Thank you for your interest in our Short Breaks services. To access our services, you will need to complete the enclosed care plan for your child and sign up to our parent portal. This is managed by SchoolsBuddy, and you can download their app to your phone, or visit their website.

SchoolsBuddy can do many things, and through this you will be able to request sessions, be notified of your allocations, link allocated sessions to your IOS/Google/Outlook calendar, pay invoices, update care plans, and receive communications from us as push notifications on your phone.

SchoolsBuddy can be accessed by either clicking this link: <https://shortbreaks.schoolsbuddy.net/>

Or searching on the app: Diverse Abilities Short Breaks - Poole

You will be unable to find us through google so please bookmark this website for future reference. You need to visit the website above, then click register, to register your parent account. After a few moments you will be able to log into your account, and from here you will need to fill out individual registration forms for all your children who will be accessing our services. Therefore, if your child wishes to attend Coping with Chaos, you will also need to fill out a registration form for each sibling that will be attending sessions with your family. You will not need to do this if your child only attends Project/Awesome Nights.

When you log into SchoolsBuddy you will see a dashboard. From here you will be able to view all activities your child is booked onto, your outstanding fees and if there are any activities that you are able to request to book. You will only be able to view and book activities once you have sent your child’s care plan to us and we have added it to your SchoolsBuddy account.

Please scroll down to find the care plan. You will need to fill this out in as much detail as possible, as we will use this to support your child on sessions. Once completed please email back to us at chaos@diverseabilities.org.uk, along with any plans - such as epilepsy and behaviour. You only need to do this for your child with additional needs.

We will then check over your child’s care plan to ensure that our services are appropriate and that we can support your child, and if so you will be able to book future sessions when they are ready.

If you have any problems or questions at all, please do get in contact with us and we will try our best to help.

**SHORT BREAKS CARE PLAN**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Date of Birth:** |  | | |
| **Gender:** |  | | |
| **Address:** |  | | |
| **Diagnosis / disability:** |  | | |
| **Emergency Contact 1 name:** |  | **Mobile number:** |  |
| **Emergency Contact 2 name:** |  | **Mobile number:** |  |
|  | | | |
| **Do they have any Physical Disability:** |  | | |
| **Do they have any Learning Disability:** |  | | |
| **Do they have any Medical Issues:** |  | | |

|  |  |
| --- | --- |
| **Additional Information: Do they have any of the following?**  **(As a tick box)** | Epilepsy Plan  Moving & Handling Plan  Feeding Plan  Behaviour Management Plan  Other Plan / Information |
| **How do they communicate:** |  |
| **What are their Nutrition, Eating Requirements & Food Allergies:** |  |
| **Do they have any Sensory Needs:** |  |
| **Do they have any sight or hearing impairments?** |  |
| **What are their Personal Care Needs:** |  |
| **How do they interact with others:** |  |
| **Are there any behaviours we need to be aware of:** |  |
| **Anything else we need to know to look after your child:** |  |

**(AS TICK BOXES BELOW)**

**I consent for my child to be given**

(Relevant for Project My Time & Awesome Nights only):

|  |  |
| --- | --- |
|  | Prescribed medication |
|  | Rectal Diazepam (if required) |
|  | Midazolam (if required) |
|  | Rectal Paraldehyde (if required) |
|  | EpiPen (if required) |
|  | To have suncream applied |

**Consent for photography and filming:**

(Relevant for all services):

|  |  |
| --- | --- |
|  | I GIVE consent for my child to be photographed/filmed for: charity promotion/awareness e.g social media, newsletters, press, literature and monitoring purposes for the local authority/funders. |
|  | I DO NOT give consent for my child to be photographed/filmed. |