LOCAL OFFER
Children’s Health Services
# Children’s Health Services

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Children’s Community Nursing Service (CCNS)

Including Kaleidoscope Palliative Care Service and Home Care Support Team

What does this service do?

The Children’s Community Nursing Service (CCNS) is a service for children and young people with high health needs resulting from chronic or complex health conditions. This might include conditions such as chronic lung disease, short gut syndrome, spinal muscular atrophy, severe epilepsy, cancer and leukaemia, and complex and severe disabilities. The service provides nursing support including wound care, home oxygen therapy, oncology, administration of intravenous medications and tube feeding and also undertakes continuing healthcare assessments.

The service works to:

- Prevent admissions to hospital (when appropriate),
- Promote early discharge from hospital,
- Prevent re-attendances at hospital
- Enable children to be cared for within their own environment (school, home etc), through the provision of support, education and care, flexibly provided following nursing assessment.
- Provide symptom management and end of life care for children
- Provide play specialist support for children going through medical treatments, or experiencing a bereavement
- Provide trained care workers to support children to be cared for at home, and to give parents and carers a break

Who is this service available to?

The service is available to children and young people aged 0-18 who have a GP in the tri-borough area.

Children will be able to access and receive a service if they:

- have a long term condition or acute condition that requires community nursing input
- have a life-limiting or life-threatening condition which may require end of life support
- require nursing management of complex disorders and/or nursing interventions
- require support for their family in caring for them at home
- have experienced the bereavement of a sibling

How do you access this service?

This service is a specialist service, which means that it is available to children who have specific and additional health needs and it is only available to children who have been individually referred to the service.

Health, education and social care professionals can refer a child to the service - usually a family GP, a hospital member of staff or social worker will make the referral. There is no wait list for the service. Referrals are usually responded to within 24 hours or immediately after a weekend. 24/7 support is available for children requiring end of life support.
How do we ensure the quality of this service?

The service reports quarterly on its performance and commissioners address any issues at quarterly meetings. This includes feedback from children and their families on their experience and outcomes.

FOR MORE INFORMATION, PLEASE CONTACT:
Children’s Community Nursing Service
Central London Community Healthcare NHS Trust
The Medical Centre, 7E Woodfield Road, London, W9 3XZ
T 020 7266 8840
W www.clch.nhs.uk

Cheyne Child Development Service

What does this service do?

The work of the Cheyne Child Development Service consists of the identification, assessment, investigation and support of children with long term neurodevelopmental disorders and neurodisabilities, working within a multidisciplinary team, liaising with primary and acute health care, networked with a range of tertiary care, and other agencies as appropriate. Many children and young people within this group have complex medical conditions. In addition to their primary neurological condition, many have a variety of secondary associated problems requiring medical management, e.g. gastro-oesophageal reflux, seizures, constipation.

The core team consists of Paediatricians, Clinical Psychology, a Clinical Nurse Specialist, Physiotherapists, Occupational Therapists, Music Therapists and Speech and Language Therapists.

The service aims to ensure that an individual child or young person’s neurodevelopmental needs are established and addressed, that appropriate programmes of intervention are made and that their needs are clearly communicated to families, carers and the multiagency services.

The Cheyne Child Development service is part of the Community Paediatric service based at Chelsea and Westminster Hospital. It provides to a specific geographic area from resource bases at Doughty House Chelsea and Westminster Hospital, at South Westminster Clinic in SW1 and at Parkview Health Centre in W12 and at Jack Tizard special school.

Other services provided by community paediatrics include those for:
- Child public health services
- Audiology

Services for vulnerable children and families including: safeguarding, child protection, ‘looked after’ children, adoption & fostering

Who is this service available to?

The service is available to children and young people aged 0-18 who have a GP in the Hammersmith and Fulham, Kensington and Chelsea or Westminster area.

Children with a wide range of conditions are included within this service area:
- physical disability - e.g. cerebral palsy, muscular dystrophy;
- intellectual disability – learning difficulties (mild, moderate, severe and complex), in relation to investigation of aetiology (the cause or origin of a condition) and support of co-morbidities (other co-existing conditions);
- neurodevelopmental disorders e.g. Attention Deficit Hyperactivity Disorder, Autism Spectrum Disorder, Developmental Coordination Disorder, language and communication disorders.
- impairments of special senses – hearing and vision impairment;
- acquired disorders
How do you access this service?

This service is categorised as a specialist service. Children and young people (CYP) are referred into the service by health service professionals including GPs, health visitors, therapy teams and Paediatric hospital professionals and by multiagency professionals particularly by SENCOs, educational psychology and social workers.

