

0-25 Transformation: Highlight Report

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Sub-Group/Programme: Therapies ERG (SLCN & OT / PT) **Lead:** Eejay Whitehead

Work programme context:
OT/PT

This is a continuation of the therapies test for change work. It builds on the SLCN review and re-specification and is a joint service review of OT / PT with a view to developing a new joint, outcome-focussed, service specification across the CCG and LA.

SLCN

Focussed on implementation of the new specification based on the new schools based delivery model

COVID has caused significant disruption to service delivery but the provider has developed proposals to ensure provision for children in the current context.

Programme structure and implementation:

OT / PT working group that meets to review current service and develop new service specification feeding into Therapies ERG.

SLCN implementing the new specification, reporting to Therapies ERG with task & finish groups established around particular issues.

Exception reporting through to POG

Progress summary (last 8 weeks): *(high level and by exception)*

SLCN

- Recruited internally to 2 Band 7 posts – out to recruitment for 1 Band 5 and 2.6 Band 6 posts
- Virtual training offer planned for spring term
- WellComm training has resumed both universally to settings & schools with new staff & in a targeted way for settings which haven't previously engaged.
- Work is ongoing with GM colleagues to develop the GM Early Education App to provide an Early Education Digital Solution to enable better data sharing & analysis

OT / PT

- Lack of access to hydrotherapy is proving an issue – having to deliver therapy in other ways
- Complex physical needs clinics have started in conjunction with paediatricians & nurses
- Developing health transition pathway
- High uptake on training provision
- Development of paper resources to support virtual provision

Outlook summary: (next 8 weeks)

SLCN

- Appropriate PPE is still an issue
- Continue to risk assess service delivery
- EY SLTs and SLW officers attending Hanen Learning Language and Loving it Certification training to become licenced to train practitioners in settings to strengthen the offer to EY settings and impact on EY quality
- Induct new staff & recruit additional staff
- Look to develop joined-up training offer with LSS
- Review of the outcome framework

OT / PT

- Progress MDT model, extending to community settings.
- Ensure health transition pathway links to Salford Transition strategy & GM work
- Take forward temporary upper limb splinting solution when confirmed
- Re-specification of OT /PT service & business case for additional resource

| Upcoming Milestones/Next steps/Key Decisions | Date |
|--|------------|
| Re-specification of OT / PT service & business case to support additional resource | April 2021 |

Financial spend/requests:

Business case to be prepared for additional investment in OT /PT to ensure future service addresses gaps identified within the review.

Risks

1. Estates: lack of adequate therapy space in some schools and difficulties in travelling across a number of school sites where staff are often not trained to be able to support the child. Any new specialist input into schools needs additional resource that needs to be factored in.
2. Post 16yr olds: increasing numbers with EHCPs are accessing post 16 learning pathways e.g. 213 young people in City College with EHCPs requiring input, albeit not all with therapeutic needs, 75 young people who have moved from Year 11 to college who would require ongoing SALT input. The majority have EHCPs with SALT hours, with many of them continuing to stay on at Oakwood and Chatsworth college provision.
3. Achievement of stated EHCP hrs: if EHCP hrs are prioritised in the current situation then preventative work is not being done which will impact in the longer term, potentially with increased numbers of EHCPs. Also it is not always possible to deliver what is stated in the Plan due to COVID restrictions.
4. Developmental Language Disorder: this is under-identified in Salford, work is ongoing to raise awareness and if this leads to greater identification, then this may mean that there needs to be a re-prioritisation of resource based on need, which may mean that some CYP no longer receive a service.
5. Staffing gaps within SLCN service (3.2 WTE down due to staff leaving & mat leave) & issues recruiting suitable band 6 staff
6. Staff absence due to COVID: either due to sickness themselves or a need to isolate due to sickness within the family.

| Summary of Risk | Summary of Mitigation | RAG Rating |
|-----------------|---|------------|
| Post 16yrs | 1. Review the data and scope the provision 16+ | |
| Estates issues | 1. Proposed Changes to education estate shared at LA/CCG Liaison Meeting 2. LA/CCG planning on health services in special schools – meetings to be resumed | |
| Staffing gaps | 1. Recruitment process is underway, looking at best skill mix & use of locums | |

Issues for escalation (through 0-25 Advisory Board and/or Commissioning Committee)

Achievement of stated EHCP hrs: if EHCP hrs are prioritised in the current situation then preventative work is not being done which will impact in the longer term, potentially with increased numbers of EHCPs and commissioning committee is asked to note this risk.