 2 |  | |  |
| Week 2 | **N/A** | | Weeks 3 & 4 |  | |  |
| Week 3 |  |  |  |  | |  |
| Week 4 |  |  |  |  | |  |

Places will be allocated based on suitability and availability (on a first come, first-served basis). It is important you tell us which dates your child is unable to attend so we can allocate alternative dates if the preferred week is not available.



This booklet is to help the staff at group get to know about you, what you like, dislike and what sort of support you may need.

All About Me…

* Hello, my name is
* My date of birth is …
* I am ………………… years old

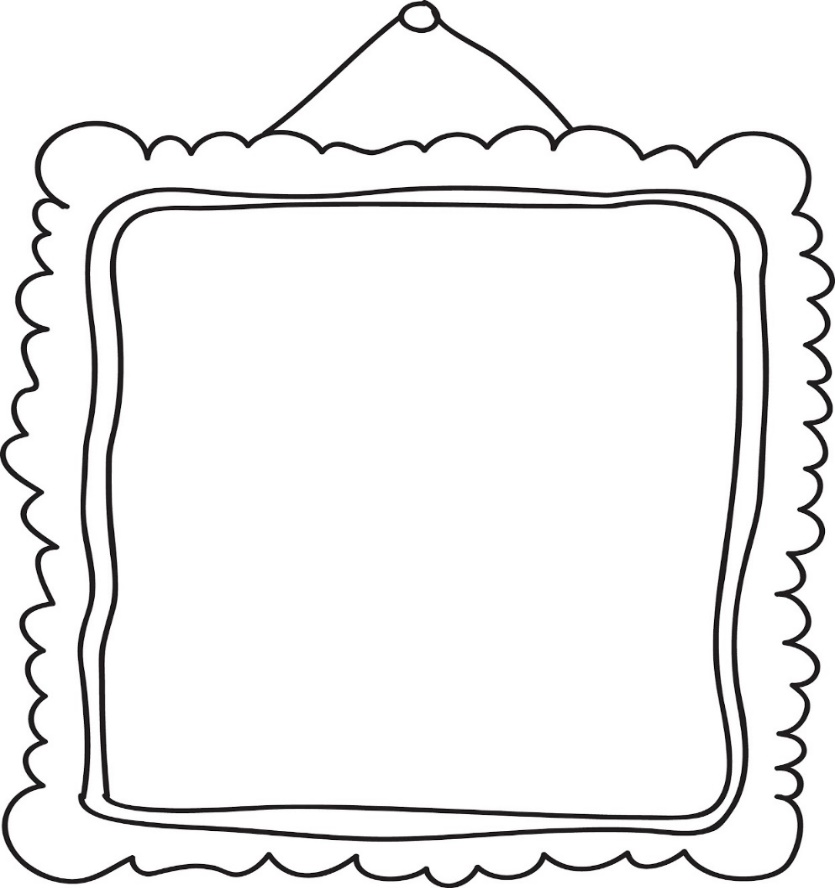


Photo is optional

Please ensure that this form **completed and returned to the SEND Short Breaks Support** **Team as soon as possible**. You can return the form by:

**Email:** [SENDshortbreaks@wakefield.gov.uk](mailto:SENDshortbreaks@wakefield.gov.uk)

**Post:**Short Breaks Support Team  
Room 229, County Hall  
Bond Street  
Wakefield WF1 2QW



Contact Information

* My home address is:
* I live with:
* I go to school at:
* My parent/carers are called:
* My parent/carers contact details are:

|  |  |
| --- | --- |
| Name: …………………………………… | Name: ……………………….. |
| Relationship: ……………………..….……….. | Relationship: ………………….………………. |
| Phone Number: …..……………….………… | Phone Number: ……………………………. |
| Email: ………………………………………… | Email: …………………………………….……….. |

* My emergency contacts are:

*In an emergency, if you cannot get hold of my parent/carer please contact*

|  |  |
| --- | --- |
| Name: …………………………………… | Name: ……………………….. |
| Relationship: ……………………..….……….. | Relationship: ………………….………………. |
| Phone Number: …..……………….………… | Phone Number: ……………………………. |
| Email: ………………………………………… | Email: …………………………………….……….. |

