



Norfolk County Council



Core provision from NHS professionals for schools

Collated by NEL Commissioning Support Unit (March 2017)

Updated by Norfolk and Waveney Clinical Commissioning Group (NWCCG) (Oct 2020 & June 2021)

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Section 1 – overview

Core provision available from NHS Professionals to support the health needs of children in schools.

1.1 Summary

This document outlines the core provision available from NHS professionals to support the health needs of children in schools. This document outlines the range of commissioned specialist advice, training and support available to school staff and the direct therapy interventions that are available for children and young people (CYP) within mainstream and complex needs schools. It also provides information on additional advice, training and support that schools can commission independently, should they wish. It provides a framework to underpin safe practice for school staff in providing care to pupils within the school setting.

A multi-disciplinary child health team, including Paediatricians, Therapists, Clinical Psychologists, Dieticians and Specialist Nurses such as Health Visitors (HV), School Nurses and Community Children's Nursing Teams (CCNT), provide intervention and review for CYP with special educational needs and disabilities (SEND) and should contribute to supporting key transition points, including to adulthood. This document will also support all schools to deliver the appropriate 'reasonable adjustments' and to work closely with these pupils, their families and the relevant health professionals to ensure pupils reach their full potential within the 'Every Child Matters' outcomes.

The objective of the document is:

- To ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. (Supporting Pupils at school with medical conditions, Department of Health 2014)

National Service Framework for Children, Young People and Maternity (CYPM)

The National Service Framework for CYPM Services (DfES/DH 2004), states that:

- Local health agencies, LA's and schools (should) work closely to ensure that children with complex medical regimes, whether through chronic ill health or disability, receive the specific support they need so that they can attend school – whether a special school or mainstream – on a regular basis. Where support is provided by school staff, they are fully trained by health professionals. (DH,2004)

1.2 Clarification of the offer

Within Norfolk there exists a history of strong partnership working between professionals within health, the LA and schools. The aim of this document is to clarify the 'offer' to schools from NHS providers within the services currently commissioned by NHS Norfolk and Waveney Integrated Care Board (NWICB) and Norfolk County Council's (NCC) Public Health. It is the product of a collaborative joint work stream between NWICB, Norfolk

Community Health and Care NHS Trust (NCHC), James Paget University Hospital, Norfolk and Norwich University Hospitals NHS Foundation Trust (NNUH) and the Queen Elizabeth Hospital Kings Lynn NHS Foundation Trust (QEHL) (the NHS providers of the relevant services), East Coast Community Healthcare (ECCH) and NCC Children's Services.

The 'Healthy Child Programme (HCP) for 5-19 year olds', DH/DCSG 2009, sets out the recommended framework of universal, targeted and specialist services that should be available to promote optimal health and wellbeing for school aged children. The universal health provision across Norfolk is delivered by Cambridgeshire Community Services NHS Trust (CCS) Norfolk HCP. This core provision document outlines the specialist services that are available in addition to the Norfolk HCP 5-19 pathway.

These specialist services provide for the needs of children with long term medical conditions and/or significant disabilities. *Note: Specialist services are not provided by CCS as part of the HCP – they are mainly provided by NCHC.*

Health services for CYP with SEND provide early identification, assessment and diagnosis, intervention and review for CYP with long term conditions (LTC) and disabilities, for example chronic fatigue syndrome (CFS), anxiety disorders or life-threatening conditions such as inoperable heart disease. Services are delivered by health professionals including Paediatricians, Psychiatrists, Nurses and Allied Health Professionals such as Occupational Therapists, Speech and Language Therapists, Rehabilitation Trainers, Physiotherapists and Psychologists. In addition, public health services for children ensure a whole population approach to health and wellbeing including preventative services such as immunisation for the whole population and targeted immunisation for the most vulnerable.

Health services support early identification of young children who may have SEND, through neonatal screening programmes, the HCP, and specialist health and developmental assessment where concerns have been raised. Community Paediatricians in conjunction with other health professionals, particularly Therapists, are often the first people to notify young children with SEND to LAs. They provide diagnostic services and health reports for education, health and care (EHC) needs assessments. Integrated Care Boards (ICBs), NHS Trusts, and NHS Foundation Trusts must inform the appropriate LA if they identify a child under compulsory school age as having, or probably having, a disability or SEN (Section 23 of the Children and Families Act 2014).

1.3 Responsibilities outlined in the Children's and Families Act 2014: legal duties on schools

The Children and Families Act 2014 includes a duty on schools to support children with medical conditions. Schools must make arrangements for supporting pupils at schools with medical conditions and in meeting that duty they must have regard to the statutory guidance issued by the secretary of state. Schools that must meet the duty in the Children and Families Act are:

- A maintained school
- An academy school
- An alternative provision academy

- All alternative provision providers
- A pupil referral unit

The legal duty in the Children and Families Act is on 'the appropriate authority'. 'The appropriate authority' means:

- The governing body of a maintained school
- The proprietor of an academy
- The managing committee of a pupil referral unit (DOH, Children and Families Act, 2004)

Statutory Guidance

This statutory guidance applies to any "appropriate authority" as defined in the Children and Families Act, 2014 as detailed above. Below is statutory guidance for governing bodies of maintained schools and proprietors of academies in England from the Department of Health (DoH) Paper, Supporting pupils at school with medical conditions.

- The Governing body must ensure that arrangements are in place to support pupils with medical conditions. In doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child. Governing bodies must ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented.
- Governing bodies should ensure that the school's policy sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.
- Governing bodies should ensure that the school's policy covers the role of individual healthcare plans, and who is responsible for their development, in supporting pupils at school with medical conditions.
- Governing bodies should ensure that the school's policy sets out clearly how staff will be supported in carrying out their role to support pupils with medical conditions, and how this will be reviewed. The school's policy should be clear that any member of school staff providing support to a pupil with medical needs should have received suitable training.
- Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.
- Governing bodies should ensure that the school's policy covers arrangements for children who are competent to manage their own health needs and medicines. Governing bodies should have a medicine management policy
- Governing bodies should ensure that written records are kept of all medicines administered to children
- Governing bodies should ensure that the school's policy sets out what should happen in an emergency situation.
- Governing bodies should ensure that their arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in school trips and visits or in sporting activities and not prevent them

doing so.

- The governing body should ensure that the school's policy clearly identifies the roles and responsibilities of those involved in the arrangements they make to support pupils at school with medical conditions.
- For further statutory guidance please refer to DoH, Supporting pupils at school with medical conditions, April 2014

Non-statutory advice on roles and responsibilities

- **Head teachers:** Should ensure school policy is developed and effectively implemented with partners. Head teachers should ensure that all staff that need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. Head teachers have overall responsibility for the development of individual healthcare plans.
- **HCP 5-19:** Every school has access to the HCP through the single point of access. Healthcare professionals, including GPs and paediatricians should notify the HCP when a child has been identified as having a medical condition that will require support at school.
- **Parents:** Should provide the school with sufficient and up to date information about their child's medical needs.
- **LAs:** Are commissioners of HCP for maintained schools and academies. LAs should provide support, advice and guidance, including suitable training for school staff, to ensure that the support specified within individual healthcare plans can be delivered effectively. LAs should work with schools to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs.
- **Providers of health services:** Should co-operate with schools that are supporting children with a medical condition, including appropriate communication, liaison with school nurses and other healthcare professionals such as specialist and children's community nurses.
- **ICBs:** Should ensure that commissioning is responsive to children's needs, and that health services are able to co-operate with schools supporting children with medical conditions.
- **Ofsted:** Their inspection framework places clear emphasis on meeting the needs of disabled children and pupils with special educational needs (SEN) and considering the quality of teaching and the progress made by these pupils.

1.4 Common questions

What is the difference between Education Health and Care plans (EHCP) and Individual health plans (IHP)?