New referrals are considered by the team at a weekly meeting. Multi-disciplinary assessments, single discipline assessments and interventions are arranged as appropriate.

How do we ensure the quality of this service?

The service reports quarterly on its performance and commissioners address any issues at quarterly meetings.

In addition the service carries out regular clinical audits of the service using national standards e.g. the NICE guidelines for individual conditions such as Autism, ADHD, Spasticity and other standards such as the Down Syndrome medical interest group (DSMIG).

FOR MORE INFORMATION, PLEASE CONTACT:
Children’s Services manager
Cheyne Child Development Service
Chelsea and Westminster Hospital
369 Fulham Rd,
London SW10 9NH
Switchboard: 020 3315 8000

You might also be interested in:
Prospectus for CHILDREN’S HEALTH SERVICES
http://www.bacch.org.uk/publications
The Family Friendly Framework
http://www.bacch.org.uk/publications
British Academy for Childhood Disability Guidelines
www.bacdis.org.uk/policy
**Child Development and Neurodisability Service at St Mary’s Hospital**

**What does this service do?**

The Child development and neurodisability Service offer comprehensive multi-disciplinary and multi-agency services for children with neurodisability, communication disorders, and behavioural problems.

Where relevant, the team provides health input for statutory areas of responsibility for education, looked after children, adoption and fostering. The team is also involved in the local implementation of immunisation policy and advice.

The service works in partnership with community and acute service providers and the team includes medical, physiotherapy, occupational therapy, speech and language therapy, clinical psychology and clinical nurse specialists. They also provide a local service for pupils attending Westminster Special Schools.

The team work alongside other agencies on pathways for children and their families with disabilities, in keeping with current national guidance such as ‘national service framework for children’, ‘Every Child Matters’, and NICE guidelines.

Services provided by the team include:
- assessment and management of children with developmental delays
- neurodisability services including spasticity management and botulinum toxin injection clinic to relieve muscle spasms
- social communication disorder clinics (autistic spectrum disorder)
- behavioural disorder clinic including ADHD
- looked after children/adoption
- complex feeding clinic
- statutory medical examinations and reports
- support of local special needs schools
- immunisation advice

**Who is this service available to?**

The Child development and neurodisability Service offer comprehensive multi-disciplinary and multi-agency services for children with neurodisability, communication disorders, and behavioural problems.

**How do you access this service?**

This service is categorised as a specialist service. Children and young people (CYP) are referred into the service by health service professionals including GPs, health visitors, therapy teams and Paediatric hospital professionals and by multiagency professionals particularly by SENCOs, educational psychology and social workers.

**FOR MORE INFORMATION, PLEASE CONTACT:**

The child development service and community child health clinics take place either at St Mary’s Hospital or the Medical Centre on Woodfield Road in Westbourne Park:

Full clinic addresses:
- Children’s Outpatient Department
  6th Floor Queen Elizabeth the Queen Mother Wing
  St Mary’s Hospital
  Praed Street
  London W2 1NY
- Community Child Health
  First floor
  The Medical Centre
  7E Woodfield Road
  London W9 3XZ
Music Therapy for Children and Young People

What does this service do?

Music Therapy uses shared music-making to help children have freedom of communication when verbal language is a challenge, this can be due to social, developmental, communication or emotional difficulties. Music therapy sessions offer a child or young person an experience of shared play, interaction, learning and understanding.

Children are seen initially for assessment to determine how music therapy can support their specific needs.

In treatment sessions the therapist and the child make music together that is shared and spontaneous. The therapist and child establish a musical relationship in which emotions can be expressed, explored and worked through within a safe environment.

Music therapy takes place individually and in groups and consideration of parents/carers needs are a key part of how sessions work. The service provides advice and training to parents and professionals to increase awareness of the benefits of music within child health and education settings, and ways music can be used to support communication in everyday situations.

Music Therapists are part of the multi-disciplinary team and work closely with other child professionals to support the child’s specific needs.

The service is known nationally for its research and development work.

Who is this service available to?

This service is available to children who live with the boroughs of Hammersmith and Fulham, Westminster or Kensington & Chelsea and are aged between 0 – 18.

The service is offered to:

Children who are known to the child development services and present with:

- Autism/social interaction difficulties
- Mild, moderate or severe learning difficulties/disability
- Physical disabilities
- Speech and language difficulties
- Autism/social interaction difficulties
- Profound and Multiple Learning Disability/Complex needs

The waiting time to assessment is 4 weeks and to intervention approximately 4-5 months.