*There might be other people who drop me off or collect me from groups. Their details are:*

|  |  |
| --- | --- |
| Name: …………………………………… | Name: ……………………….. |
| Relationship: ……………………..….……….. | Relationship: ………………….………………. |
| Phone Number: …..……………….………… | Phone Number: ……………………………. |



Likes and Dislikes

* My favourite toys, games, interests and activities are:
* These are some of the things that fascinate me, or that I can’t resist:
* Some things that make me happy are:
* Some things that make me frightened or anxious are:



Communication

* My first language is:
* Please communicate with me like this (eg Speech, BSL, Makaton):
* Please approach me like this:
* I will let you know how I’m feeling by:
* This is how I will show you if I’m hungry or thirsty:
* This is how I will show you if I’m not well or in pain:
* This is how I will show you if I need help with my personal care:



My Safety

* I do not always understand that something and situations could be dangerous. Here are some examples:
* For me to feel safe I will need you to:
* To keep me safe when I am going outdoors, I will need you to:
* To keep me safe when I am indoors, I will need you to:
* To keep myself and other people safe you need to know that I might:
* This is how I play with other children and adults:



My Health

* I have a diagnosis of:
* I need to take medication whilst I’m at group (please tick):

|  |  |
| --- | --- |
| Yes | No |
|  |  |

* The medication I need is to take is:

*(This is about the medication I need to take)*

|  |  |
| --- | --- |
| Name: ………………………………………. | Name: ………………………………………. |
| Time: ………………………………………… | Time: ………………………………………… |
| Amount: …………………………………… | Amount: …………………………………… |

*This is how I take my medication (eg oral syringe, spoon, gastronomy)*

…………………………………………………………………………………………………..

…………………………………………………………………………………………………..

*You might need to help me take my medication (eg prompt, gastronomy)*

…………………………………………………………………………………………………..

…………………………………………………………………………………………………..



My Health

* I sometimes need to take emergency medication (please tick):

|  |  |
| --- | --- |
| Yes | No |
|  |  |

* My emergency medication is called:
* My emergency medication is for:
* I will bring my emergency protocol/epilepsy passport with me (please tick):

|  |  |
| --- | --- |
| Yes | No |
|  |  |

**I know that if I do not bring my emergency protocol/epilepsy passport with me and I become unwell I will have to go to hospital. My parents/carers will be telephoned using the emergency contact details on this form and they will need to meet me at the hospital.**



My Health

* I need support with my personal care (please tick):

|  |  |
| --- | --- |
| Yes | No |
|  |  |

*(If yes, please give more information)*

…………………………………………………………………………………………………..

…………………………………………………………………………………………………..

* I use a wheelchair or other health equipment (please tick):

|  |  |
| --- | --- |
| Yes | No |
|  |  |

*If yes, please give more information (eg when to use the equipment)*

…………………………………………………………………………………………………..

* I do not eat or drink orally / or in addition to my diet I have a gastronomy or other kind of feeding tube, or require a dietary supplement (please tick):

|  |  |
| --- | --- |
| Yes | No |
|  |  |

*(If yes, please give more information)*

…………………………………………………………………………………………………..



My Health

* I am allergic to:
* This is what happens if I have an allergic reaction:

…………………………………………………………………………………………………..

* This is what you need to do if I have an allergic reaction:

…………………………………………………………………………………………………..

* I can’t have any of the following food or drink:
* This is why I can’t have this:
* This is what you need to do if I have this:



Additional Information

To help us make sure you have a good time at group please tell us in the box below if there’s anything else we can do to support you:

**Group Activities/Holiday Group Consent Statement**

Wakefield Council’s Children & Young People Directorate deals with personal data under the Data Protection Act 1998. Some of these may be sensitive, such as health, ethnic origin or religious beliefs. We share some or all of them with other council departments, Service Providers or other third parties. When involving any third party we shall take all reasonable steps to ensure that they will keep your personal data secure and treat it confidentially. If you are worried about giving us personal details or about sharing them with others, please discuss this with a staff member who will explain what to do.

This consent statement is addressed to the child or young person. Please therefore read “you” as meaning “your child” if you are the parent/carer. This must be signed by the parent/carer on the child or young person’s behalf.

This information will be securely destroyed after the summer playscheme 2024.