EHCPs

An EHCP is for CYP aged between 0-25 who are in early years' settings, (e.g. nurseries and children's centres), schools, colleges and other training such as apprenticeships, and who have SEND that require additional support.

An EHCP is a statutory plan and replaced the Statement of Special Educational Needs and Learning Difficulties Assessments from September 2014.

An EHCP can only be issued after a CYP has gone through the process of EHC needs assessment. At the end of that process, the LA has to make a decision either to issue an EHCP or not.

If the decision is to issue an EHCP, the LA must first issue a draft EHCP for the parent/young person to consider. Only at this stage will parents/young person be asked to name the type of school/college they want e.g. mainstream or special school and the individual school/ college they want to have named in the EHCP.

As well as the special educational needs and special educational provision of the CYP, the draft EHCP should also detail:

Health care provision that has been assessed as reasonably required; social care provision which is being made for the CYP under the Chronically Sick and Disabled Persons Act 1970 and any other social care provision that has been assessed as reasonably required.

The LA will then finalise the EHCP. The LA will then have the legal duty to 'secure' the educational provision specified in the EHCP, that is, to ensure that the provision is delivered.

If the EHCP specifies social care provision provided under the Chronically Sick and Disabled Persons Act 1970, the LA will have a legal duty to make that social care provision under that Act.

Health plans

An individual health care plan formalises the plan of support for students with health care needs. This includes mental health as well as physical health.

The plan will describe the student's needs and how the school plans to meet these needs during the school day, on excursions and in other variations in school routine, such as sport. The aim should be to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education. This may include adjustments to the curriculum, timetable, learning environment, pastoral support etc.

The plan must also detail procedures to be followed if an emergency arises. Procedures need to be agreed between the parent and the school, following consultation with the

relevant medical practitioner.

Plans should be reviewed annually or when the parent notifies the school that the student's health needs have changed. Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or Children's community nurse, who can best advise on the particular needs of the child.

What is an Integrated Care Board (ICB)?

An ICB is a statutory NHS organisation responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in the Integrated Care System (ICS) area. The establishment of ICBs resulted in clinical commissioning groups (CCGs) being closed down.

What is an Integrated Care System (ICS)?

Integrated care systems (ICSs) are partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area.

Following several years of locally led development, recommendations of NHS England and passage of the Health and Care Act (2022), 42 ICSs were established across England on a statutory basis on 1 July 2022.

What is the purpose of Integrated Care Systems (ICSs)?

The purpose of ICSs is to bring partner organisations together to:

- improve outcomes in population health and healthcare
- tackle inequalities in outcomes, experience and access
- enhance productivity and value for money
- help the NHS support broader social and economic development.

Collaborating as ICSs will help health and care organisations tackle complex challenges, including:

- improving the health of children and young people
- supporting people to stay well and independent
- acting sooner to help those with preventable conditions
- supporting those with long-term conditions or mental health issues
- caring for those with multiple needs as populations age
- getting the best from collective resources so people get care as quickly as possible.

How does this affect how care is provided for pupils at our school?

Norfolk and Waveney (NW) ICB was formed in July 2022 and there may be some variation in how services are provided depending on how services in your area were commissioned prior to this date. It will also depend on which health care provider delivers the service. Please refer to the top of each service description to see the services for your area.

Descriptions of services

All the services are subject to the governance and safeguarding arrangements within NHS organisations and the Norfolk Safeguarding Children Partnership (NSCP).

This document does not include the full range of Child and Adolescent Mental Health Services (CAMHS). These will be available on a dedicated website with a link from the schools and learning providers website. In addition to the services outlined, children will also access GP and other medical services as appropriate to their needs.

To help users access this document services are organised into clinical groups.

Summary of Groups:

- **Healthy Child Programme (HCP)** – this includes a range of universal and targeted services support and intervention for CYP aged 5-19 years
- **Speech and Language Therapy (SaLT)** – this service includes specialist and targeted therapy interventions for children with speech, language and communication needs (SLCN). Please refer to ECCH for details
- **Complex Needs and Condition Specific** – this covers children with predominantly physical disabilities and complex health needs. Children suffering from specific conditions i.e. epilepsy
- **Learning Development and Difficulties** – this covers the health services who provide support to children with conditions such as autism, learning difficulties and attention deficit hyperactivity disorder

Section 2 – description of services

Please note: Thetford Paediatric services

CYP registered to a GP practice in Thetford will be referred to Suffolk based services. Information regarding these services is available to access via the provider website to get up date information on specific services.

<https://www.wsh.nhs.uk/Services-A-Z/Childrens-services/Childrens-community-services/Integrated-community-paediatric-services.aspx>

2.1 Healthy child programme

Provider	Cambridgeshire Community Services
Service	Healthy Child Programme
Area covered	Norfolk

<https://www.cambscommunityservices.nhs.uk/what-we-do/children-young-people-health-services-cambridgeshire/cambridgeshire-0-19-healthy-child-programme>

Available provision	How to request support
<p>Criteria</p> <p>The 0–19 Norfolk HCP provides a countywide service to all CYP of statutory school age and their families/carers through a multi-disciplinary skill mix.</p> <p>Service description</p> <ul style="list-style-type: none"> HCP 5-19: https://www.justonenorfolk.nhs.uk/our-services/5-19 Just One Number: Clinical single point of access to receive advice, support, referral and intervention https://www.justonenorfolk.nhs.uk/our-services/just-one-number-and-parentline 	<p>Referrals can be made by telephone to Just One Number</p> <p>Monday–Friday 8.00am-6.00pm Saturdays 9.00am-1.00pm</p> <p>Telephone</p>

<ul style="list-style-type: none">• Just One Norfolk: Digital platform supported and coproduced by the wider system providing self-care advice and resources to families, carers and professionals https://www.justonenorfolk.nhs.uk• Chat Health and Parentline: Texting service for young people and parents to access advice and support https://www.justonenorfolk.nhs.uk/our-services/chathealth• Specialist led pathways:<ul style="list-style-type: none">○ Emotional health pathway https://www.justonenorfolk.nhs.uk/emotional-health○ Healthy lifestyles pathway https://www.justonenorfolk.nhs.uk/healthylifestyles○ Additional needs pathway https://www.justonenorfolk.nhs.uk/childhood-development-additional-needs/additional-needs○ Teenage parent's pathway• School age screening services: https://www.justonenorfolk.nhs.uk/our-services/school-height-and-weight-checks<ul style="list-style-type: none">○ Vision and hearing screening○ School height and weight checks (NCMP)	0300 300 0123
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2.2 Speech and language therapy

Provider	Cambridgeshire Community Services
Service	Speech and Language Therapy
Area covered	Norfolk and Waveney

<https://www.justonenorfolk.nhs.uk/speech-language/>

Available provision	How to request support
<p>Criteria/service description</p> <p>Provision of the paediatric SaLT service is available for CYP from 0–19 years. The service offers assessment and advice for a wide range of communication difficulties including: stammering, hearing impairment, cleft lip and palate, speech and language difficulties, social communication difficulties (including Autistic Spectrum Disorder (ASD)). The service also offers assessment and advice for children with swallowing difficulties.</p> <p>Support for schools</p> <p>School age children generally will be seen in the school setting. School staff are required to attend school based speech and language therapy appointments to enable the school to implement intervention and strategies as directed. The service works collaboratively with schools to develop shared outcomes providing advice and support for individual children. The service will work with individuals who work with the child and family and where appropriate share agreed joint plans. If required, this will include EHCP planning. All speech, language and communication needs support is provided in line with Norfolk and Waveney’s Balanced System® framework.</p> <p>Training</p> <p>Resources and training is available for schools within the local area, both online via Just One Norfolk and face-to-face. Further training is available for purchase. This includes formal and accredited training such as Elklan and Talkboost.</p>	<p>Advice and support can be accessed via Just One Norfolk where a range of resources and training are available.</p> <p>For more detailed advice, support or information about referrals telephone 0300 300 0123. This number will enable you to get advice from an Assistant Practitioner or Speech and Language Therapist. Every school has a named therapist; if you don’t know who this is, ask your SENCo.</p> <p>Postal address Unit 3 Cringleford Business Centre, Intwood Road, Cringleford, Norwich, Norfolk, NR4 6AU</p>

