



UNLOCKING POTENTIAL

LEVELLING THE SOCIAL AND ACADEMIC ARENA

SPEECH AND LANGUAGE THERAPY AND OCCUPATIONAL THERAPY POLICY

Mission Statement

The Levels School exists to provide a nurturing environment in which students with specific learning difficulties and co-occurring diagnoses can develop their self-esteem and aspire to be independent young adults who value the rights, responsibilities and rules that exist to promote and support their future welfare. Our approach toward establishing this ideology is predicated on trauma-informed practice and an obligation to develop the social skills required to build their future aspirational communities. We exist to help them find their level.

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List of connected policies	SEND, Curriculum, Behaviour, Staff Code of Conduct, Allegations against Staff, Lone/Alone working, Data protection policy and procedures
Approved / Date	

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Therapy

Students at The Levels School may need Speech and Language Therapy and/or Occupational Therapy. When this policy refers to 'Therapy' it covers both Speech and Language Therapy and Occupational Therapy otherwise it will specify which therapy is being discussed.

Therapy is available at the school for pupils who have this particular need educationally, medically, psychologically or for social/emotional reasons. Therapy will be provided as determined by, and at the discretion of, the school's Therapist(s) for:

- a) pupils whose EHCPs give specific Speech and Language Therapy and/or Occupational Therapy requirements.
- b) pupils who are revealed by the admission assessment procedure (see below) to be in need of such help and support, even if not previously identified. In this case, funding of Therapy will need to be accepted by the local authority or parents as detailed below and added to the EHCP, if one is in place, at Annual Review.
- c) pupils who through concerns expressed by themselves, their parents or carers, teachers or other involved parties are brought to the attention of the school's Therapist(s) will be seen for assessment and advice. Intervention will only be undertaken after consultation with parents and others involved and if agreement to intervention and charges is accepted by the parents, and local education authority or other party where applicable.

Therapy is chargeable on an annual basis at the rate notified with the school fees prior to the commencement of each academic year, payable in three equal termly instalments (See note on next page for details of provision/charge). Written agreement to the provision will be sought from the parents in all cases and written agreement to the charge will be sought from the relevant authority or parents as applicable prior to the commencement of any programme of intervention. In the event of the consent/funding not being readily forthcoming, discussions will be held with the SLT and appropriate correspondence and negotiations undertaken. The therapists' recommendations will be recorded on the pupils' files even if therapy is not accepted and parents will be asked to return a signed form if they decline therapy for any reason.

NB: in order to ensure no issues over bill payments, therapy will only begin when signed forms authorising this have been received by the school from parents, and local authorities where applicable, even when an EHCP includes therapy provision.

Provision/charge: Therapy is charged at the same rate per session. If students require multiple sessions per week then it is still charged at the same flat rate. The number of designated sessions will be as specified in the EHCP or agreed with the parents / carers. The sessions may be individual or shared, with the vast majority being individual. Provision also includes the cross-curricular support required and all liaison with staff, parents and other involved parties. This enables a whole school approach.

Assessment Procedure

No pupil will be assessed until written consent is in place. Once consent to assess is gained the students will be assessed within the first term of starting at The Levels School and assessed in order of consent received. Students will receive comprehensive standardised assessments in both Speech and Language and Occupational Therapy.

Speech and Language Therapy assessments involve the use of well-recognised standardised assessments which look at a range of areas which affect receptive, processing and expressive language as well as memory and pragmatic language skills. In addition to this, the therapists will seek the opinion of each pupil with regard to his/her own effectiveness as a communicator.

Occupational Therapy assessments involve the use of well-recognised standardised assessments which look at a range of areas of fine and gross motor skills, visual perceptual skills, functional and daily living skills and any sensory difficulties the students may experience.

The only exceptions to this procedure being followed will be those pupils whose assessments have been recently completed prior to entry to the school and on whom current valid reports are still available. These pupils will have an initial interview with the therapist to discuss and evaluate their needs in the light of information available and to complete assessment in any areas not previously covered. Pupils whose parents have not returned the consent form will not be assessed until this has happened; in the event of an undue delay, contact will be made with the families concerned. If a parent refuses consent, this will be recorded in the pupil's school file and in department records.

Following the assessment procedure, reports will be written indicating which pupils require immediate intervention, those requiring later review and possible follow up and those needing no further action. These will be included in the pupils' school files and tutor files as well as on the Therapy drive. Both Speech and Language and Occupational Therapy aim to send out their assessment reports at the same time to parents to allow parents to see the full picture of their child's needs. Consent to start therapy (therapy funding agreement) with the terms and conditions are sent out to parents and the LEA where appropriate, to seek consent to therapy and agreement to the charges.

