

SLT AT THE BROOK SCHOOL

DELIVERY METHODS

REVIEW OF THERAPY PROVISION

Previous methods of delivery:

- Removing students individually from class and giving 1:1 therapy in an artificial environment (therapy room)
- Weekly therapist led sessions with the whole class or small groups
- Review

Extensive service review was under taken around the world and this model of working was identified to not deliver the best outcomes for students.

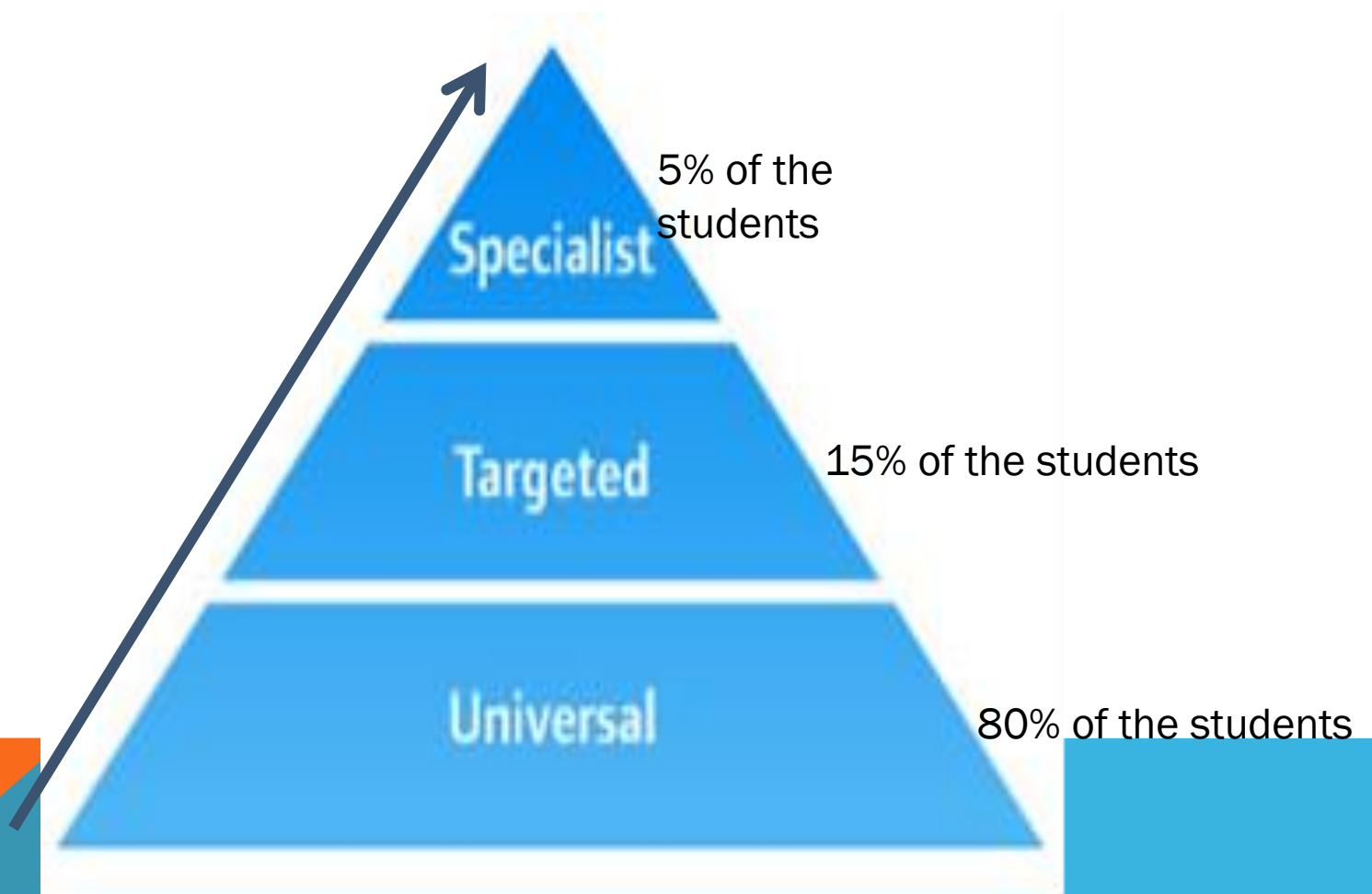
Needs led therapy based on prioritisation and joint working to allow for consistent carry over.

Therapy targets integrated into everyday activities.

The best therapy happens little and often throughout the day delivered by familiar people in the class and home environment.



THERAPY SERVICE PROVISION



******Focused around the child's needs and goals******

SLT BANDINGS AND PROVISION

Specialist - Band A

- Assessment
- 1:1 sessions (AAC device, specific strategy, transition); carry over by class staff
- Targets can be used for IEPs

Targeted - Band B

- Class based blocks of therapy, e.g. attention autism, core vocabulary, shape coding
- Targets from group can be used for IEPs

Universal – Band C

- Not seen directly by SLT
- Introducing and supporting strategies, e.g. visual timetables, core vocabulary word of the week, supporting PODD
- Training

SLT PRIORITISATION CRITERIA

Name	Teacher concern	Significant period	Needs not met	Parent concern	Low functional communication	Discrepancy (learning vs. language or receptive vs. expressive)	SLT concern	
Class								
Child A	0	0	2	0	2	0	2	6 (B)
Child B	2	2	2	2	1	1	1	11 (A)
Child C	0	0	0	2	0	0	0	2 (C)

2 = HIGH concern
1 = SOME/UNCLEAR concern
0 = NO concern

Specialist: Band A
 Score= 10-14

Targeted: Band B
 Score= 5-9

Universal: Band C
 Score= 0-4

SPEECH AND LANGUAGE THERAPISTS ROLE IN SCHOOL

Eating and drinking:

- Assessment and reviews
- Direct and indirect support and advice, reducing risk of swallowing problems and maximising healthy growth

Communication:

- Direct assessment and reviews
- Direct and indirect therapy intervention to support in the areas of: attention and listening skills, understanding of language, expressive communication and social skills. This involves a **total communication approach** of signing, objects, speech, pictures and symbols.
- Modelling strategies for individual students or groups
- Target and goal setting for those at specialist and targeted level with child, families and school

THERAPISTS ROLES: OUTSIDE SCHOOL AND NON CONTACT

Home visits: assessments, equipment, parent/carer training

Hospital visits/ correspondence with medical teams

Meetings: child protection/Medical/MDT

Equipment (standing frame/ walking aids/ orthotics/ sleeping aids/ home seating systems/high tech communication systems) provision and reviews

Report writing, referrals, transfers and transitions

Contribution to EHCP, Annual Review Reports

Liaising with other professions and services

Funding applications

Target setting reviews and other meetings

Indirect liaison with teacher and class team

Indirect liaison with the MDT (OT, PT, SN, DT, Dr)

Joint clinics (with Dietitian, other Therapies)

Training sessions: INSET, twilight sessions, 1:1 with teachers during non-contact time

WHAT IT IS ALL ABOUT

