

# the school years toolkit

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## The Children and Young People's Integrated Therapy Team (CYPIT)

### What is CYPIT?

**CYPIT** (Children and Young People's Integrated Therapies) **is made up of occupational therapists, physiotherapists and speech and language therapists working together to provide an integrated therapy service to children and young people with developmental needs within Berkshire.**



We provide a community therapy service for children and young people from birth to 19 years old with physical, occupational and speech and language difficulties living in Berkshire.

The service is mainly provided within community settings such as schools, children's centres and other pre-school settings, patients' own homes or clinics.

We aim to provide family centred therapy as an integrated package of care tailored to the child's individual needs.

However, many children show delays or difficulties with their development and, therefore, a key role of the service is to inform and skill the wider children's workforce to enable them to follow good practice guidelines, give general advice to parents and adopt a 'watch-and-wait' strategy to see if the advice results in an improvement. When this occurs, the child will not need referral for specialist assessment and intervention from CYPIT.

It is also vital that other agencies are able to recognise when a referral is indicated and more specific advice or intervention is needed. CYPIT aims to support the children's workforce and referrers to achieve this by circulating information such as the Toolkit for Early Years and Toolkit for School Age and by delivering training courses for other professionals.

### Staff teams

#### CYPIT includes:

- **Physiotherapists**
- **Occupational therapists**
- **Speech and language therapists**
- **Therapy support practitioners**
- **Administrators**

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Our occupational therapists, physiotherapists, speech and language therapists and therapy support practitioners work together in area based teams to deliver assessments, training, advice and interventions.

Our paediatric therapists are graduate health professionals who are registered with the Health Professions Council (HPC).

Our therapy support practitioners are non-qualified members of staff who may carry out a programme of therapy under the direction of a therapist, train families and staff in how to carry out the programme, adjust equipment or assist in group therapy sessions.

### Speech and language therapists

**Speech and language therapists work with children and young people with communication or feeding difficulties.** These may include difficulties in understanding or using language, speech or voice production or fluency.

The speech and language therapist considers the child's communication skills and environment and the impact these are having on his or her life. The therapist then works with adults around the child to enable successful communication throughout their daily lives.

### Occupational therapists

**Occupational therapists who work with children and young people help them to carry out the activities that they need or want to do,** in order to lead healthy and fulfilling lives.

Occupational therapists work with people who have physical, learning and/or social problems, either from birth or as a result of accident or illness. They are experts in supporting the development of independence and provide assessment, advice and guidance, therapy sessions and specialist equipment where necessary.

### Physiotherapists

**Physiotherapy helps develop movement and function when a child or young person presents with a non-acute disease or disability affecting their development.** Such as cerebral palsy, muscular dystrophy, developmental delay etc.

Physiotherapists assess and treat children and young people helping them achieve mobility and function. Treatment might include specific exercises, positions and hands on therapy. Physiotherapists sometimes use specialist equipment and mobility aids.

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## How to be referred

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### Who can refer:

Referrals may come from anyone who has professional or parental responsibility for a child or young person and has concerns about their development. Our referrers include: GPs, Consultants, Teachers, Advisory Teachers, Educational or Clinical Psychologists, Health Visitors, School Nurses, Children's Centre staff, Social Care Teams, parents/carers and young people themselves.

Following the assessment of a child or young person, CYPIT will ensure that the referrer receives accurate and timely information about the outcome of the assessment and whether any intervention from the CYPIT is needed.

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### How to make a referral to CYPIT

#### Telephone Advice Line

If you are uncertain whether to refer to CYPIT or would like to discuss your referral, please contact us on our Telephone Advice Line. The CYPIT Telephone Advice Line supports parents/carers and professionals to meet the needs of children and young people whose development may be causing concern.

The line is staffed by therapists from the three disciplines. They can discuss the caller's concerns, advise them on how to support the child or young person and consider whether a referral to CYPIT may be needed.

#### Using the Telephone Advice Line

**To include details about TAL including numbers opening times etc**

#### Making a written referral

Anyone who wishes to refer a child or young person to CYPIT who meets the referral criteria will need to complete:

- **Appendix 1 - 'CYPIT Referral Form' >**

If you are referring for an occupational therapy assessment you will need to complete:

- **Appendix 2 - 'Additional Information to Support Occupational Therapy referral' >**

#### Triaging referrals

A team of therapists, one from each discipline, considers all referrals and decides on whether the referral is appropriate and, if so, on the most appropriate professional(s) to assess the needs of the child or young person. If the referral is not accepted, the referrer and parent/carer will be informed. If an alternative service is identified that is more appropriate to meet the child's needs, this will be suggested.

Waiting times for initial assessment will vary depending on service demand. Certain referrals will be prioritised to be seen more urgently according to best practice guidelines. You are welcome to contact the department for information on the current waiting times.

A convenient time and location for the assessment appointment is agreed with the parents/carers and a letter is sent to confirm the appointment.

#### Assessment

**Assessments are offered within the most appropriate environment for the needs of an individual child/family.**

During the assessment process, the therapist gathers further information about the child or young person and their family, to gain a better understanding of their current development and the nature of the concern.

The therapist may also wish to talk to the child or young person's teacher/tutor or visit the school to get a clearer idea of how they function there.

At the end of the assessment process, a discussion will take place with the family to determine whether further involvement from CYPIT is required. If no further involvement is required, a discharge letter will be sent to the parents/carers and copied to the referrer.

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The therapist may also recommend that the child is seen by another member of CYPIT or a professional in another service.

The assessment process may highlight a goal that the Integrated Therapy Service can help the child to achieve by providing a form of intervention.

### **Intervention**

Depending on the child's needs and difficulties, one or more of the following options may be agreed with parents/carers in order to help the child to achieve their goal.

- advice and recommendations for achieving the agreed goal.
- a programme of therapeutic activities to be carried out at home and/or in school.
- training of parents and/or involved professionals to meet the child or young person's needs.
- a review to check the child or young person's progress after a few months.
- a block of individual or group therapy sessions.

Following the episode of care, the child's progress towards their goal and their continuing needs will be reviewed in order to decide on the next steps.

### **Discharge**

When it is determined that the involvement of CYPIT is not currently required, this is discussed and agreed with the parents/carers. The family's GP and other involved professionals are notified of the discharge.

Referral back into the service can be made at any time should the child or young person's needs or circumstances change.

Parents/carers need to be aware that non-attendance without notifying the department may result in their child being discharged from the service without being seen.

### **Appendices**

- **Appendix 1 - 'CYPIT Referral form'**
- **Appendix 2 - 'Additional Information to Support Occupational Therapy Referral'**