Hertfordshire Community NHS Trust

Children and Young People's Speech & Language Therapy Service

Service Offer Document

Working with You
1. **BACKGROUND**

The Hertfordshire Community NHS Trust (HCT), Children and Young People’s Speech and Language Therapy Service model aims to reduce the gap and inequalities amongst children and young people (CYP) in Hertfordshire who have Speech Language and Communication Needs (SLCN). It is based upon the Balanced System (M. Gascoigne 2009) and defined by universal, specialist and targeted tiers\(^1\). The Balanced System is set within a legislative context.\(^2\)

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\(^1\) Royal College of Speech and Language Therapists 2011

\(^2\) Children and Families Act 2014; Health and Social Care Act 2012; Code of Practice SEN (0-25) 2014
2. OUR SERVICE VISION

Children and Young People’s Speech and Language Therapy is committed to HCT’s Vision of maintaining and improving the health and wellbeing of the people of Hertfordshire. We also support Hertfordshire County Council’s (HCC) special educational needs and disabilities strategy. Our service offer is underpinned by the following aims:

- Children, young people and their families are empowered through provision of information and advice.
- Children, young people and their families are able to manage their own health and wellbeing by learning new skills to support development of communication and/or eating and drinking skills.
- Children and young people’s participation is maximised through enhanced, communication friendly environments.
- The wider children’s workforce are confident to support CYP’s SLCN through the sharing of specialist knowledge and skills.
- Children and young people’s SLCN are identified early through routine screening and the impact minimised by early advice and support.
- Children, young people and their families can access high quality, evidence based, effective intervention in a timely manner.
- Children and young people achieve positive outcomes that prepare them for transition into adulthood through a collaborative approach with families, professionals and other agencies.

3. WHERE WE WORK AND WHO WE WORK WITH

The Speech and Language Therapy (SLT) Team (therapists and assistants), work with CYP in the most appropriate setting to promote functional communication and/or eating and drinking skills. We empower staff and families to become the agents of change for that CYP. We routinely visit early year’s settings including Early Years Specialist Development Centres (EYSDC), special schools, mainstream schools and some specialist bases/units. Some children may be seen at home or in clinic according to clinical need.

We support CYP with a range of SLCN and those with eating and drinking difficulties.

Hertfordshire County Council (HCC), East North Clinical Commissioning Group (CCG) and Herts Valley Clinical Commissioning Group commission a service for CYP, living in Hertfordshire and attending a Hertfordshire setting, between the ages of 0-16 and up to 25 for those with an Education Health and Care Plan (EHCP). There is currently additional commissioning of service for young people attending certain Further Education Colleges within Hertfordshire.
4. WHAT DOES THE SERVICE OFFER LOOK LIKE?

Universal offer

Working at the universal tier aims to raise awareness and increase understanding of SLCN and eating and drinking skills. It empowers parents, health and education professionals to facilitate support for all children, including those in vulnerable and at risk groups. The SLT service provides information and advice to CYP and their families living in Hertfordshire and to the wider children’s workforce. Our offer includes:

- A range of training opportunities which are routinely offered to a variety of professional staff and settings. This may be delivered to an individual school/centre or offered across the County. Training at the universal level has a focus on raising awareness and increasing understanding of a range of SLCN topics. Health professionals receive training with a focus on developmental milestones and early identification of needs. Special school staff involved in supporting eating and drinking skills are trained to identify potential risk factors and to increase their understanding. Some training packages may incur an additional cost.
- Provision of up to date advice and information via our service website, newsletters and Twitter.
- Signposting for families, health and education professionals to avenues of support e.g. voluntary groups, websites, other services, children’s centres.
- Provide health promotion leaflets to families and professionals.
- An advice line service open to all families, health and education professionals, enabling quick access to support and information.
- Service representation at parent/professional networking events.

