

# SEND Futures Conference

## Therapies Workshop

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**SEND Futures**  
Listen | Learn | Lead

# We need your help today.....

- To ensure that we are focusing on the right areas to improve our local therapies offer
- To make sure that the new therapies offer will improve outcomes for our CYP with SEND
- Our service delivery model is aligned across Kingston and Richmond and across all therapy provision
- To identify system wide actions that will have the most impact in the context of the financial challenges
- Thank you for taking the time today to attend our therapies workshop

# SEND: Story of children and young people

## Kingston



54,948 under 24 year olds



2195 children get Special educational needs support (SEN)



1213 children have a EHCP



422 of children with an EHCP have **ASD**  
259 of children with an EHCP have **SLCN**  
163 of children with an EHCP have **SEMH**  
124 of children with an EHCP have **MLD**

## Richmond



56,626 under 24 year olds



2470 children get Special educational needs support (SEN)



1405 children have a EHCP



404 of children with an EHCP have **ASD**  
259 of children with an EHCP have **SLCN**  
175 of children with an EHCP have **SEMH**  
166 of children with an EHCP have **MLD**

# Current therapies offer

## Occupational Therapy

**Service Aim:** to support children and young people with disabilities to participate in daily occupations such as play, school occupations, self care skills.

### Providers:

**Richmond:** Hounslow and Richmond Community Healthcare

**Kingston:** Achieving for Children

	Multi & Uni-disciplinary assessment & intervention	Advice and Support to professionals & parents	Specialist Intervention & Treatment	Provision of Equipment	Workforce Training
Kingston	√	√	√	√	√
Richmond	√	√	√	√	This is still being developed

## Speech and Language Therapy

**Service Aim:** to support children and young people to reduce the impact of speech, language and communication needs (SLCN) and eating, drinking and swallowing (EDS) difficulties

### Providers:

**Richmond:** Hounslow and Richmond Community Healthcare

**Kingston:** Your Healthcare

	Multi & Uni-disciplinary assessment & intervention	Advice and Support to professionals & parents	Specialist Intervention & Treatment	Provision of Equipment	Moving & Handling assessments	Workforce Training
Kingston	√	√	√	√	√	√
Richmond	√	√	√	√ (Augmentative Alternative Communications)	√	

# Current therapies offer

## Physiotherapy

**Service Aim:** to support children and young people develop their physical abilities to enable them to move and participate in every day activities and school.

### Providers:

**Richmond:** Hounslow and Richmond Community Healthcare

**Kingston:** Achieving for Children

	Multi & Uni-disciplinary assessment & intervention	Advice and Support to professionals & parents	Specialist Intervention & Treatment	Provision of Equipment	Moving & Handling assessments	Workforce Training
Kingston	√	√	√	√	√	√
Richmond	√	√	√	√	√ (only for children on the caseload linked to therapeutic intervention)	√ Training teaching staff individually to support delivery of programmes and some delivery of group training but occasional

## Case Studies:

Child was referred to the Children's SLT Service over one year ago. After a long wait, was booked to attend four sessions with a speech and language therapist. After receiving two sessions, the remaining sessions were postponed with no warning and family were told this was due to the therapist being off sick. No alternative therapist offered or indication as to when the sessions will be rebooked.

Twin 5 year old boys who were picky eaters and would not eat certain foods because of the textures. They attended a messy play group where they were able to touch a range of textures. This had a positive impact on their eating.

*"I just want to extend our thanks. I realise that the boys (like all of us) will have sensory preferences, but they've really improved a lot and I'm very grateful for this"* - parent

Pre-school child with significant language delay. Parents reluctant to acknowledge child had significant needs. Parents attended workshops to develop understanding, skills and strategies to facilitate communication. OT and SALT delivered joint therapy sessions with the child and parents to support the development of attention, play, and communication. Child and parents introduced to the use of Picture Exchange Communication System (PECS) to help child initiate requests.

*"Good to feel "not alone in this" and hearing different versions of issues I've experienced." "I have different ways of approaching activities/tasks"* - parent

*"I hope you don't mind, but I have mentioned your name and highlighted that we have had what I would consider an exceptional level of care and support which has been seamless from infancy thanks to your care and attention and professionalism. Because you were involved we had very early identification of needs, access to services and received an early diagnosis" - Parent*

*"I'd like to tell you that he was excellent and had no problem on the airplane as well as changing the flights. I strongly believe that it was because I was well prepared thanks to your thorough advice. He was very happy to put his seatbelt on by himself and kept it on all the time. He also stayed calm and listened to me well always so I did not need to hand out the little memo to other passengers at all !!*

*This successful experience has given me a positive confidence and I feel I should be able to manage the same way back to London." Parent*

*Year 9 student with ASD has poor social communication skills, lack of awareness and inability to self-monitor. They received support from a LSA through weekly group sessions in school that included peers with similar needs. The student is now able to more fully integrate with his peers.*  
*"I don't feel bad for having my thoughts anymore..... I am interested in them because then they are interested in me." - Student*