2.3 Condition specific and complex needs

Provider	Norfolk Community Health and Care Trust
Service	Children's Epilepsy
Area covered	Central Norfolk and West Norfolk (provision for epilepsy in Great Yarmouth and Waveney is provided by the Community Nursing team working from the James Paget University Hospital)

<https://childrens.nchc.nhs.uk/childrens-nursing/epilepsy/>

Available provision	How to request support
<p>Criteria/service description</p> <p>The Children's Epilepsy Nursing Service provides community based support for CYP aged 0–19 years who have been diagnosed with epilepsy. Managing epilepsy enables CYP and their families to lead a life as free as possible from clinical and psychosocial complications. This is achieved through access to the Children's Epilepsy Nursing Service, which has effective links to NNUH, QEHL, Addenbrookes Hospital and other services accessed by the CYP and family. This service follows the recommendations of the National Institute for Health and Excellence (NICE 2012).</p> <p>Incorporating into child's plan</p> <p>There are over 40 different kinds of epileptic seizure. Seizures are all individual to that CYP. NICE recommend that implementing individualised epilepsy care plan is an integral step to preventing an unnecessary admission to hospital for the CYP and their family. School staff will need to have information about the CYP's seizures to be able to manage the CYP's seizures effectively. This information can be obtained from an epilepsy care plan. The Children's Epilepsy Nursing Service will provide a comprehensive holistic epilepsy care plan. This will be set up with the CYP and their family and then integrated into school. The plan contains information about:</p>	<p>Contact the Children's Epilepsy Nurses</p> <p>Telephone 01362 655259</p> <p>Training 01363 655259</p> <p>Paediatric Nurse Advisor (Special schools) 01603 508943</p> <p>Care Plans The nurses will organise these with the families</p>

<p>the CYP's seizures, what they look like, how long the seizure lasts, what constitutes an emergency, first aid information and contact details for parents/carers.</p> <p>Training The care plan will then be implemented into school with Epilepsy Awareness Training. 20% of children with epilepsy will have prolonged seizures (seizures that last longer than 5 minutes) and will require emergency medication (Buccal Midazolam). School staff will need training to be able to use this emergency medication. This training will need to be updated/reviewed every 12 months. The training will be provided either by the two Children's Epilepsy Specialist Nurses that cover both Central and West Norfolk or by an Epilepsy Trainer (in the special schools, this trainer is often the Paediatric Nurse Advisor). The Children's Epilepsy Nursing Service also attend specific epilepsy medicals which are run by the community paediatricians within special schools.</p>	<p>Address Dereham Hospital, Northgate, Dereham, NR19 2EX</p> <p>Fledglings Norwich Community Hospital Norwich NR2 3TU</p> <p>St James Clinic Extons Road Kings Lynn PE30 5NU</p> <p>Admin 01553 668513</p>
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Provider	James Paget University Hospital
Service	Community Nursing (includes diabetes and epilepsy)
Area covered	Great Yarmouth and Waveney

<https://www.jpaget.nhs.uk/departments-services/children-young-peoples-services/childrens-community-nursing-team/>

Available provision	How to request support
<p>Criteria/service description</p> <p>The service is available for any child with a nursing need from 0–19 years. The service is provided from Monday-Friday 0800-1800. The team will see any child/young person with a nursing need registered with a GP within Great Yarmouth and Waveney (GYW). The service</p>	<p>Support can be requested by contacting CCNT directly 01493 453965</p> <p>Alternatively, please use the generic</p>

<p>also provides specialist care and support for Allergy, Diabetes, Infant Complex Health, and Epilepsy. Within the CCNT there is also a team of trained carers who offer children and families with complex needs, who meet the threshold, respite care in the child's own home.</p> <p>Any child who is seen by CCNT and requires a care plan in school will have a school health plan generated. For all other children requiring school health care plans their specialist nurse/team should be contacted in the first instance.</p> <p>Training support for schools</p> <p>Training is available to school staff for any child under the service who require care in school (e.g. children with epilepsy/allergies/diabetes etc.) as required on a child specific basis and can be requested by contacting the CCNT directly.</p>	<p>email address</p> <p>jph-tr.childcommnursingteam@nhs.net</p> <p>The service aims to triage all referrals within 24 hours and will contact families in a timely fashion</p>
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Provider	James Paget University Hospital
Service	Children's Community Continence Service
Area covered	Great Yarmouth and Waveney

Available provision	How to request support
<p>Criteria/service description</p> <p>The Children's Continence Service supports children and young people from 4 – 19 years with bladder and/or bowel problems and/or delayed toiled training, including requests for prescription of medication and onward referral to level 3 (specialist) services if appropriate. Children must be registered with a Great Yarmouth or Waveney GP.</p> <p>Families should initially approach universal services for level 1 support around toileting and</p>	<p>Level 1 initial advice and support on toileting can be accessed via Just One Norfolk.</p> <p>For children requiring further support, referrals related to wetting, soiling, constipation etc must be</p>

continence issues prior to referral for more targeted support. The Children's Community Continence Service is an integrated, nurse-led, community-based continence service. The service aims to support children and young people with managing bladder and / or bowel problems. The service promotes continence where possible, helping children and young people to achieve a good quality of life and avoid unnecessary attendances and admission into hospital.

Nurses will assess the child or young person and work with them and the family to agree a plan of care to best meet their needs. This may include advice and information, toileting, daytime wetting, constipation and/or soiling and night-time wetting support. The service will work with universal services in schools settings if appropriate to ensure a consistent approach to care.

For those CYP where full continence is unlikely to be achieved, the service refers to East Coast Community Healthcare Continence Products Service for children and young people with SEND, to support them in managing their condition to enable them to access the opportunities available to them including supply of containment products (criteria apply).

Training and support for schools

The team can offer training and support to education staff raising awareness of continence difficulties that impact at nursery, school or college ensuring children are supported appropriately.

made to the James Paget's Children's Community Continence Service via the child's GP. Children are received into the service by referral from primary community care staff only after a level 1 continence assessment has been completed and active toileting support initiated for at least 6 weeks. Referrals will then be accepted on receipt of a fully completed Level 2 Children's Community Continence service referral form.

Families will receive a letter to confirm that their referral has been accepted or declined.

Telephone
01493 453965

Provider	Norfolk Community Health and Care Trust
Service	Continence
Area covered	Norfolk (In Great Yarmouth and Waveney a continence service is provided from the Children's Community Nursing team based at James Paget University Hospital)

<https://www.norfolkcommunityhealthandcare.nhs.uk/childrens-continence-service/>

Available provision	How to request support
<p>Criteria/service description</p> <p>The Children's Continence Service supports CYP under 18 (19 if attending a complex needs school) who require level two support in managing wetting and/or soiling problems. Children must be registered with a Norfolk GP – the service is available throughout Norfolk with the exception of the GYW area.</p> <p>The service aims to help CYP achieve continence whenever possible, to support them to achieve a good quality of life and to avoid any unnecessary admissions to hospital. Resolving continence difficulties in CYP can take many months; early diagnosis and appropriate management can support this process. For those CYP where full continence is unlikely to be achieved, the service aims to support them in managing their condition to enable them to access the opportunities available to them. Nurses will assess the CYP and work with them and the family to agree a plan of care to best meet their needs. This may include advice and information, toileting support, daytime wetting support, supply of containment products (criteria apply) and support with constipation and/or soiling and night time wetting support. We will work with the school if appropriate to ensure a consistent approach to care. Families should initially approach universal services for level one support around continence issues prior to referral for more targeted support.</p>	<p>Level 1 initial advice and support on toileting can be accessed via Just One Norfolk.</p> <p>For children requiring further support, referrals to be made through the NCHC Single Point of Referral (details of where to send the referral are included on the form)</p> <p>Support with toilet training can be made directly from education with parental permission. Referrals related to wetting, constipation etc. must be made via the child's GP. Referrals are triaged and aim to offer a 1st appointment within 12 weeks. Families will receive a letter</p>

<p>Training and support for schools</p> <p>The team of Nurses work closely with CYP, their parents/carers and other health and care professionals including those in education and provide the following support for schools:</p> <ul style="list-style-type: none"> • Support around an individual CYP's toileting plan • The Paediatric Nurse Advisor (linked to complex needs schools) often work closely with the Continence team to support continence needs in school. 	<p>to confirm that their referral has been accepted or declined.</p> <p>Telephone 01553 668748</p>
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Provider	Queen Elizabeth Hospital Kings Lynn
Service	Children and Young Person's Diabetes Team
Area covered	West Norfolk (South Lincolnshire and North Cambridgeshire)

<http://www.qehkl.nhs.uk/>

Please note: information regarding these services is currently under review and an updated version will be published in September 2021.