Targeted Offer

Working at the targeted tier aims to empower others to support CYP with SLCN and/or with eating and drinking needs. The service works with families and settings to help identify and overcome barriers faced by CYP ensuring success in their functional communication and/or eating and drinking skills. This may include:

- Planning meetings with setting staff e.g. Family centre group managers, school SENCo’s.
- Joint working with early years staff and Health Visiting services to increase the support available to families.
- Training early years settings to introduce screening and early intervention programmes, e.g. WellComm.
- Modelling techniques to setting staff and families who are then empowered to use these to support children.
- Supporting settings to provide enhanced communication friendly environments.
o Joint planning and working with teachers in specialist settings.
  o Introducing a whole school approach to establish use of specific techniques e.g. signing, visual support, vocabulary learning.
  o Joint delivery of interventions which then become self-sustaining for that setting e.g. language and communication groups.

Specialist Offer

Our work at the specialist tier addresses defined clinical need, where SLT expertise alongside the key agent of change e.g. a parent/carer or member of teaching staff, can make a significant contribution to a CYP’s health and wellbeing.

Following referral a CYP’s functional communication/eating and drinking skills will be assessed. This includes a review of the impact of any identified needs on the individual within their environment. When requested to provide advice for an EHCP we might assess, provide advice and strategies and then close the referral.

For those CYP with an identified clinical need an episode of care (EOC) will be recommended by the SLT team.

An EOC may be direct or indirect and may be delivered individually or in a group. All EOCs will be delivered in partnership with an agent of change for that CYP.

When it is recommended that a specialist technique is used to support a child additional training may be provided e.g. picture exchange, signing, visual coding, augmentative and alternative communication systems (AAC). Where training packages are copyrighted or nationally accredited a cost may be involved.

Support at a specialist level may include multi agency working/assessment and joint goal setting with other professionals. This may involve liaison and referral between professionals and collaborative working with tertiary centres.

Goals for intervention will be agreed with CYP, families and setting staff. These may be shared through written reports and programmes as required. Progress towards goals will be reviewed regularly and impact on functional communication monitored.

5. WORKING WITH CHILDREN, YOUNG PEOPLE AND THEIR FAMILIES

CYP are involved at every stage of their journey. For younger children we provide child led play based intervention, incorporating their interests. Older children and young people are encouraged to participate in goal setting and provide their views.

We engage with families across Hertfordshire by offering different ways to access advice and support. Service information is easily accessible for families. Parents are provided with regular opportunities to meet with their child’s therapist and become involved in joint goal setting. Written or verbal feedback regarding their child’s
progress is routinely shared with families. Parents are expected to attend their child’s initial assessment appointment to enable joint decision making regarding any support their child may require. It is anticipated that families will work alongside the therapy team and staff in their child’s setting to implement jointly agreed goals at home.

Where agreed with a school/setting, therapists may attend parent network or information events. This includes events held at family centres, schools and via Delivering Special Provision Locally (DSPL) groups.

Recognition of cultural diversity is important and we work closely with the family to support communication and their understanding. This may include use of an interpreter for families for whom English is not their first language or families who are British Sign Language Users. We work with education and health care professionals, family support workers, social workers and extended family members to ensure engagement with the service for all vulnerable families.

We value the thoughts and views of our families and young people. In addition to Trust feedback forms the service regularly asks for feedback from parents attending training, engagement events or on completion of an episode of care.

6. WORKING WITH OUR PARTNERS ACROSS HEALTH AND EDUCATION

We are committed to maintain effective collaborative relationships with our partners in Health and Education in the following ways:

- Joint promotion of health and well-being across Hertfordshire.
- Multi professional assessments e.g. videofluoroscopy, cleft palate, autism diagnosis.
- Joint working with Integrated Services for Learning (ISL) specialist advisory services including multi agency support for CYP and their families.
- Engagement with Hertfordshire County Council SEN teams including attendance at multi agency panel meetings and participating in SEND Appeals.
- Working within DSPLs by attendance at events, meetings and delivery of training to meet local need.
- Liaison and joint planning with identified leads in settings.
- Collaboration for County wide initiatives with other services.
- Joint planning and goal setting with other specialist services according to individual need.

7. REFERRALS
The service operates an open referral system. Pre-school children from 2:06 years can access drop-in clinics which are run throughout the week in a variety of locations across Hertfordshire. No referral is required and dates of clinics are available on our service website. These clinics provide a screening assessment, giving immediate advice and support to families regarding early communication development.

Health and Education professionals can refer directly with evidence of need and impact on child’s functioning. Schools are advised to discuss referrals with their link therapist so that initial advice can be provided and planning completed for any assessment required. Parents are also encouraged to discuss any concerns they may have with their child’s setting prior to a referral being made.

