



Working in partnership with
London Borough of Sutton



Sherwood Foundation School

THERAPY OFFER

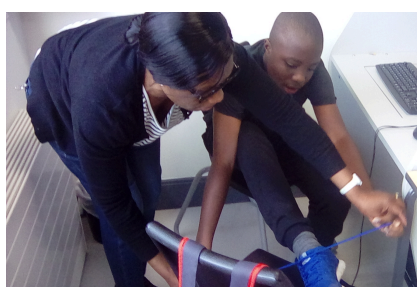


Therapy Offer

Our School Ethos - Therapy within an Embedded Trans-disciplinary Offer

This offer should be read in conjunction with the Sherwood Foundation School Teaching and Wellbeing Offers. The total school offer can be found on the website. Therapists at Sherwood Foundation School (Sherwood Park Campus, Sherwood Hill Campus & Sherwood Manor Campus) work in a trans-disciplinary way as an integral part of the school team to meet the therapy provision requirements and outcomes of the EHCPs for all children and young people within the school. The transdisciplinary model of practice aims to provide more family-centred, coordinated, and integrated services to meet the complex needs of children with disabilities and their families. Transdisciplinary work seeks to develop holistic provisions by integrating different disciplinary perspectives, thereby creating new frameworks to understand problems for the purposes of developing more effective solutions.

Our therapy team is provided by Cognus Therapies but supported and integrated into the wider school with the support and leadership of the therapist on our school leadership team. The team is based on-site and works together with the teaching and wellbeing staff at all levels of our school to enable a trans-disciplinary approach, providing equal representation and consideration in relation to commissioning, admissions and school development, as well as integrated pupil assessments, reports and outcomes. This ensures that the people around the child/young person share skills, use consistent approaches and are equipped to effectively deliver the universal and targeted services described below. This also ensures that therapy is fully embedded within the curriculum and day to day running of the school. This model of working enables specialist teaching, wellbeing and therapeutic interventions to be moved effectively to targeted and universal options in order that the team around the child can better support the individual. This also ensures continuous growth of the whole school community, enabling us to adapt alongside best-practice developments.



Introduction to Our Therapy Team

The therapy team, funded by the Local Education Authority, consists of occupational therapists (OT), speech and language therapists (SaLT) and at times, therapy assistants, based across the Sherwood Park Campus, Sherwood Hill Campus and Sherwood Manor Campus. Since

September 2018, the therapy team has been supported by a member of the school's senior leadership team who is funded by the school to ensure that the therapy offer and therapy provision is integrated fully within the trans-disciplinary school offer. The therapy staff are provided by Cognus Limited and there is close collaboration between the school Senior Leadership and the Cognus Therapies Team Manager, to ensure an effective and seamless service. The therapists are all attached to class teams and work closely with the teachers, and with the support of the wellbeing team in order deliver our trans-disciplinary offer.

The education therapy team prioritises close collaboration with parents / carers. We work closely with the NHS nurses and NHS therapists, consisting of OT, physiotherapy, SaLT and therapy assistants who work primarily on the Sherwood Park campus. The team works closely with other outside agencies including Child and Adolescent Mental Health Service (CAMHS), social care, Mencap and respite services. Moreover, the students also have access to additional therapies funded by the school, e.g. play therapy, music therapy, rebound therapy and pet therapy.

Our Therapy Team

At Sherwood Foundation School we follow a holistic, neuro-affirming, trauma-informed and strengths focused therapy approach, where children/young people and families are central to all decisions made in relation to assessment and intervention. We work in a trans-disciplinary way, living and embodying the school's LEARN ethos when collaborating with the individual, their parents, school staff and outside agencies. Ultimately enabling the child/young person to achieve highly individualised outcomes that are focused around leading full and happy lives, realising potential and becoming valued members of their community, preparing them for adulthood. This is achieved through the trans-disciplinary team embedding therapy outcomes and interventions into meaningful, functional activities within the home and school environment.