Available provision	How to request support
<p>Criteria/service description</p> <p>The CYP Diabetes Team is a multi-professional team serving the population in West Norfolk, South Lincolnshire and North Cambridgeshire. The CYP Diabetes Team looks after CYP from birth to 18 years of age. Clinics are held at the Roxburgh Children's Centre at the Queen Elizabeth Hospital and the main out-patient's department at North Cambridgeshire (Wisbech). The service is delivered as part of the East of England CYP Diabetes Network.</p> <p>Offer to schools</p> <p>The CYP Diabetes Team offers individual or group training to school staff to ensure CYP with diabetes are supported to continue their education, this includes:</p> <ul style="list-style-type: none"> • Visits to the school or college by a Paediatric Diabetes Nurse to discuss the care of each newly 	<p>Schools can request further support or training by calling 01553 613204</p>

diagnosed child

- Training and assessment of competence of staff by the Paediatric Diabetes Nurse
- Agreement of an individualised school care plan for each child
- Responsibilities of staff for supervising injections and giving injections
- Guidelines on care of children and young people with diabetes while in school or college
- Dietary support/education for staff as required

All children will have a care planning meeting offered when they return to school after being newly diagnosed with diabetes, starting a new school year, a new school or if the child has changed from injections to insulin pump therapy. The meeting will be attended by a Paediatric Diabetes Nurse, the school staff in contact most with the child during the school day, parent/carer and child (if appropriate).

Training

The team provides on-site training for school staff as required both for newly diagnosed children and also updates. In these sessions the key topics covered include; an explanation of type 1 diabetes, insulin injections/insulin pump therapy, blood glucose and ketone testing, and management of unstable glucose levels. Schools are provided with written information booklets. The East of England CYP Diabetes Network has developed a guideline – “Diabetes guidelines for schools, colleges & early year’s settings” which is offered to all schools. Staff are also informed of an e- learning package: <https://jdrf.org.uk/school-pack/schools-e-learning-module/>

Provider	Norfolk and Norwich University Hospital
Service	Jenny Lind: Children's Diabetes Team
Area	Central Norfolk

www.nnuh.nhs.uk/our-services/our-hospitals/jennyind/info-for-parents-and-children/history-of-the-jenny-lind/

Available provision	How to request support
<p>Criteria/service description</p> <p>The Jenny Lind children's department CYP's Diabetes Multidisciplinary Team (MDT) is a multi-professional group, supporting 0–19 year olds and serving the population in Norwich and surrounding rural areas. Psychological provision is received via the Trust Psychologist and The Bethel Child and Family Centre Norwich. The CYP diabetes clinics are held at the Jenny Lind children's outpatient area and in two outreach sites including the Roundwell Medical Centre and Cromer Hospital. The 14 plus transition clinic is held in the Elsie Bertram Diabetes centre. The service is delivered as part of the East of England Regional Diabetes CYP Network.</p> <p>Support to schools</p> <p>The MDT has arrangements to ensure CYP with diabetes are supported to continue their education, covering the following areas:</p> <ul style="list-style-type: none"> • Arrangements for liaison with schools and colleges • Facilitating a school care plan for each child • Visits to the school or college by a paediatric diabetes nurse to discuss the care of each newly diagnosed child • Input into EHCP applications/and or revisions • Input into arrangements for transition into high school • Storage of medicines while in school or college • Responsibilities of school and college staff for supervising injections and giving injections/ insulin pump use/ carbohydrate counting for insulin doses/ use of flash or CGM sensors • Care planning for any extracurricular activities/ after school clubs/ school trip arrangements 	<p>Referrals can be made into the pathway by parents, health professionals or schools, using the following contact details:</p> <p>Email pdsn@nnuh.nhs.uk</p> <p>Telephone 01603 287065</p>

- Training and assessment of competence of school and college staff by the CYP's diabetes team (including school trips)
- Guidelines on care of CYP with diabetes while in school or college
- Guidelines on management of diabetic emergencies

Each child will have an individualised care plan agreed with parents. All primary school aged children will have a care planning meeting offered when they return to school after a new diagnosis of type 1 diabetes, start a new school year, a new school or if the child has changed from MDI therapy to insulin pump therapy

The meeting will be attended by a member of the MDT and their school teachers, preferably those in contact the most with the child during the school day. CYP starting secondary school may also require this level of support depending on the individual child. This is discussed with the young person, their family and the professionals involved.

Training

The MDT provides group education sessions for school staff 6–12 times per year. This may be face to face or virtually. In these sessions the key topics include explanation of type 1 diabetes, insulin injections, blood glucose and ketone testing and management of unstable glucose levels, emergency situations.

Primary aged school children or children who cannot manage tasks independently will require trained staff to be responsible for this, the PDSN team lead on this training. This can require multiple school visits to manage staff changes, as trained school staff are not guaranteed to follow the children through their progression through the school year groups.

Multiple school visits can be required at other times, for mediation purposes, following up any incident reported within the school, or in areas of social deprivation.

A representative from the school is expected to attend the session once a year. Schools are provided with written information. The diabetes network has also developed a school education support package which is

offered to all schools and the service provides access to educational podcasts for school staff to learn about diabetes.	
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Provider	Norfolk Community Health and Care Trust
Service	Key worker Support Service
Area covered	Norfolk

<https://childrens.nchc.nhs.uk/key-worker-service/>

Available provision	How to request support
<p>Criteria/service description</p> <p>The NCHC Key Worker Support service can provide support to keyworkers working with disabled CYP (and their families) who are registered with a GP within Norfolk and who are aged up to 19 years. They must either have complex health needs; these CYP have severe health conditions requiring ongoing health intervention and need support to carry out activities of daily living and/or have a high level of need; these CYP have a severe learning and/or physical disability and need support to carry out activities of daily living and already see at least three specialist health or care professionals from at least two different agencies (organisations); these professionals may include e.g. a therapist, social worker, portage home visitor or complex needs school teacher from organisations such as Norfolk County Council Children's Services (Education or Social Care), NHS children's services, housing services or voluntary agencies.</p> <p>The Key Working Support Team will identify and support named, non-designated key workers to work in partnership, giving information and signposting to services, coordinating practitioners and services around the child, being a single point of contact, and supporting joint planning and assessment processes such as contributing to EHCPs.</p>	<p>To request support from the service, complete a Single Point of Referral (SPOR) form and return to:</p> <p>Norwich Community Hospital Bowthorpe Road Norwich NR2 3TU</p> <p>Parents/carers can also refer their own child by contacting the key worker service coordinator</p>

<p>Plans</p> <p>A family service plan may be agreed at a key worker meeting which is attended by professionals, parents/carers and where appropriate the child/young person. This records the priorities and issues, possible solutions and next steps for the child/young person. An action plan outlines services which are in place and identifies how needs will be met.</p>	<p>Telephone 01603 508968</p> <p>Email clare.draper@nchc.nhs.uk</p>
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Provider	Norfolk Community Health and Care Trust
Service	Occupational Therapy
Area covered	Norfolk

