

Children's Therapy Service Provision for Special Schools

Children's Therapy Services



Therapy Services

Occupational therapy, physiotherapy and speech and language therapy are available, following referral, to see children attending Special Schools and are provided by Cambridgeshire Community Services NHS Trust (CCS) Children's Services. The therapists work together as a multi-disciplinary team with other professionals and support staff so that therapy aims are included in the daily curriculum.

Therapists work throughout the year. This means that they may be available during the school holidays; however, they may take annual leave at anytime during the school year.

Physiotherapy

Physiotherapy is aimed at helping the children to develop and maintain their mobility skills, joint range of movement, muscle strength, and movement skills.

Following a referral the physiotherapist will:

- Carry out an assessment.
- Write a report, which is given to the parents/carers, school and any other relevant professional involvement.
- Give advice, which is based on the report.
- Will write a therapy programme, when applicable.
- Carry out training for teaching assistants to carry out the programme.
- Liaise with parents/carers, giving programmes, training and advice. This may include visiting the child at home and organising equipment for home use.
- Give advice on postural management with occupational therapist.
- Work with the occupational therapist to give advice on child specific moving and handling issues.
- Refer to other occupational therapy agencies for orthotics and wheelchairs, when necessary.
- Give advice on equipment which allows the child to access the curriculum e.g. standing frame.
- Produce a report for educational review. In some instances this may be the same report as for medical review.

Children will be discharged from physiotherapy when:

- The episode of care is complete and no further intervention is clinically indicated.
- No further intervention is clinically indicated.
- They have been on review for 1 year and maintained their level of ability. When recommendations / programmes are being implemented effectively and no further intervention is indicated.
- They no longer meet the acceptance criteria for the service.
- It has not been possible to carry out the programme set by the therapist.
- The discharge criteria for the service applies.
- The child or parents requests discharge.
- The child leaves school. Handover to appropriate services will take place beforehand if necessary. Children can be re-referred at anytime if new concerns arise.

Occupational Therapy

The aim of occupational therapy within school is to enable children to become as independent as possible (at home, at school and in play) and to utilise the skills they develop. This may be by:

- Promoting the development of functional skills such as:
 - Self-care skills (e.g. eating, dressing)
 - Coordination
 - Hand function (fine motor skills) - handwriting
 - Perception (e.g. body and spatial awareness, visual discrimination).

Assessing and advising on specialist equipment such as special seating, feeding (in liaison with a speech and language therapist when appropriate), toileting, hoists, slings, bathing etc.

- Assessment of moving and handling needs of the child with physiotherapy. This may be in conjunction with school key movers.
- Using sensory integration and modulation techniques to help calm and organise themselves in order that they can improve their concentration and so participate more ably in activities.
- Occupational Therapists also assess, advise on and in consultation with parents and the relevant Housing Authority, consider the home environment including re-housing and possible adaptations.

OT intervention can include:

- Seeing a child for a set number of 1:1 treatment sessions or occasionally in a group together with a teaching assistant as part of training the teaching assistant, who will continue the programme.
- Setting up a programme of exercises and activities to be carried out regularly at school and/or at home.
- Advising on strategies to minimise the risk to the child and the carer in moving and handling in collaboration with the physiotherapist.
- Providing general advice to be incorporated into daily living activities at home and/or curricular activities at school.
- Advising on and demonstrating specialist equipment.
Writing reports, attending reviews, if necessary, and liaising with other professionals.
- Support and training to school staff.

Children will be discharged from occupational therapy:

- If they do not require intervention following assessment.
- Treatment is complete or no longer required. Handover to appropriate services will take place beforehand if necessary.
- The episode of care is complete.
- The initial referral request is dealt with as well as other issues that may have arisen whilst dealing with the initial request.
- The child leaves school.
- The parent or carer requests discharge.

Children can be re-referred at any time if new concerns arise.

Speech and Language Therapy

We work with children who have specific difficulties (in addition to a global developmental delay) with any of the following areas of communication:

- Understanding and using spoken language
- Understanding and using speech sounds; fluency; voice and social communication.

We also work with children who have eating and drinking difficulties.

We support the school to have a total communication policy, which includes:

- Spoken language
- Makaton signing
- Use of objects, photos, pictures or symbols, including PECS and high or low technology alternative and augmentative communication.

The speech and language therapists' intervention with a child may include:

- Assessment
- Observation
- Diagnosis
- Staff training
- Discussion and advice
- Writing and reviewing a class based programme
- Demonstrating activities or strategies
- Whole class, small group or individual therapy for time specific periods with regular review.

We welcome contact from parents/carers at any time about their child's progress and needs.

The therapists provide treatment plans for each child on the caseload with targets for current therapy and a report for the statement review.

Children are discharged from speech and language therapy after discussion with parents and school staff, when speech and language skills are in line with their other skills and / or when the development of their communication skills can best be supported in the classroom and at home. They can be re-referred at any time if there are any new concerns.

Multidisciplinary working

Physiotherapists, occupational therapists and speech and language therapists work closely together and with the school to provide a quality service for the children in the schools across Cambridgeshire.

We welcome contact from parents/carers at any time to about their child's progress and needs.

For further information about this service contact:

Physiotherapy and Occupational Therapy Administration:
The Peacock Centre
Brookfields Campus
351 Mill Road
Cambridge
CB1 3DF

Tel: 01223 218065

Speech and Language Therapy Administration:
The Peacock Centre
Brookfields Hospital
351 Mill Road
Cambridge



If you require this information in a different format such as in large print or on audio tape, or in a different language please contact the service on the details above.

If you have any compliments about this service or suggestions for improvements, contact our Patient Advice and Liaison Service on 0300 131 1000 (charges may apply depending on your network) or email: ccs-tr.pals@nhs.net.

For free, confidential health advice and information 24 hours a day, 365 days a year please contact NHS 111.