These assessments normally takes place during a pupil's first term at the school. Pupils, parents and staff are able to ask the department to reassess a pupil at any time whether or not that pupil is currently receiving therapy. Before therapy begins, parents are required to return signed consent and Terms and Condition forms. If therapy is funded by the Local Authority then it cannot commence until signed consent forms and Terms and Conditions are returned from them also.

Therapy Service

The service is administered by the Head of Therapy, currently a Specialist Speech and Language Therapist, in conjunction with the SLT. The department includes the other Speech and Language Therapists and Occupational Therapists.

The therapists in post have a variety of backgrounds and experience. All posts are staff posts. All therapists are required to be members of The Royal College of Speech and Language Therapists (RCSLT)/The Royal College of Occupational Therapists (RCOT) and to maintain their registration with the Health and Care Professions Council (HCPC).

All therapists are involved in the day-to-day running of the department with the Head of Therapy having overall responsibility and liaison as needed with the Headteacher. The department is an integral part of the school and takes a full part in its life.

All therapists make personally owned equipment available to the department if needed. This augments the department's resources and increases flexibility in delivering an appropriate range of therapy techniques.

The financial control of the department rests with the Headteacher and ultimately with the directors. Budgets for equipment are dependent on requests to the Headteacher. Training or other needs of the service are put forward annually for consideration by management, as are larger items which would be outside normal budgetary constraints. The service is largely self-funding through the charging system.

Staff training/continuing education

All staff are involved in inset training at the beginning of each term. Staff are also encouraged to become involved in and attend any courses of interest and relevance held either nationally or locally. Staff must ensure they fulfil their commitment to Continuing Professional Development by attending courses, keeping up to date with reading etc. Weekly departmental meetings ensure that all therapists (Speech and Language and Occupational Therapists) are kept up to date with the developments and activities of the school as well as enabling regular updating of skills and knowledge. Staff undergo annual Individual Performance Reviews (with termly updates) as well as attending regular supervision sessions with a member of their same profession.

Inset training is made available by members of the department to all staff from time to time by specifically arranged sessions. The therapists also ensure through induction that new staff have the opportunity to become aware of their role within the school and how to become involved and support that work.

Provision of Therapy

The school uses a direct therapy model in order to address the specific needs of the pupils, many of whom have longstanding language difficulties for which they have received little or no therapy intervention prior to admission. Therapy will be provided on a one-to-one, paired or small group basis depending on the needs of the pupils concerned and others in need of similar therapy. Therapy may be short term to remedy a minor or temporary problem or for a significantly longer period of time dependent upon the problem.

It is not always possible to determine the relevant length of therapy at the outset but by the nature of the complex learning difficulties our students encounter it tends to be long-term and the pupils are likely to require therapy for a number of years.

Discharge from therapy occurs when a pupil leaves the school or when sufficient progress has been made for therapy no longer to be necessary; readmission to therapy is possible should the situation change. A discharge report will be put in department files, school files and will be sent home to parents. Information regarding access to Therapy services after leaving the school is provided if requested.

A pattern of persistent failure to attend leads to investigations as to the reason and a resolution is sought (e.g.: change of time, targets, therapist etc) but it is possible that therapy may be suspended or terminated if a satisfactory outcome cannot be reached after discussion with all parties.

Breaks from therapy may be offered but, in general, school holidays provide natural breaks. Sessions are normally on a once-weekly basis and each normally lasts thirty minutes (to fit with the school timetable, minimise disruption to lessons and to manage the impact extraction can cause); the optimum time for concentration and effect has been found to be about twenty minutes for individual sessions so activities within a session will change to minimise any drop-off effect. For pupils who require more therapy sessions each week, close attention is paid to keeping disruption to their academic timetables to a minimum. Therapy is provided at the discretion of the school's Speech and Language Therapist/Occupational Therapist(s) within the restrictions of time available and obligations to EHCP and specifically placed pupils and in line with the provision and charging arrangements. Admission to therapy is achieved by assessment (either on admission or through previous reports) and obtaining the necessary consents. Methods of approach will vary to allow each pupil the optimum chance of benefiting from therapy whatever his or her preferred learning style, strengths and weaknesses. Treatment plans and targets are included in the pupils' department files and incorporated into the school's Tracker with termly updates.

Second opinions will be sought as necessary or if requested by any involved party. A referral would be made either to the NHS or an independent practitioner at the request of the parents, the LA or staff after consultation and with the agreement of the parents; however, due to the very specific nature of the difficulties of these pupils reaching the provision at this school tends to have come after years of being unable to find appropriate support for their needs elsewhere and thus, in practice, the need for onward referral is uncommon. One area in which we have seen an increase over recent years is the need for outside assessment for those pupils who have auditory processing difficulties: Speech and Language Therapists can identify and assess for this difficulty but a diagnosis of Auditory Processing Disorder (APD) has to be made by a medical specialist: we refer pupils to Great Ormond Street or the National Hospital for Neurology and Neurosurgery, the choice being dependent on the age of the pupil.

