

What is therapy?

East Sussex Children's Integrated Therapy and Equipment Service

A guide for parents to explain children's therapies



What is therapy?

Therapy is where a child or young person is enabled to overcome or adapt to physical or communication difficulties that affect their daily life.

The purpose of therapy is **not to cure but to reduce** the impact of these difficulties. Our team of therapists work with other people to support a child to reach their full potential.

Who are we?

Kent Community Health NHS Foundation Trust (KCHFT) is jointly commissioned by East Sussex County Council and the NHS to deliver East Sussex Children's Integrated Therapy and Equipment Services (CITES).

Our service employs:

- occupational therapists
- physiotherapists
- speech and language therapists
- administrative staff.

Our 100-strong team is responsible for providing non-acute children's therapy to people living in East Sussex.

therapy provision outlined in pupils' education health care plans.





We are all qualified therapists and are registered with the Health and Care Professions Council.

> We must maintain clinical professional development and have regular supervision.



Our focus is on helping a child develop a functional communication system - whether that is with the spoken word, signs, symbols or a mixture of these. We also help children who have physical difficulties with eating and drinking.



Occupational therapy (OT) and physiotherapy (PT)

Our focus is on enabling. This means helping children to overcome functional difficulties affecting daily life at home or in the school environment. OTs may work with physiotherapists to identify appropriate seating systems or equipment for 24-hour postural management of children with complex physical disabilities. OTs also provide upperlimb programmes to promote function and development of self-care.

> We also provide advice and support to children with sensory processing or co-ordination difficulties.



Integrated therapy assistants and speech and language therapy assistants

Our integrated therapy assistants have all had internal and external training on the three therapy areas.

We are skilled and experienced in carrying out therapists' programmes.

Speech and language therapy assistants carry out programmes written by the speech and language therapist. We have a thorough understanding of language and communication and are highly experienced delivering these therapy approaches.

All our assistants help run groups for our service and support our training programme.



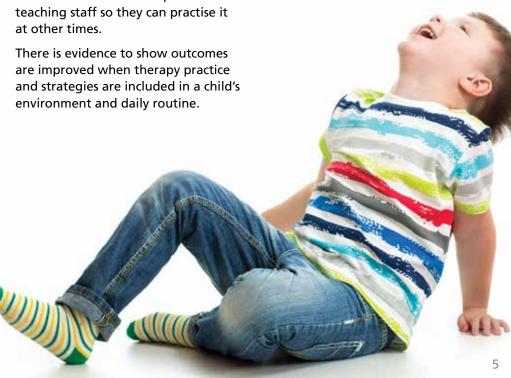
How do we work?

Therapists use assessments to get a better understanding of a child or young person. We provide personalised support by using our specialist skills with the child and the people around them.

Personalised support includes recommendations on how the environment can be changed to make it easier for a child or young person to communicate or function.

It may also include time-limited pieces of work by a therapist or therapy assistant to teach a new skill. This work is modelled to parents and

We accept referrals for children from the time they are born to when they are 19-years-old. We work hard to get the right care in the right place at the right time.





Working with school-age children

Once your child is old enough to go to school, we will contribute to their transition into school environment. We offer training to schools alongside the Communication, Learning and Autism Support Service.

We may not always keep your child on our caseload once they are well supported by the school's local offer. However, we accept re-referral at key transition points and if any new concerns arise. There is a natural overlap between teaching and therapy.

Where a child's needs are well understood and the school has the tools to deliver support through the additional needs plan, the school will lead.

This is commonly the case for long-term sensory, language and social communication needs.

Sometimes, children will need a reassessment, for example if they are not making expected progress with their learning or physical skills. Reassessment is also relevant if a child's physical function has changed or deteriorated. If there are significant changes to home or school life, such as moving to a new school then therapy support may be appropriate.

This enables us to assist the wider team in checking that recommendations are relevant and up-to-date.

Care pathways – what are they?

When your child's referral is accepted, we will start our assessment in clinic and, if needed, we will also see your child in other environments.

Following the assessment, you will get a report with recommendations for home and school. If further intervention is needed, we will discuss the best care pathway for your child with you.