Referrals will be triaged by the service to assess need and impact. They will be accepted when they are accompanied by evidence of assess-plan-do-review. Evidence may include IEPs, provision plans, Universally Speaking checklists or similar. Families and the referring professional will be advised of the next steps following triage.

8. COMMISSIONING OF SERVICE

The service can be commissioned for additional pieces of work e.g. setting up targeted interventions, delivery of individualised specific projects.

DSPLs/ groups can commission one-off training opportunities to meet local need

Professional groups can commission time for joint working e.g. delivery of training/Autism Assessment

The Local Authority may commission input for CYP with non Hertfordshire EHCPs.

Input can be arranged and agreed on a yearly contract with a minimum of a term’s notice being required.
SUPPORTING DOCUMENTS

WORKING WITH FAMILY CENTRES

As a core service offer the Speech and Language Therapy Service will:

- Provide a named link from the SLT team who will be the first point of contact for the group.
- Offer an annual planning meeting between the centre group manager and the named link to discuss the needs of the settings in their group and to ensure joint planning regarding the implementation of universal and targeted working for the forthcoming year.
- Offer training sessions to practitioners across a range of topics. These will usually be a county wide offer advertised to all centre groups. Specific training may be additionally commissioned.
- Offer training sessions or engagement events to parents/carers to help raise awareness of language and communication milestones.
- Work with members of staff to model advice and strategies that they can share with families.
- Work collaboratively and liaise with education and healthcare professionals as part of the family centre team.

It is expected that family centres will:

- Co-ordinate the cluster training for practitioners, with support from the service, including advertising to PVI settings within their cluster.
- Provide early advice and support to families where children are identified as having SLCN or where a parent is concerned.
- Provide targeted support for families where children have SLCN, such as delivering parent advice sessions.
- Signpost children and their families to drop in clinics following review of service referral guidelines.
- Discuss their training and development needs with practitioners so that training opportunities can be identified.
WORKING WITH LOCAL AUTHORITY MAINTAINED SCHOOLS

As a core service offer the Speech and Language Therapy Service will:

- Provide a named link SLT for each school. The SLT link will be the first point of contact for the school.
- Offer a termly planning meeting for each school. This will usually be a face to face meeting with the SENCo. However telephone discussions can be arranged if preferred.
- Offer training opportunities across a range of topics. These will usually be a county wide offer advertised to all schools. Specific training to an individual school may be provided where additionally commissioned or where specialist training is required to address the needs of a child or group of children.
- Work with members of staff to model techniques and ensure they are confident to deliver programmes for children accessing support at the Specialist Tier.
- Provide information and advice to meet the needs of identified children. This may be verbal or as part of written programmes and reports.
- Contribute to the annual review process for children with SLCN identified in their Education, Health and Care Plans and where specified speech and language therapy has been agreed. Attendance at annual review meetings may take place if requested by a parent/setting/SEN or when there is a change to needs or provision.
- Offer opportunities for staff and/or parent engagement, such as drop in advice sessions.
- Inform families of the intervention their child is receiving, including details of any appointments.

It is expected that schools will:

- Provide evidence of assess, plan, do, review when making a referral. It is also recommended that the referral will have been discussed in advance so early advice may be given.
- Give a minimum of 6 weeks’ notice for any meetings where an SLT is required including attendance at annual reviews. 6 weeks’ notice is also required for a report.
- Make a member of staff available so that targets can be agreed, progress reviewed and therapy programmes modelled.
- Inform the service in advance when an arranged visit has to be cancelled. This may be due to lack of availability of member of staff or when a child cannot be released from a school activity. A minimum of 24 hours’ notice is required.
o Provide a suitable space in which direct intervention may be delivered if required. This would also apply to confidential meetings with staff and families.

o Include SLCN as part of their school development plans. It is recommended that schools discuss their training and development needs with the link therapist so that training opportunities can be identified.

o Take responsibility for provision of resources and maintaining delivery of programmes as recommended. This would include embedding advice and strategies into the classroom.

o Communicate to the family how they are implementing the advice and strategies provided by the SLT team. This should include sharing of programmes or resources and providing regular feedback on a child’s progress.