<https://childrens.nchc.nhs.uk/childrens-occupational-therapy/>

Available provision	How to request support
<p>Criteria</p> <p>Children's Occupational Therapists (OTs) undertake assessment of abilities based on observation, discussion with parents/carers and teachers, and standardised assessments for CYP from reception through to 19 years, who are in education, and whose function is impeded by a physical disability or complex health need. Please note that assessment and intervention for children with a co-ordination difficulty (DCD) is for children from 4-8 years of age or in the academic year of transition to high school. 0–19</p> <p>Referral Guidance</p> <p>Our services are open to families who live in Norfolk and are registered with a GP within Norwich, South Norfolk and North Norfolk. Children registered with Thetford GP practices are typically seen by the OT team based in Bury St Edmunds. Children registered with a GP in West Norfolk will only be seen by this OT team if referred with suspected developmental coordination disorder (DCD). Other conditions and difficulties are</p>	<p>Support can be requested via completion of the single point of referral form and sent to:</p> <p>Norwich Community Hospital Bowthorpe Road Norwich NR2 3TU</p> <p>Families may be contacted by a member</p>

addressed by the OT team at the QEHL.

Referrals are only accepted from a medical professional unless the child has previously been known to the OT team, in which case the family may request a review.

Referrals for coordination or fine motor difficulties are only accepted once the child has completed a programme of activities to support their difficulties. See <http://childrens.nchc.nhs.uk/childrens-occupational-therapy/ot-downloads/> for the 'Pre-referral pack'. This pack may be completed prior to a referral to the OT team, in which case, please submit copies of the diary sheets as evidence with the referral from a medical professional. If these sheets are not received with the referral, the family will be asked to complete the programme before they will be offered an appointment.

Please note: Referrals without details of the functional difficulties the child or young person experiences will be returned to the referrer as we need to know the impact of the difficulties to be able to effectively triage the referral. Referrals stating they have 'coordination difficulties' or 'please assess for...' will not be accepted without an explanation of how this affects the CYP's ability to complete everyday activities they could be expected to do.

Service description

The service helps children whose physical disability or complex health needs impact upon their ability to undertake everyday activities, to develop the skills or to employ compensatory techniques to 'enable' them to engage satisfactorily within their potential. The frequency and type of intervention will depend upon the child's needs. The intervention may be a "one-off" appointment or ongoing.

Support for schools

The service uses the following methods to help children and their carers:

- Advice and strategies for parents/carers/school staff to develop functional skills and aspects of personal care including dressing, toileting, feeding and fine motor skills (but not if the problem is solely handwriting) e.g. advice regarding posture for feeding/mealtimes at school and also for access to the

of the triage panel to more fully understand the needs of the child/family, and the potential benefits/limitations of the service that can be offered

curriculum – such as position in classroom, how long a child spends in a chair, changes of position during the day, appropriate work stations. The service also provides advice at transition about physical access in schools/ possible adaptations to meet a child's need.

- Assessment of specialist equipment to minimise the effects of disability, and to allow access to the curriculum e.g. specialist seating for postural needs, specialist toileting equipment, specialist IT equipment such as switches, mounts for communication aids/computers or iPads – the service links with the Access Through technology team for this with some children (this equipment is provided via NCC not the NHS).
- Please refer to school training programmes for relevant courses

Resources

OT digital library is available for education staff and other professionals via Just One Norfolk (www.justonenorfolk.nhs.uk) access to the library requires registration and login via a professional account (www.justonenorfolk.nhs.uk/register/), please ensure that you use your professional/workplace email to register for the account.

Provider	Queen Elizabeth Hospital Kings Lynn
Service	Occupational Therapy
Area covered	West Norfolk

<http://www.qehkl.nhs.uk/RehabServices.asp?s=information&ss=departmental.information&p=rehabilitation.services>

Available provision	How to request support
Criteria The Children's OT Service provides for CYP within West Norfolk from reception through to year 11, who	Children need to be referred by a healthcare

have an assessed clinical need that can be addressed by occupational therapy intervention. Services are also provided for children up to 19 years of age with complex disabilities or those attending complex needs schools. (Please note that manual handling assessments within mainstream schools and services for children with co-ordination problems are provided by OT services from NCHC).

Service description

The Children's OT service provides specialist assessment and intervention to CYP whose physical disability or complex health needs impact upon their ability to complete everyday activities and personal care (e.g. dressing, cutlery skills etc.) or to employ compensatory techniques in order to enable them to reach their functional goals. The frequency and type of intervention will depend upon the child's needs. The intervention may be a "one-off" appointment with advice or ongoing therapy input.

All children receiving OT will have an intervention plan. Intervention can take many forms; direct therapy, consultative input, advice and training to staff and parents. The success of interventions is assessed through a system of outcome measures, which are agreed with family and school at the outset of the episode. The service is delivered in a model outreaching from the QEHL, into the community, mainstream schools and complex needs schools. The team is comprised of specialist qualified children's occupational therapists and is fully integrated with children's physiotherapy (west Norfolk) and includes skilled therapy assistants. The team may see the child at home, in school, or in a clinical setting.

Support for schools

OT's will offer training and up skilling of school staff in strategies/programmes to assist individual children to achieve their therapy outcomes. They can advise school staff on the correct use of equipment e.g. specialist seating and toileting equipment etc. Where appropriate the OT will provide advice/training to school staff/carers on the following:

- Provide advice and strategies to develop the child's functional skills and aspects of personal care including dressing, toileting and feeding, fine motor skills (but not if the problem is solely handwriting). For example, the service provides advice regarding posture for feeding/mealtimes at

practitioner (e.g. Paediatrician/ GP etc.) to the following address:

Paediatric Occupational Therapy, The Queen Elizabeth Hospital, Gayton Road, Kings Lynn, Norfolk PE30 4ET

Telephone
01553 613547

school and also for access to the curriculum – such as position in classroom, how long a child spends in a chair, changes of position during the day, appropriate work stations. The service also provides advice at transition about physical access in schools and possible adaptations to meet a child's need.

- Provide assessment of specialist equipment to minimise the effects of disability, and allow access to the curriculum e.g. specialist seating for postural needs, specialist toileting equipment. The service can also link with SALT and Access Through Technology (ATT) to look at specialist information technology (IT) equipment such as switches, mounts for communication aids etc.

The OT will also contribute to EHCP and annual reviews as necessary. Some bespoke training packages may be purchased as required.

Resources

OT digital library is available for education staff and other professionals via Just One Norfolk (www.justonenorfolk.nhs.uk) access to the library requires registration and login via a professional account (www.justonenorfolk.nhs.uk/register/), please ensure that you use your professional/workplace email to register for the account.

Provider	James Paget University Hospital (Newberry Clinic)
Service	Paediatric Therapy (Physiotherapy and Occupational Therapy)
Area covered	Great Yarmouth and Waveney

[https://www.jpaget.nhs.uk/departments-services/children-young-peoples-services/newberry-clinic-\(community-paediatrics\)/childrens-therapy/](https://www.jpaget.nhs.uk/departments-services/children-young-peoples-services/newberry-clinic-(community-paediatrics)/childrens-therapy/)

Available provision	How to request support
Criteria The service is offered to children 0-12 years of age who have musculoskeletal problems and 0-16 years	Referrals can be made via the e-referral

for conditions affecting their motor development or physical well-being. Assessment and treatment is from registered therapists specialising in Paediatric physiotherapy and OT. There is also a continued service to 19 years for young people in special schools. Young people over 12 years are supported by East Coast Community Healthcare.

Service description/school support

The Therapists will identify the required intervention and deliver programmes of care according to individual needs. This may include group or individual work. Therapists will work with families, schools and other relevant practitioners to ensure consistency of care and that therapeutic intervention becomes part of the CYP's activities of daily living.