We have developed a range of care pathways designed to provide equitable yet personalised assessment and intervention. Each care pathway is designed to be the best way of receiving care and treatment for every individual patient.

These include:

- hypermobility
- developmental co-ordination disorder
- speech disorder
- dysfluency (stammering)
- developmental language disorder
- eating and drinking difficulties
- speech language and communication needs associated with other medical conditions.
- sensory processing

The extent of direct intervention from a therapist needs to be balanced.

For example, a child with dysfluency may receive more direct intervention with a therapist than a child with a language disorder because the wider workforce has less knowledge and skills to work with dysfluency than language.

A child with a developmental difficulty may receive less direct intervention than a child with a complex neurological difficulty for similar reasons.

This is in keeping with the principles of commissioning children's therapy services in the UK. We will work with you to personalise your child's care pathway, so it is clear what you can expect from our service over the course of the following year.

You may be offered sessions with an integrated therapy assistant or speech and language therapy assistant, as well as a therapist.

There is still much research needed in the field of children's therapy.

The Children's Integrated Therapy and Equipment Service only uses approaches that are evidence-based via well respected channels, such as The Communication Trust's What Works website; The Association of Paediatric Chartered Physiotherapists and CanChild.

Intervention is evaluated using the respected *Therapy Outcome Measures for Rehabilitation Professionals (Enderby 2015)*. This is a holistic tool that describes your child in the context of four domains: Impairment, participation, activity and wellbeing.

These domains allow us to work together to develop a shared understanding of your child's needs and how therapy can best reduce their impact.

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Working with our partners

We work with a wide range of partners. These include:

- parents and carers
- health professionals, such as local consultants, GPs, school nurses and health visitors and specialists from tertiary centres
- colleges, schools, pre-schools and children's centres
- specialist teachers and educational psychologists
- East Sussex County Council and district and borough councils
- children's disability services
- private therapists
- local charities.

With your permission, we liaise with all partners who are working with your child in your child's best interest.

We work closely with the local authority by providing clinical advice to inform the assessment process for education, health and care plans.

We also have a close working relationship with iSEND Early Years and sometimes provide joint programmes and reports.

We have strong partnerships with our local special schools. We are regularly in these schools and are valued associates. As well as seeing individual pupils, we work with each leadership team to make sure the school environment and the skills of the teaching staff are suited to the learning needs of their pupils.

We have strong partnerships with our local special schools.
We work in these schools on almost a daily basis and are valued associates.



We contribute to other education partnerships, such as school clusters and alliances.

This helps us to jointly improve service delivery, provide bespoke training where needed and problemsolve together.

We provide workshops for parents/ carers and other professionals so that we can work together to understand the different needs of the children and young people we see.

We deliver joint training with some of our stakeholders, for example an accredited course, called Working with pupils with speech, language and communication needs.

Where a child or young person is also known to a specialist or

tertiary centre, such as the Michael Palin Centre for Stammering or the Evelina, we will work closely with these professionals to ensure that their recommendations can successfully transfer to local care.

On occasion we may join the family for assessments at one of these centres.

Should you have any specfic questions, please contact us directly and we'll do our best to assist. We have access to an interpreter and advocacy support if this is needed.



We operate from three main sites:

Grove House

Phone: 0300 123 2205

Crowborough Hospital, Southview Road, Crowborough, East Sussex TN6 1HB

Chaucer Clinic

Phone: 0300 123 2650

Unit A4, Chaucer Business Park, Dittons Road,

Polegate, East Sussex BN26 6QH

Ore Clinic

Phone: 01424 728360 407 Old London Road

Hastings, East Sussex TN35 5BH

Email: kcht.escits@nhs.net

Do you have feedback about our health services?

Phone: 0300 123 1807, 8am to 5pm, Monday to Friday

Text: 07899 903499

Email: kentchft.PALS@nhs.net Web: www.kentcht.nhs.uk/PALS

Patient Advice and Liaison Service (PALS)

Kent Community Health NHS Foundation Trust

Unit J, Concept Court **Shearway Business Park**

Folkestone Kent CT19 4RG

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