*A 2 year old boy with a diagnosis of Spina Bifida and Hydrocephalus recently moved from abroad to England and required equipment, a development programme, liaison with nursery, parental support and an SEN grant. The Physio ensured a standing and walking frame was provided and a development programme was delivered including ensuring the provided support and advice regarding integration of programme. On receipt of standing frame, parent said, "Wow that is amazing. Thank you for all your support"*

# Key Issues

- Increasing need for therapy services
- Pressure on financial and staffing resources to meet needs
- Inequitable provision across Kingston and Richmond
- Different eligibility criteria for access to all therapy services
- A number of Commissioners and a variety of commissioning arrangements
- Key service gaps in early years, SEN support, pre and post diagnostic support, delivery of OT in mainstream services, post 16-25
- Assuring the quality of service delivered by a therapies workforce employed by a range of providers (CCG, AfC, Schools)

# Consultation activity across Kingston and Richmond so far

- Review of Educational provision in 2017
- SEND 2020 Children and Young People's Consultation (April 2018)
- Schools Therapies Survey (September 2018)
- Therapies Work stream (throughout 2018)
- Therapies review engagement activities led by independent consultant (2018)
- Consultation on the draft Kingston SEND Transformation Plan (December 2018 and January 2019)
- Meetings with Providers (February to April 2019)



# What has consultation and engagement activity told us so far

## Children and young people

- They want the same person so they can develop trust and tell their story once
- Don't like lots of changes to therapists
- Lack of understanding of impact of therapies
- Not enough therapy provision (OT, SALT, Physio)
- Therapies need to be high quality
- Children not eligible for therapy because they don't have a EHCP (SALT Richmond)
- They do not like missing lessons to go to therapy sessions as it makes them feel different to others
- Therapies need to be high quality

# What has consultation and engagement activity told us so far

## Parents

- Families choose out of borough/independent provision because of lack of 1:1 therapy offer
- Lack of understanding of impact of therapies
- Frustration about the time it takes to get equipment (OT, Physio Kingston)
- Therapies need to be high quality
- Not enough therapy provision (OT, SALT Physio)
- Children not eligible for therapy because they don't have a EHCP (SALT Richmond)
- They want the same therapist so they can develop trust and tell their story once

# What has consultation and engagement activity told us so far

## Professionals & Partners

### More therapy provision and resourcing required in the local education system:

- SALT - Assessment, support, and provision for independent schools, Free schools and Academies, post 16 in FE Colleges and YOS
- OT in mainstream provision. Physio – more provision to meet expanded special schools

### Inadequate equipment budgets

- OT: seating equipment in nurseries. Social Care equipment review required. Physio –inadequate equipment budget and arrangements for monitoring equipment and sleep systems

### Schools reporting gaps in service provision

- More provision required for those without EHCPs
- Schools spot purchasing therapy to fill the gaps

# Emerging Priorities

- Make better use of needs analysis
- Develop key service principles
- Develop a service delivery model
- Review the funding allocation for therapies
- Involve stakeholders in the commissioning cycle

# Better use of needs analysis

- Understand changing needs and respond to emerging trends
- To support changing local provision, including new Specialist Resource Provisions (SRPs) and special schools
- Quantify service gaps e.g. early intervention and for those Children and Young People on SEND Support to inform commissioning

# Develop key service principles

## Key Service principles

- Therapies services are based on evidence of good practice, national standards, promoting independence and a focus on outcomes
- Early identification of need so that children and young people can access therapies when assessed as needing it
- Therapy is embedded into children and young people's whole day and adults around the child understand their needs and can support them
- Everyone supporting children and young people's therapy goals, including families are well equipped through accessing advice training and support
- Therapies are cost effective enabling the local system to meet the broadest possible range of therapy needs, including early intervention

# Emerging Priorities - Develop Service Delivery Model

Our Service delivery model is informed by the following;

## Service models:

- **Three Tiered approach** (Universal, Targeted and Specialist)
- **The Consultation model** (using highly skilled trained staff to deliver interventions e.g. school staff in close consultation with therapists)
- **The balanced system** (Universal, Targeted and Specialist targeted approach, the wider and specialist workforce, training & development)
- Evidenced Based Interventions and Best Practice
- National Standards (NICE)
- Meeting SEND Statutory Duties across Education, Health and Social Care

# Develop service delivery model

## Specialist

Meet a defined clinical need  
Service provision based on defined pathways  
Highly specific interventions (1:1 where needed)  
Therapy goals embedded into school day  
Adults and families trained to support progress towards therapy goals  
Progress monitoring and review by CYP, families and professionals to inform next steps