**Group Activities/Holiday Group is asking you to consent to the following:**

1. For Group Activities/Holiday Group to store your personal information, such as your address, what medication you receive, and all the other information that you give us. To safely work with disabled children, young people and their families, Group Activities/Holiday Group has to store personal information about you. Without your agreement to this, Group Activities/Holiday Group cannot work with you.
2. In the event of an emergency for Group Activities/Holiday Group to take appropriate action, if necessary administer first aid, call the emergency services, and contact the people listed on the front of this form. You must agree to this if you are going to be in Group Activities/Holiday Group care without your parent/carer.
3. For Group Activities/Holiday Group to share your personal information only if we need to. You do NOT have to agree to this. However, to meet your needs Group Activities/Holiday Group may want additional advice or support from other professionals, such as speech & language therapists, educational psychologists, health visitors etc. With some Group Activities/Holiday Group services, if you do not agree to this it will reduce the support that Group Activities/Holiday Group can give you.
4. For Group Activities/Holiday Group to take and use photographs and/or video of you for publicity purposes. You do NOT have to agree to this. However if you do not agree, you may be asked to sit out of an activity for a short time while other young people are being photographed or videoed. This time will be kept to a minimum.
5. For Group Activities/Holiday Group staff to administer medication and/or carry out the medical procedures identified on this form. You do NOT have to agree to this. If you do not agree, the medication and medical procedures section of this form should not be completed.
6. For Group Activities/Holiday Group staff to provide intimate personal care identified on this form. You do NOT have to agree to this. If you do not agree, please be careful to only complete the items in the personal care section of this form that you are happy for Group Activities/Holiday Group to staff to do.
7. For Group Activities/Holiday Group staff to apply sun cream and/or oil for massage purposes. You do NOT have to agree to this.
8. For Group Activities/Holiday Group staff to engage you in face painting. You do NOT have to agree to this.

**Consent by Parent or Carer**

**Please tick or cross (✓/X) as appropriate:**

1. I agree to Group Activities/Holiday Group storing my child’s personal information:

|  |  |  |
| --- | --- | --- |
| Yes | No | *(Must be ‘YES’ to attend the Group Activities/Holiday Group)* |
|  |  |

1. I agree that in an emergency, Group Activities/Holiday Group will take appropriate action:

|  |  |  |
| --- | --- | --- |
| Yes | No | *(Must be ‘YES’ to attend the Group Activities/Holiday Group)* |
|  |  |

1. I agree to Group Activities/Holiday Group sharing my child’s personal information with other professionals, as necessary:

|  |  |
| --- | --- |
| Yes | No |
|  |  |

1. I agree to Group Activities/Holiday Group taking and using photographs and/or video of my child for publicity:

|  |  |
| --- | --- |
| Yes | No |
|  |  |

1. I agree to Group Activities/Holiday Group staff administering medication/medical procedures to my child, as identified on my child’s All About Me:

|  |  |
| --- | --- |
| Yes | No |
|  |  |

1. I agree to Group Activities/Holiday Group staff providing intimate personal care to my child, as identified on my child’s All About Me:

|  |  |
| --- | --- |
| Yes | No |
|  |  |

1. I agree to Group Activities/Holiday Group staff applying sun cream to my child:

|  |  |
| --- | --- |
| Yes | No |
|  |  |

1. I agree to have my child’s face painted:

|  |  |
| --- | --- |
| Yes | No |
|  |  |

1. I agree to keeping Group Activities/Holiday Group staff informed of any changes to the information on this form:

|  |  |  |
| --- | --- | --- |
| Yes | No | *(Must be ‘YES’ to attend the Group Activities/Holiday Group)* |
|  |  |

**Signature of parent/carer of the child**

**…………………………………….. Date………………………… 2024**

**Specialist Short Breaks Team Privacy Notice**

Here at Wakefield Council, we take your privacy seriously and will only use your personal information for the purpose(s) listed in section 2 below. This notice provides details of how the Council collects and uses information (data) about you.

We will keep your information (data) secure at all times.