We have a leadership structure with a highly specialist OT and SaLT based on each campus to provide supervision and promote best practice in collaboration with the therapy and teaching senior leaders and with their wider leader teaching and wellbeing colleagues. All of our therapists have allocated time for continuous professional development which includes peer support, training and review of research to ensure a high standard of delivery. The therapy team also has access to support and training within the wider Cognus therapy team (e.g. specialist Down syndrome, and hearing impairment SaLTs). Our therapists have a range of specialist knowledge and skills, which includes post graduate training in areas such as Self-Reg, DIR Floortime, specialist AAC systems (e.g. PODD, TouchChat, LAMP Words for Life), SCERTS, Ayres Sensory Integration, SOS Feeding, complex access supports, Therapeutic Listening and Neurodevelopmental Therapy (NDT).

The Sherwood Foundation School therapy team are all registered with the Health and Care Professions Council (HCPC) and follow the best practice guidelines of the Royal Colleges of OT and SaLT. Our therapists have a wide range of knowledge and clinical experience, and specialise in working with children with complex support needs including but not limited to;

vision and hearing impairment, autism, attention deficit hyperactivity disorder (ADHD), cerebral palsy (CP), epilepsy, Down syndrome, Angelman's syndrome and other genetic or chromosomal conditions.

Speech and Language Therapy

The SaLT team dynamically assess, set outcomes and support progress towards all areas of communication development including; attention and listening, engagement, social communication, interaction and play skills, receptive language, expressive language, augmentative and alternative communication (AAC), alternative access AAC, speech sounds, phonological awareness and literacy.



A total communication approach is used, which recognises and encourages all forms of communication including facial expression, body language, behaviour and gesture. We ensure all staff prioritise listening and responding to students, enabling them to feel heard and honouring their voice. In addition, we understand the importance of developing communication through regulated interactions, play, and within functional life skills. This approach enables our students to communicate using a range of strategies depending on their environment and communication partner, and allows adults to model and support them to work towards more conventional forms of communication such as spoken language, symbols or sign. We promote autonomous communication, neuro-affirming approaches, the use of core vocabulary through aided language input and complete detailed assessments in order to provide individualised robust AAC systems to ensure all students have a voice. This facilitates development of an authentic self, and self-advocacy as our students prepare for adulthood. Communication and language skills are also key to literacy development and we work closely with teachers to build understanding, awareness and enjoyment of print for those with emergent and conventional literacy skills.

Occupational Therapy

Education OTs support children and young people to participate fully in everyday meaningful activities by addressing challenges related to their occupations (well-being, daily routines, school skills, play & leisure, and transition to adulthood). Our OT team utilises a holistic transdisciplinary approach rooted in the balance between the person, their occupation, and their environment. We believe that every child and young person has the potential to thrive when all aspects of their life are meaningfully addressed and supported. Our work goes beyond isolated

skill-building, it focuses on building trusted relationships, supporting wellbeing and regulation, as well as nurturing and honouring the uniqueness of each individual in order to develop their autonomy and engagement in meaningful occupations.

Our team provides a wide range of assessments, interventions, upskilling, training, and environmental adaptations tailored to the daily occupations of our learners. We focus on functional activities such as supporting the foundations of regulation and self-care (good health, sleep, regulation, sensory differences, toileting, dressing, grooming, feeding); enhancing school-based skills (engagement, focus and attention, using tools including pencils, scissors, alternative pencils, active participation in PE) and develop play & leisure skills (chosen activities in free time, self-occupancy, relaxation, play, social life, sport and fitness) for the purpose of supporting wellbeing, social connection, and self-expression, which are vital for emotional growth and forming self-identity. In preparing our young people for adulthood, we support the development of life skills that foster independence (making a drink, snack and meal preparation, access to the community, shopping, domestic skills, supporting vocational studies & transition to living away from home). Our interventions also extend to modifications and adaptations to activities and the environment, ensuring that pupils can navigate and thrive in their surroundings (coping with transitions, equipment needs and environmental modifications and adaptation, ICT and alternative access methods).



Delivery of the Therapy Offer - Three Tier Model

The whole Sherwood Foundation School team provides teaching, wellbeing and therapy services based on the widely recognised three tier balance model (Gascoigne, 2006). This works in conjunction with the Ordinarily Available Provision (OAP) provided by Cognus Therapies. Our three tier model is provided alongside the school's core therapy offer as every child/young person within the school requires access to therapy provision through their Education and Health Care Plan (EHCP) to varying degrees throughout their educational lives. This model is delivered within the context of a transdisciplinary approach (see teaching & wellbeing service offers).