Pupils can be referred to an Educational Psychologist as needed through the school or parents. Other outside referrals are made through the appropriate channels.

Prioritisation for treatment is not generally necessary at present but the earlier system whereby the categories below are given priority would apply if needed:

- a) those with Therapy specified in an EHCP and for whom both funding and consent have been agreed
and

those admitted to the school on the understanding that therapy would be provided and for whom the necessary consents have been received

- b) others as required subject to charges and restrictions

Treatment plans are formulated after discussion with pupils, parents and relevant staff taking into account pupils' previous experiences, strengths and weaknesses, specific educational difficulties and current levels of interest and motivation. Pupils are encouraged to become actively involved in target setting and to monitor how well they are moving towards achieving their targets. Reflection and review of sessional work are very important aspects to enable pupils to realise the relevance of the work as well as to see their own progress and to develop involvement and ownership. All treatment plans are individually formulated and are modified in the light of each pupil's response to sessions as the weekly sessions take place. It is the intention that all staff will be involved in supporting our work, but will not have to assume responsibility for it.

Pupils and their families are informed that therapy will continue for as long as appropriate provided that:

- 1) the need continues to exist
- 2) the fee continues to be paid
- 3) the pupil continues to be committed to attending and working

Parents may withdraw their children from therapy by letter or orally but are encouraged to discuss the full situation and implications with the therapist beforehand. A term's notice is expected if parents decide to terminate therapy and where parents have responsibility for payment. A term's fees will be charged in lieu of notice if therapy is terminated without the due notice. This is made clear in the Terms and Conditions. Therapy for those for whom the LA pays will usually only be terminated after a decision at Annual Review, or, occasionally, therapy may have been agreed for only a limited time. Therapy may also be reduced or terminated on the therapist's advice after discussion with the parents and any other relevant parties if sufficient progress has been made or if there is some problem interfering with regular attendance.

Outcome is monitored termly by target review as well as by the more formal processes of reassessment, reports and staff reviews.

Student training/support

University students studying any course leading to a professional Speech and Language qualification can be accepted by arrangement for block or once weekly placement. The students' programmes during school hours are the responsibility of the Head of Therapy and will involve observation, treatment, assessment, mentoring, debriefing etc as required in line with the requirements of their courses and under the supervision of the therapists. A formal report is made to the student's college at the end of the placement. The most likely

courses using this facility are those run by The College of St Mark and St John (Marjon), part of The University of Plymouth and The University of Reading.

Other provisions of the Therapy service at the school

Reports are written for a variety of purposes:

- a) new pupil assessment reports – copies put in school files and sent to parents, with copies to other professionals if necessary
- b) end of half term and end of term reports
- c) assessment and progress reports for annual reviews (see *), for other professionals, for tribunals, for future educational establishments, for parents requiring further details etc.
- d) for requests to general practitioners in the event of a pupil requiring referral to a medical specialist

PLEASE NOTE: any report about a child will only be sent to other parties with the consent of the parents, with the exception of the regular end of half term reports and contributions to IEPs and Annual Reviews.

* **Annual Reviews:** It is our policy to provide **detailed** reports for Annual Reviews **only if** these are specifically requested well in advance of the annual review. Normal practice is the inclusion of therapy concerns and targets in the pupil's IEP and staff review. LEA representatives are welcome to ask for further clarification/explanation at the Annual Review. Therapists attend Annual Reviews regularly.

Interviews are offered to parents of pupils under the care of the school's therapists and to parents of prospective pupils who may have therapy needs. With parental consent, professionals from outside school and who are involved with a pupil's care may be offered interviews. Appointments are readily available at half term and end of term.

Appointments are arranged through the school offices but it may occasionally be possible for an impromptu meeting to be held.

Telephone and email contact are often a useful alternative to a face-to-face meeting especially when a query needs prompt attention. Telephone and email enquiries receive a prompt response, usually on the same day as they are received. If a delay is unavoidable while enquiries are being made, a message will be passed to that effect and a time scale given for a full response. Courtesy and good relationships with all callers are given high priority. All therapists have their own email address at school.

Cross curricular support is one of the prime considerations of the therapy provided at The Levels School as it is essential that such therapy is relevant to the pupils' overall educational programmes and needs and will facilitate and enhance their other learning opportunities. Attention is given to concerns expressed by staff involved with the pupils in determining the course of their therapy, and particular needs from other curriculum areas are integrated. Communication with, and feedback to, all staff concerned are possible through daily briefings and weekly staff meetings as well as by direct contact with individual staff. Therapists may also spend time in the classroom to see how the pupils under their care are performing functionally.