## Targeted

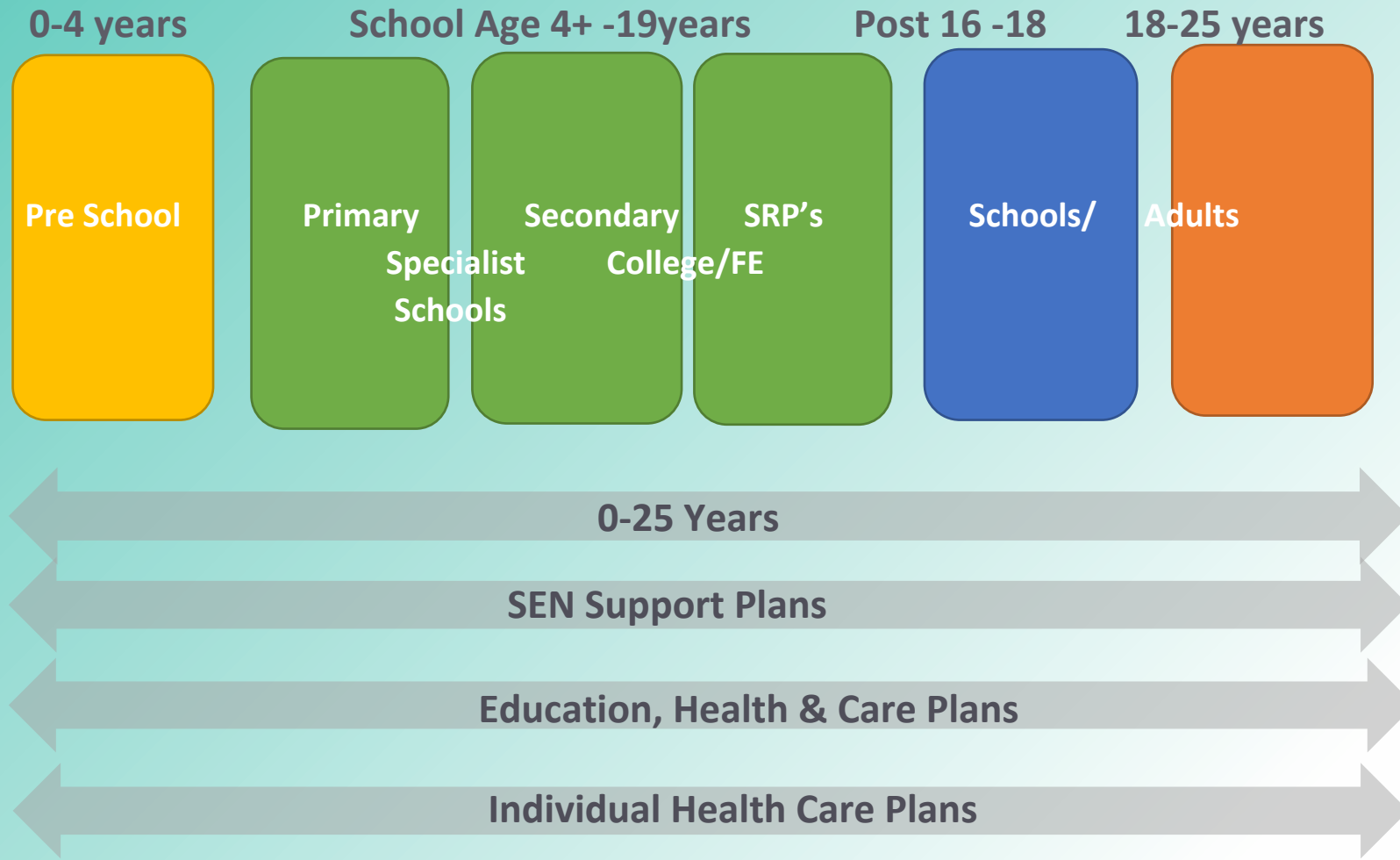
Access to therapy groups  
Assessment and therapy planning by therapists  
Agreed therapy goals and timescales for achievement  
Wider trained workforce supporting delivery and achievement of therapy goals  
Therapy goals embedded into school day  
Adults and families trained to support progress towards therapy goals  
Progress monitoring and review by CYP, families and professionals to inform next steps

## Universal

Quality first teaching  
Training to support skilled school workforce  
Triage and signposting  
Telephone advice line  
Drop in advice and guidance



# Develop service delivery model



# Review therapies funding and the commissioning cycle

## Review funding for therapies

- Identify all sources of funding for therapy provision
- Identify cost of current demand and model the cost of capacity to meet agreed need
- Agree revised Health, Education and Social Care therapy budgets

## Commissioning cycle

- Develop service specifications
- Agree key performance indicators
- Involve children and young people and families in contract monitoring processes so that their priorities and feedback shape services

## Next steps ...

Continued consultation and engagement activity with stakeholders

**June – July 2019:** Engagement with schools, providers and children and young people

**August – September 2019:** Continue working on needs analysis to inform new service model and resourcing of therapy services

**September 2019:** undertake more consultation with children and young people

**October – November 2019:** finalise needs analysis, new service, model agreed, resources approved

**December – March 2020:** Mobilise new service

**April 1 2020:** New therapy service in place

# Things to think about today...

The key principles and what they mean in practice

## The task today – answer the following questions

- What are the barriers to achieving the key principles?
- What are the solutions?
- What does good look like?