Therapy is offered to children and young people with a range of conditions which may include:

- Neonatal congenital conditions
- Pre-term infants
- Orthopaedic/musculoskeletal conditions
- Respiratory conditions
- Rheumatic conditions
- Oncology conditions
- Neuro-developmental disorders
- Cerebral palsy
- Muscular dystrophy
- Developmental delay
- Developmental co-ordination difficulties
- Children who have sensory difficulties

The service is based at the Newberry Child Developmental Centre. Some appointments are also held at nursery, school or, if appropriate, at home. A service is offered to the neonatal unit and Children's ward at the James Paget Hospital. There are therapists allocated to John Grant special school, Caister and

service from a health professional (e.g. consultant, GP or health visitor) or by letter to:

Paediatric Therapies,
Newberry Child
Development Centre,
Lowestoft Road,
Gorleston, NR31 6SQ

<p>Warren special School, Lowestoft</p> <p>Resources</p> <p>OT digital library is available for education staff and other professionals via Just One Norfolk (www.justonenorfolk.nhs.uk) access to the library requires registration and login via a professional account (www.justonenorfolk.nhs.uk/register/), please ensure that you use your professional/workplace email to register for the account.</p>	
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Provider	Norfolk Community Health and Care Trust
Service	Children's Community Nursing Service
Area covered	Central Norfolk

<https://childrens.nchc.nhs.uk/childrens-nursing/>

Available provision	How to request support
<p>Criteria</p> <p>The CCNT service offers care, advice and support for CYP assessed as having a disability, long term, life-limiting, life-threatening/complex health condition that requires a nursing intervention. The service also provides short term specialist paediatric nursing in community settings following injury or inpatient care and</p>	<p>In areas 1, 2 and 3 initial referrals to the pathway are accepted from</p>

is available to children from birth to 18 years of age (19 years if attending a complex needs school) and their families. The service operates during weekdays and offers an on-call service at weekends. The on-call service is available to children registered on a CCNT caseload.

Service description

The CCNT service is a resource for and works alongside the NCHC paediatric nurse advisors. CYP can be seen in a variety of settings, including home, short breaks or social care settings, complex needs and mainstream schools. The service provides holistic child centred/family centred assessments of need and clinical interventions. This provision is led by qualified paediatric nurses.

Aims

The CCNT Service aims to support families'/care givers in the care of their CYP where a defined nursing intervention is identified by encouraging confidence, competence, independence and empowering parent's/carers CYP to manage their own health care needs. This is achieved through:

- Providing nursing care closer to home and minimising hospital attendance
- Assessment of individual health care needs of the CYP, the planning, implementing and evaluation of care.
- Providing teaching/training and ongoing support to families'/care givers for specific clinical interventions and techniques.
- Prevention, identification and management of safeguarding concerns including involvement in a child's/young person protection plan
- Collaborative provision of end of life (EoL) care
- Contributing to relevant child focused multi-agency
- Meetings

Interventions

Children's Community Nurses will support parents, CYP and school staff where a specific nursing intervention is required that is outside the scope of the Paediatric Nurse Advisors (PNA), and that impacts upon the ability of the child/young person to access education. Depending on the identified health need the

parents, schools and health professionals.

Referrals to the Community Children's Nursing Team (CCN) are accepted from health professionals in area 4

CCN will:

- Provide specialist nursing interventions
- Provide training to school staff in respect of delegated procedures/interventions above the scope of the paediatric nurse advisors. This will include urinary catheterisation and Mitrofonoff insertion and management, and the management of oxygen; and in collaboration with other service provider's tracheostomy suctioning and management and ventilation
- Training provided by the CCNT will be child specific, and to a small number of identified school staff to ensure the child/young person's dignity is maintained and that delegated staff maintain their skills. Annual updates on such procedures will be provided upon request
- Be available to provide school staff working within mainstream schools with telephone advice as needed
- Be a resource for school staff where needed
- Support school staff with the completion of specific health care plans.
- Signpost parents and school staff to the appropriate professional/service who can give support in managing the identified need
- Train school staff to enable them to complete school health plans in conjunction with the child/young person's family/care giver where appropriate.
- To attend where it is appropriate to do so children/young person's annual review, child in need/child protection, key worker meetings

Provider	Queen Elizabeth Hospital Kings Lynn
Service	Queen Elizabeth Childrens Community Nursing Team
Area covered	Kings Lynn & West Norfolk (service also supports out of area children under care of consultant)

Available provision	How to request support
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Criteria

The service supports children up to the age of 16 years. Some young people will continue to be supported until the age of 19, according to their needs and/or conditions. Please refer directly to the provider website for more detail.

Service description

CYP will be supported at home or at school with clinical assessment and interventions. The service is staffed by qualified Childrens Nurses supported by senior healthcare assistants and a team of clinical nurse specialists. This includes an Advance Nurse Practitioner (ANP) who is a prescriber.

The service cares for a mixture of children with medical and surgical needs. The unit also provides a district children's community cardiology service, specialised renal services, paediatric neurology, paediatric diabetes service, oncology, rheumatology and dermatology and allergy clinic.

The CCNT Service aims to support families'/care givers in the care of their child/young person where a defined nursing intervention is identified by encouraging confidence, competence, independence and empowering parent's/carers children and young people to manage their own health care needs. This is achieved through:

- Providing nursing home closer to home and reducing hospital attendances
- Teaching and supporting families and care givers for specific interventions required
- Assessing the child or young person at home
- Obtaining any samples required and action on results
- Collaborative provision of end of life care, including with non-NHS providers
- Working within safeguarding plans and guidelines

Training/support offered to schools

Training and support in schools is available, with administration of medication, both routine and emergency. This includes training for gastrostomy and NG feeding. We also provide school health plans.

Referrals can be made secondary care. Children supported will have an identified consultant lead.

Based at;

The Queen Elizabeth Hospital, Gayton Road, Kings Lynn, Norfolk PE30 4ET

Telephone

01553 613214

Provider	James Paget University Hospital
Service	Community Paediatrics (Newberry Clinic)
Area covered	Great Yarmouth and Waveney area

[https://www.jpaget.nhs.uk/departments-services/children-young-peoples-services/newberry-clinic-\(community-paediatrics\)/](https://www.jpaget.nhs.uk/departments-services/children-young-peoples-services/newberry-clinic-(community-paediatrics)/)

Available provision	How to request support
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<p>Criteria The service aims to provide high quality, effective, safe and efficient healthcare services for children from infancy to adolescence who are vulnerable due to additional needs, complementing both primary care and acute paediatric services, based at the Newberry Child Development Centre.</p> <p>The type of help the service offers for child and family:</p> <ul style="list-style-type: none"> • Coordination of Great Yarmouth and Waveney assessment group (GYWAG) for neurodevelopmental assessments (both autistic spectrum disorder (ASD) & attention deficit hyperactivity disorder (ADHD)). • Clinic services for children in special schools with learning disabilities and complex needs • Assessment and clinics for children with neuro-disability, including developmental delay, cerebral palsy • ADHD specialist nursing services and neurodevelopmental specialists <p>Training</p> <p>Please see NCC local offer website for training</p>	<p>Referrals can be made by GPs, acute paediatricians, health visitors, school nurses, speech and language therapists, physiotherapists, OTs, CAMHS, educational psychologist and social services (amongst others)</p> <p>Referrals can be made via the e-referral service by GP's or to the following address:</p> <p>Clinic Coordinator, Community Paediatrics, Newberry Child Development Centre, Lowestoft Road, Gorleston NR31 6SQ</p> <p>01493 442322</p>
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Provider	Norfolk Community Health and Care Trust
Service	Paediatric Nurse Advisors for Complex Needs Schools
Area covered	Norfolk

Available provision	How to request support
<p>Service description The Paediatric Nurse Advisors (PNA) provide a key contact for each of the complex health needs schools,</p>	<p>Referrals can be made into the pathway by parents, health</p>

offering advice, support and nursing intervention for children with an identified nursing need. They also act as a key resource to school staff and other health care professionals working with the CYP.