The therapists participate in daily briefings and weekly staff meetings and IEP meetings. Attendance at these meetings is dependent upon the therapist's working week but all therapists contribute to meetings and documents as necessary. The therapists attend other meetings, such as annual reviews, by invitation. Other meetings to discuss any pupil's progress/problems will be convened and attended by such personnel as the situation demands. The therapists act as mentors or keyworkers to particular pupils from time to time, especially when they are deemed to be the most relevant members of staff.

Record keeping is done within each pupil's therapy file as assessments/ reassessments are made. Sessional therapy notes are recorded on each occasion the pupil is seen. School files are updated at Annual Review and when any other report or request is made. Test data is discussed at an appropriate level with pupils and their rates of progress are regularly reviewed with them. Parents may request data at any time, but such data should only be released with a full explanation or at a meeting when the therapist will be available to explain or answer any queries. Case notes are subject to peer review/audit to maintain adequate standards. Registers are kept to detail attendance and reasons for failure to attend.

Current therapy records (personal pupils' details, assessments and therapy) are kept in locked filing cabinets within the department rooms with all therapists having access to keys to all cabinets. Reports and records are also maintained on the school's computer system with each therapist having an individual log-in. These records are confidential, but the contents are discussed with staff to facilitate programme planning and to aid the child's education. Parents, and pupils when they have reached the appropriate age, have the right to see these files upon request. Records are kept after the pupil leaves the school until the young person reaches the age of twenty five (in line with policy for all records containing information pertaining to health matters) and are then disposed of by pulping, shredding or burning.

Targets are drawn up for each pupil or group of pupils once a term with a signed target sheet / action plan. For the youngest and newest pupils these may be determined by the therapist alone after consultation with other staff but with the older pupils the targets are jointly agreed and determined. Each task set thereafter relates to an aspect of the targets and pupils respond positively to being able to see what it is that they are striving to achieve. Target review and feedback are made possible by target sheets maintained within each pupil's departmental file. Target information can be shared to help staff support the therapy needs across the entire curriculum.

Individual Education Plans (I.E.P.s) will contain information on the pupils' current levels of achievement, therapy needs and targets as well as indicating response to therapy and any other relevant information.

Reviews of progress are carried out regularly in order to assess the efficacy of therapy and the pupils' responses to it. Adjustments are made as required to therapy, targets and approach. Pupils are made aware that such reviews assess the therapist's work as much as their own and they are encouraged to be actively involved by being invited to comment on how they feel about various aspects of the work they have done. Attainment is easily

measured on an ongoing basis from response to therapy as well as by the more formal process of testing. Review by testing facilitates and enables decisions to be made about future therapy thus allowing for better planning and strategies for future work to be developed.

Feedback to pupils is an integral part of the review and therapy processes and is therefore an ongoing feature of the provision to these pupils. Feedback to staff, parents and professionals is, as already mentioned, through the process of reports and interviews. Pupils can receive immediate feedback during a therapy session by means of praise and by reward through the school house point system.

Attendance at the sessions is recorded electronically and in hard copy registers on each site. As well as maintaining a record of attendance, this facilitates data handling and planning with registers having coded entries making it possible to see why sessions are missed and to see if this influences the outcome of therapy. Pupils are encouraged to take responsibility for remembering to attend their sessions but a variety of tactics and strategies exists to support them in this (reminders to individual pupils/staff, additional individual strategies determined jointly by a pupil and therapist as required). If a pupil frequently misses sessions and is thought to be avoiding attending, a discussion will be held initially with the pupil with further discussion with tutors or parents as required. Discussions with pupils may result in an altered attendance, e.g.: coming out of a different lesson, paired therapy or replacing a missed session with another at a mutually agreed time. The system is designed to be as flexible as possible. If a suitable solution cannot be found then the future of therapy will be reconsidered.

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Service monitoring is carried out informally by means of an appraisal of the service given once a year to the Headteacher by the Head of Therapy. This reviews the numbers of pupils within each year group currently in need of the provision together with their status (funded, EHCP etc). More frequent reviews are submitted should the need arise. Additionally, the department has annual Independent Performance Reviews (IPRs) for all its members as part of the school's ongoing development and planning. The Head of Therapy has appraisals with the Headteacher.

Service/therapist information: the family of each pupil in need of therapy is contacted after the initial assessment has been carried out. At this point the therapist introduces themselves and the service to the family, providing as much or as little detail as they require at that time and making clear the accessibility and availability of the therapist to the families whenever they feel the need for contact. The position regarding end of term interviews and reporting is also explained. Parents are invited to make appointments to see or to contact the therapists at any time. An introductory letter, Terms and Conditions and consent forms will then be sent to the parents of pupils requiring therapy.



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