**1. Who we are.**

a) The Controller for the information we hold is Wakefield Council. Contact details:

Telephone: 01924 306112

Email: [dataprotection@wakefield.gov.uk](mailto:dataprotection@wakefield.gov.uk)

b) If you have any queries regarding your information that we are using for the purpose outlined in section 2, please contact the Controller’s representative. Contact details:

Laura Cole, Acting Specialist Short Breaks Manager

Telephone: 01924 306065

Email: [sendshortbreaks@wakefield.gov.uk](mailto:sendshortbreaks@wakefield.gov.uk)

c) The Council’s Data Protection Officer is the Corporate Information Governance Team Manager. Contact details:

Telephone: 01924 306112

Email: dpo@wakefield.gov.uk

**2. How we use your data:**

The Specialist Short Breaks Team will hold the following information on children and young people who are being assessed for Short Breaks:

* Name
* Date of Birth
* Gender
* Nationality/Ethnicity
* Address
* Parent/Carer contact details (email address and/or phone number)
* School
* Primary and Secondary Needs
* Likes and Dislikes of the child/young person
* Child and Family/Short Breaks Assessment

The information listed above will be collected by the Short Breaks Assessment Team and/or Children with Complex Care Needs Team and shared with the Specialist Short Breaks Team and the Children’s Commissioning Team. Prior to this being shared with us the parent/carer will have sight of the completed assessment which holds all of the information listed above.

The above mentioned information will initially be presented to members of Short Breaks Panel who will review the information to determine if:

1. The young person is eligible for Short Breaks;
2. If the practitioners recommended package (hours and provision) is suitable for the child.

Short Breaks Panel includes internal and external representatives from Health, Social Care, Commissioning, Finance and Education and Inclusion.

The information is crucial in allowing us to source suitable Short Breaks provision for each child who has been discussed at Short Breaks Panel and awarded a personal budget. In order to implement the agreed support we will share the young person’s information with approved Short Breaks providers. The child’s information will be passed on to the relevant providers based the provision agreed at Short Breaks Panel. On occasions when approved providers cannot meet a child’s needs we may forward their information on to providers not registered in the council. Information will be treated with the strictest confidence and only accessible to those who need to access it for the purpose of providing Short Breaks support.

The Short Breaks Support Team will also collate a completed “All About Me” Form from families to share with commissioned short break providers.

Any information shared with external parties is sent securely via Cryptshare using a set password that is only shared via telephone.

All information is stored securely in a shared drive and in Liquid Logic which is the Council’s social care data management system. The system is secure and can only be accessed via identified practitioner’s devices using a username and password.

Should you choose not to provide any of the information listed above to the Short Breaks Assessment Team and/or Children with Complex Care Needs Team they may not be able to carry out a thorough assessment of the child’s needs. This means that the Specialist Short Breaks Team may not be able to identify a suitable provider for your child or young person’s short breaks support.

**3. What authority does the Council have to collect and use this information?**

Under the Data Protection Act 2018 the Council has a legal obligation to respond to requests from data subject for access to the information the Council holds about them.

**4.** **How long will we keep your data?**

We will keep the child’s data for as long as they are in receipt of Short Breaks support. Once support ceases we will discard any personal information 3 years after the cease date. Short Breaks support will only cease when:

* The young person turns 18 years old;
* Circumstances have changed and the young person is no longer deemed eligible;
* Moves out of district;
* Parent/carer request.

**5. Your rights and your personal data**

Under the GDPR you have the following rights:

**Right of Access**

You have a right of access to the personal information that the Council holds about you, and/or the right to be given a copy of the data undergoing processing.

**Right to Rectification**

You have the right to request that the Council corrects any personal data if it is found to be inaccurate, incomplete or out of date.

**Right to Restriction of Processing**

You have the right, where there is a dispute in relation to accuracy or lawfulness of processing of your personal data, to request that a restriction is placed on further processing.

**Right of Complaint**

You have a right to lodge a complaint with the Information Commissioner; please find contact details below.

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Tel: 0303 123 1113 (local rate) or 01625 545 745 if you prefer to use a national rate number.

To exercise any of your rights, you should contact the Data Controller’s representative as shown in section 1b.

**6. Further processing**

If we wish to use your personal data for a new purpose, not covered by this Privacy Notice, then we will provide you with a new Privacy Notice explaining this new use prior to commencing the processing and setting out the relevant purposes and processing conditions.