Support to schools

The service provides set training days, which include set topics that don't fall under the remit of the school nursing team such as child focused gastrostomy care and feeding, feeding via a jejunostomy device, Buccal Midazolam administration, medicines management and epilepsy, to staff identified by the schools, this includes updates on delegated duties. One date per term will be offered for planned generic. The service also provides specific support as follows:

- Child specific training for gastrostomy/jejunostomy/Nasogastric feeding, and Enteral administration of medications.
- Advice to school staff and parents surrounding continence including promoting continence and positive toileting along with undertaking continence assessments
- Where there is an identified nursing need to assist with clinics run within the school environment such as the dietetic clinic
- The paediatric nurse advisors support children with complex health needs, who have an identified nursing need, within the school setting on an individual assessment basis
- Weighing children on request of a health care professional
- Assisting school staff in the writing of health-based care plans for children in complex needs schools in conjunction with the child's family/care givers
- Where paediatric nurse advisors are actively involved in the care of a child the PNA may attend annual school reviews, Key worker meetings, Consultant appointments and child in need/child protection meetings such as core groups and child protection conferences as required

PNAs will offer to CYP, their parents and school staff clinics held within the school, the frequency of these will be determined by both the school and the PNA on a termly basis

professionals or schools

Provider	Norfolk and Norwich University Hospital
Service	Children's physiotherapy
Area covered	Central Norfolk

<https://www.nnuh.nhs.uk/our-services/our-hospitals/jenny lind/who-we-are-and-what-we-do/physiotherapy/>

Available provision	How to request support
<p>Criteria/ service description</p> <p>The service is available for all children from birth through to end of Year 11 within north Norfolk, Norwich and South Norfolk who have an assessed clinical need that can be addressed by physiotherapy intervention. Services are also provided for young people up to 19 years' old who have complex disabilities or attend complex needs schools.</p> <p>The service provides specialist assessment and intervention to CYP who have a range of physical difficulties, which limit their mobility, functional abilities and independence. This may include children with musculo- skeletal, respiratory, neuro-disability and neuro-muscular conditions. The aim is to help CYP people maximise their physical and movement potential, to achieve improved quality of life, independence and to enable access to the curriculum.</p> <p>The service is delivered in a model outreaching from the NNUH into the community, mainstream and complex needs schools. The team may see the child at home, in school, or in a clinical setting. Physiotherapists are key members of the MDT and are integrated in all pathways.</p> <p>Explanation of the type of help the service offers for child and family</p> <p>The team provides specialist physiotherapy assessment of physical difficulty and intervention, which may take place at home, school or in the clinical setting. The provision of a physical management program as necessary which may include a written programme /advise on 24-hour postural care/advise on equipment and splints/stretching programs/Aquatic therapy etc. to support the child's comfort and outcomes.</p>	<p>Referrals can be made by a healthcare practitioner (e.g. consultant, GP etc.) and sent to the following address:</p> <p>East Block Level 2 Physiotherapy & Occupational Outpatient department, Norfolk & Norwich University Hospitals, Colney Lane, Norwich NR4 7UY</p> <p>Telephone 01603 286333</p>

Physiotherapists contribute to EHCP and annual reviews and Individual Education Plans (I.E.P) as necessary. They provide direct 1:1 or group intervention and physiotherapy treatment as appropriate. This may be in the form of acute or more frequent intervention following a change in physical status, for example following orthopaedic surgery.

Support to schools/Training

Physiotherapists will offer individual or group training, and up skilling of school staff in strategies and delivery of bespoke exercise programmes to assist individual children to achieve their therapy outcomes. They can advise school staff on the correct use of equipment e.g. walking frames, standing frames and application of medical appliances such as orthotic splints and lycra garments where appropriate. The service offers the following training courses:

- **Supporting children with cerebral palsy in school**

Two-day course for teachers and support staff in mainstream schools in Norfolk, run once a year in the Autumn term. The course aims to help participants understand the needs of children with cerebral palsy, and to develop strategies to meet their needs in school. Day one covers the different ways that cerebral palsy affects children's development, and what support is available from health and education professionals to help schools to maximise the child's access to all aspects of school life. Day two involves various practical workshops, where participants will have the opportunity to see and try out a range of equipment, and to discuss in more detail the individual needs of schools

- **Body shape**

This course is offered to young people, their parents and carers, as well as schools, nurseries, care settings, and health professionals. The course runs over two separate workshop-style sessions, aiming to raise awareness about the importance of 24-hour postural care, and how to provide comfortable, symmetrical support for children and young people who have difficulties with controlling posture and movement. Postural Care protects a child's growing body, helping them to stand, sit and lie, in the best possible position throughout the day, whether asleep or awake, in order to participate

<p>in a range of activities at nursery, school, home and in the community.</p> <ul style="list-style-type: none"> • Parent workshops <p>Due to COVID19, the service is reviewing the training offer for parents. Please liaise with the department directly for more information</p>	
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Provider	Queen Elizabeth Hospital King's Lynn
Service	Children's Physiotherapy
Area covered	West Norfolk

<http://www.qehkl.nhs.uk/RehabServices.asp?s=information&ss=departmental.information&p=rehabilitation.services>

Available provision	How to request support
<p>Criteria</p> <p>The children's physiotherapy service provides support for CYP within West Norfolk from reception through to year 11, who have an assessed clinical need that can be addressed by physiotherapy intervention. Services are also provided for children up to 19 years of age with complex disabilities or for those attending complex needs schools.</p> <p>Service description</p> <p>The children's physiotherapy service provides specialist assessment and intervention to CYP who have a range of physical difficulties, which limit their mobility, functional abilities and independence. The therapists aim to help children and young people maximise their physical and movement potential to achieve improved quality of life, independence and to enable access to the curriculum. All children receiving physiotherapy will have an intervention plan. Intervention can take many forms; direct therapy, consultative input, advice and training to staff and parents. The success of interventions is assessed through a system of outcome measures, which are agreed with family and school at the outset of the episode. The service is delivered in a model outreaching from QEHL, into the community, mainstream</p>	<p>The child must be referred by a healthcare practitioner (e.g. paediatrician, GP etc.). Referrals can be sent to:</p> <p>Paediatric Physiotherapy The Queen Elizabeth Hospital, Gayton Road, Kings Lynn Norfolk, PE30 4ET</p> <p>Telephone 01553 613361</p>

schools and complex needs schools (therapists may see the child at home, in school or in a clinical setting). The team is comprised of specialist qualified children's physiotherapists and is fully integrated with children's occupational therapy (West Norfolk) and includes skilled therapy assistants.

Support for school staff

Physiotherapists offer training and up skilling of school staff in strategies /programmes to assist individual children to achieve their therapy outcomes. They can also advise school staff on the correct use of equipment (e.g. walking frames, standing frames and application of splints etc.). Individual bespoke training may also be purchased as required.