Levels of Service Provision



Specialist Provision
Intervention delivered directly by a trained therapist, due to the specialist skills required for the intervention .
Targeted Provision
Provision delivered by key members of school staff or parents who are specifically trained in the technique(s) by a therapist or therapy assistant or who deliver interventions under the recommendations of the therapists.
Universal Provision
Provision delivered by all school staff and parents and supported at a universal level by the therapy team.
Core Offer
Core therapy services that are available to all children in the school to support statutory processes.

Core Offer

All of our learners are viewed as having specialist level needs through their EHCP therefore the school's core therapy offer surrounds our therapy provision and is designed to ensure that every child/young person has access to the essential services they require to support statutory processes. This includes: detailed baseline and transition assessments; reports to support annual reviews including key stage transitions; termly target setting and review (6 monthly for some learners); therapy outcome measures (TOMs); essential safeguarding support; liaison with parents, teachers and outside agencies; standard documents and profiles (including regulation & communication profiles) and handovers between teams.

Universal Provision

Our universal provision empowers school staff and parents to embed a range of best practice therapy strategies and techniques within their daily routines to ensure high quality therapeutic support for all children/young people at Sherwood Foundation School. This includes wellbeing and crisis support; promotion of communication and regulation friendly environments, techniques and strategies; standard programs and profiles (e.g. regulation and communication profiles); whole school support and development (e.g. teacher and parents/sibling training & coaching); therapy input within policies and documents; curriculum development, provision mapping and planning; and support for pupil transitions and admissions.

At this tier, the therapists work in a consultative & collaborative manner alongside teaching and wellbeing staff, ensuring that we consider regulation, communication, social skills and life skills at the heart of our provision.



Targeted Provision

The aim of targeted therapy is to build adult capability through modelling and upskilling of specialist strategies and delivering programmes. This allows for embedding more individualised therapy strategies into the learner's daily life. This also supports targeted therapy provision to become universal within the whole school team over time and reduces the need for specialist provision or allows for new specialist interventions to be introduced.

Targeted provision includes:



- Interventions and groups that have been established with the support of an OT, SaLT or therapy assistant, but have become self sustaining within settings (e.g. regulation lessons, sensory circuits, sensory stories)
- Strategies delivered by school staff or parents with ongoing review from the therapist or therapy assistant (e.g. video modelling to develop independence skills, DIR Floortime, therapy programmes and modelling of AAC, activities to support regulation)
- Providing a block of therapy or training to upskill the school team or parent for them to continue supporting the skill once therapists handover.
- Intervention from SaLT, OT or assistant to assess, trial and monitor strategies that can be delivered by staff, assistants or parents (e.g. trialling regulation strategies, equipment, ICT and AAC systems). This includes assessment for and provision of

some equipment (e.g. rocker chairs, weighted or compression clothing).

Specialist Provision

Specialist provision is required for children when universal and targeted provision cannot meet their needs or where further assessment is required to identify appropriate interventions. This level of provision is provided for a defined period of time with the aim of reducing the impact of the child or young person's barriers to learning and increasing their skills, whilst building the capabilities of the team to support them at a targeted or universal level in future.

Specialist provision includes:

- Therapists work directly with the child to provide highly individualised, specialist interventions in the most appropriate environment.
- OT and SaLT working with members of the wider team to collaborate and develop highly individualised, specialist transdisciplinary programs. This includes working within a multi-agency team on complex assessments, wellbeing plans and involves training others to carryover skills.



Progress Monitoring

Progress is monitored in a range of ways including:

- **Learners voice** (communicated verbally/AAC/visual supports and through increased well-being, engagement and more regulated emotions /responses)
- **Parent/ caregiver voice** through satisfaction questionnaires, meetings and feedback
- **Teacher's voice** – through satisfaction questionnaires, feedback on positive impact
- Short and long term **EHCP outcomes** through progress monitoring, moderation and evidence for learning.
- Therapy input into the school's holistic **LEARN Risk, Provision, Progress Tracker**
- **Review of assessment / outcome data** at key stage transition reviews
- **Feedback** from stakeholders e.g. caseworkers, CAMHS, social care, respite services
- Measuring wellbeing outcomes based on number of incidences & use of physical intervention, changes in risk assessment, data, progress data via **SLEUTH**
- Progress on **formal assessments/questionnaires** including Therapy Outcome Measures (TOMS) reported at annual review/key stage reviews

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