- Specialist physiotherapy assessment of physical difficulty, which may take place at home, school or in the clinical setting.
- The provision of a physical management programme as necessary. This may include a written physical management programme/advise on 24-hour postural care
- Advice on equipment and splints/stretching programmes etc. to support the child's comfort and outcomes
- Aquatic therapy
- Training individual members of school staff around a child's physical management program, use of equipment or splinting etc.
- Contributing to EHCP and annual reviews and IEP's as necessary
- To provide direct 1:1 or group intervention and physiotherapy treatment as appropriate
- Provide acute or more frequent intervention following a change in physical status, for example following orthopaedic surgery

2.4 Learning development and difficulties

Provider	Norfolk Community Health and Care Trust
Service	Starfish and LD CAMHS (for children with learning disabilities and significant mental health difficulties)

Area covered	Norfolk and Great Yarmouth area
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<https://childrens.nchc.nhs.uk/starfish/>

Available provision	How to request support
<p>Criteria</p> <p>The service is available for school aged children i.e. 5-18 years of age. The teams provide a community based service to children with a diagnosed learning disability (LD). Referred cases should also have a significant degree of behavioural or mental health (MH) difficulties that are having a significant impact on the child/young person and their family. Co-morbidities may include ASD and ADHD, although these diagnoses must be in addition to a diagnosed LD.</p> <p>Service description</p> <p>The teams consist of Clinical Psychologists, Children’s Learning Disability Nurses, Assistant Psychologists, Family Support Workers, a Communication and Therapy Assistant Practitioner, an Occupational Therapist, a Speech and Language Therapist, a Systemic Family Psychotherapist and a Clinical Coordinator. The teams can also make onward referrals for CYP to be seen by a Consultant Psychiatrist. The majority of the work is undertaken at the child/young person’s home, educational setting or respite resource, with some clinic based work.</p> <p>Interventions offered:</p> <ul style="list-style-type: none"> • Goal based outcome work agreed with child/young person and family • Indirect work or consultation to other professionals/parents/carers • Direct work with parents • Direct 1:1 work with child/young person (if appropriate and clinically indicated) • Direct work with schools, respite provisions and other services if appropriate • Workshops for parents/carers • Behaviour strategy advice and management including ‘positive behaviour support’ • Psychologically informed interventions such as cognitive behaviour therapy, systemic or family 	<p>Completion of Single Point of Referral form (SPOR)</p> <p>Evidence that the child has a learning disability must be supplied otherwise referral will be returned.</p> <p>Referrers may be contacted by a member of the triage panel in order to fully understand the needs of the child and family, and potential benefits/limitations of the service that can be offered.</p> <p>The referrer is responsible for gaining parent/carer consent for the referral to proceed. A triage system is then in place in order for the team to gather further</p>

<p>therapy approaches</p> <ul style="list-style-type: none"> • Communication approaches including intensive interaction, talking mats, objects or reference, visual schedules etc. • Occupational therapy input (where this is critical to the Starfish team's formulation around the child/young person's behaviour or mental health) including activities of daily living, sensory needs etc. • Trauma and anxiety work (if appropriate and clinically indicated) <p>Starfish works very closely with Starfish+. Starfish+ is a service for CYP with LD's who are at risk of admission to hospital under the Mental Health Act (MHA) or at risk of being unable to continue to live at home due to the concerns about behaviours of distress and/or mental health difficulties. Starfish+ work with CYP and their families when there is a need for intensive, multi-disciplinary therapeutic intervention from the team. Starfish+ team includes psychology, nursing, SaLT and specialist family support workers.</p>	<p>information from the referrer once consent has been gained.</p>
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Provider	Norfolk Community Health and Care Trust
Service	Neurodevelopmental conditions pathway
Area covered	Norfolk (In Great Yarmouth and Waveney Area this will be provided by Community Paediatrics)

<https://childrens.nchc.nhs.uk/neurodevelopmental-service/asd-diagnostics-pathway/>

Available provision	How to request support
<p>Criteria Available for children from 0-18 years of age.</p> <p>Service description The NDD pathway provides assessment and diagnosis of ASD and other</p>	<p>Referrals are directed in the first instance to community paediatricians via NCHC Single Point of Referral forms.</p>

neurodevelopmental conditions and short-term post diagnosis support for ASD. The team consists of community paediatricians, clinical psychologists, assistant clinical psychologists, specialist speech and language therapists (through ECCH) and specialist nurses. Pre-school panels also have access to a nursery nurse / specialist health visitor. The diagnostic assessments are undertaken at the child/young person's home, educational setting or in clinic. A breakdown of the services offered is provided below:

Assessment Services offered

- Assessment by community paediatrician, clinical psychologist, specialist nurse, speech and language therapist
- Standardised assessments including: Autism Diagnostic Observation Schedule (ADOS), Autism Diagnostic Interview (ADI-R), The Developmental, Dimensional and Diagnostic Interview (3DI) and Coventry Grid Attachment Interview
- School observations
- A multi-disciplinary panel to review all assessments
- Feedback to parents with comprehensive pack of reports and post diagnosis information

Post Diagnosis Services offered

- Post diagnoses follow up (PDFU) session (a 2-hour group session for parents of children newly diagnosed with ASD). These sessions take place once a month
- ASD courses for parents called Puffins (courses last 6 – 11 weeks for 2 ½ - 3 hours each week).

Once assessed by a Paediatrician a School Observation Schedule (SOQ) for schools and a Social Communication Questionnaire (SCQ) for parents / carers will be requested. These will be reviewed by the Paediatrician and passed to the ASD panel if appropriate. The information is reviewed by the Multi-Disciplinary Panel before being accepted for assessment. Following this the referrer and family are contacted via letter.

Questions regarding the ASD panel including post diagnosis support and course bookings can be directed to the ASD Pathway Coordinator (01553 668606).

Section 3 – training and resources

3.1 Training

Please note: This section is subject to review. The next pages detail the training that is available to school staff from health professionals. Some of this training has been commissioned to be part of the core provision (and there is no charge to schools). However, some of the training is not part of the core provision and therefore a school will incur a charge for it.

- **Training available as part of the NHS core offer**

Please contact the organiser directly to further discuss the course content and any further information

- **Training available for schools to commission**

The following training is intended to enhance staff development in meeting pupil's needs but is not commissioned by the NHS as part of the core provision of the service therefore a charge will be incurred. If you are interested in further details about the contents and cost of the training, please contact the service directly

Training available to request from NCH&C OT and NNUH physiotherapy services:

Topic	Target Group	Frequency	Organiser	Location
Cerebral Palsy training day	Learning support assistants / teachers who work with a child with cerebral palsy	Annual 2 days need to be attended	NCHC OT & NNUH Physiotherapy Services with colleagues from education (e.g. ATT)	Central venue in Norfolk
Developmental coordination disorder (dyspraxia) – a practical classroom approach	Teachers and learning support assistants who work with children with co-ordination difficulties	As requested	NCHC Children's OT	To suit

Fine motor skills and handwriting development	Teachers and learning support assistants who work with children with fine motor skills difficulties	As requested	NCHC Children's OT	To suit
Strategies for improving handwriting	Teachers and learning support assistants who work with children with handwriting difficulties	As requested	NCHC Children's OT	To suit
Moving and handling people	Staff working with children who require assistance to change position who attend a non-maintained mainstream school	As requested	NCHC Children's OT	To suit
Disability awareness	All school staff who need to consider issues of inclusion	As requested	NCHC Children's OT	To suit
Strategies to assist children with transfer to high school	Primary and high school staff who work with children with coordination and organisational difficulties	As requested	NCHC Children's OT	To suit

Services available for schools to commission for specific pupils (not included within the core provision)

Topic	Target Group	Frequency	Organiser	Location
Handwriting assessment	Mainstream schools	As required/ requested	Children's OT	School or clinic setting
Handwriting intervention	Mainstream schools	As required/ requested	Children's OT	School or clinic setting
Moving & Handling assessment & planning	Non maintained mainstream schools	As required/ requested	Children's OT	School

Assessment of the school physical environment and recommendations for it to be accessible	Mainstream schools	As required/ requested	Children's OT	School
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3.2 Transition

All young people with long term conditions or requiring ongoing specialist interventions beyond 16 years should be supported with transition to adult pathways. This is not yet embedded across all trusts and the Integrated Care system is actively working to address that. If there are concerns with transition and needs not being met, schools and settings should request that families notify the relevant team supporting that young person.

3.3 References

- Children and Families Act, 2014
- Supporting Pupils at School with medical conditions, Department of Health, 2014
- The Healthy Child Programme for 5-19 year olds, Department of Health, 2009
- National Service Framework for Children, Young People and Maternity Services, Department of Health, 2004