How do you access this service?

Music therapy service in Child Development Centres – is categorised as a specialist service which means it is only available to children who have been individually referred to the service. Direct referrals are accepted from a range of professionals including GPs and Consultants; Therapists; Health visitors; Social workers; educational psychologist or SENCO; or through the child development service.

Children are eligible if they live in Westminster, Kensington and Chelsea or Hammersmith and Fulham or have a GP in these boroughs, and are known to the child development service.

Music therapists offer group and individual therapy programmes and are based at child development centres – at Parkview Centre for Health and Wellbeing (White City), Chelsea and Westminster Hospital and Woodfield Road Health Centre.

Early Intervention Music Therapy in Children’s Centres - is categorised as a targeted service for children within children’s centres who have specific additional needs.
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Children are eligible if they live in North Westminster or Kensington and Chelsea.

Parents can request advice and support and assessment in all early year’s settings (children’s centres, nurseries etc) and Early years practitioners can make referrals to the music therapy service if they feel a child has needs requiring support, (communication, emotional, physical)

This service is group based and includes joint work with speech and language therapists, early years practitioners and other professionals. It targets the needs of young children and babies and their parents, and aims to support bonding, communication skills, parenting.

How do we ensure the quality of this service?

The service is commissioned to deliver music therapy that conforms with national standards including those from the National Institute of Clinical and Health Excellence (NICE).

The service reports on performance through submission of a quarterly report and through discussion at quarterly meetings with commissioners.

The service and any service issues (such as capacity, any emerging areas of need or specific trends) are also discussed at a tri-borough commissioning group.

All Music Therapists who work in the service are registered with the Health and Care Professions Council (HCPC).

FOR MORE INFORMATION, PLEASE CONTACT:
Music Therapy
Chelsea and Westminster Hospital
369 Fulham Rd, SW10 9NH
T 020 3315 6472
Stephen Sandford, Clinical Lead Music therapist
Deryn Watts, Paediatric Therapy Lead

Children and Young People’s Occupational Therapy

What does this service do?

Children and Young People’s Occupational Therapy (CYPOT) is a service responsible for the health care needs of children and young people.

The service aims to assist children and young people to achieve their own potential to function effectively doing everyday tasks (activities of everyday living), in their home, school and leisure/playtime.

OT’s consider the developmental, physical, social, psychological, sensory and emotional aspects of home and school impacting upon how children carry out their activities of daily living.

CYPOT works closely with parents, carers and education services to support children in the places they need to carry out activities e.g. home, school/nursery, play spaces. This may involve coming into 1-1 or group sessions in clinic with parents involved, or receiving support from parents or education staff trained or supported by CYPOT, to provide this at home or in their education setting.

CYPOT works with parents, carers and educators to set goals and be empowered to support their children to achieve these. Goals may be achieved for example, through adaptation of the environment, regular practice, use of adaptive equipment, retraining, following a developmental pathway to support achievement for children with short and long term conditions.

Who is this service available to?

CYPOT is available to children aged 0-18 in mainstream school with a GP within the triborough or as seen under an external contract. Children may also be seen as part of the Cheyne Child Development Service.
For children in HF, south KC and south Westminster, CYPOT focuses on difficulties that children are experiencing with everyday tasks (activities of everyday living) within their home, school and leisure. For example:

- Positioning for posture to support access to everyday activities and play
- Reaching all body parts for bathing or play
- Difficulty with independence in toothbrushing, personal care, toileting, dressing
- Managing fastenings for dressing
- Personal organisation and managing transitions between activities
- Writing
- Use of tools for school activities e.g. scissors / ruler
- Use of utensils for meal times
- Access to play/ leisure resources

Any child that is experiencing difficulty with the above or other identified functional, everyday tasks which may be as a result of:

- Neurological impairment e.g. cerebral palsy
- Progressive conditions e.g. muscular dystrophy
- Musculoskeletal /orthopaedic issues e.g. juvenile idiopathic arthritis and benign joint hyper mobility syndrome
- Genetic Disorders e.g. downs syndrome
- Idiopathic Conditions e.g. JIA
- Sensory processing issues (touch, sensation, regulation of sensory behaviours e.g. fidgeting, over/under responsiveness)
- Pervasive Developmental Disorders e.g. Autistic Spectrum, Attention Deficit Disorder, aspergers.
- Co-ordination disorders

Imperial College Healthcare provide a service to the Child Development Service (CDS) in north Kensington and Chelsea and north Westminster.

In north Westminster, CYPOT provides a service to children attending mainstream schools who are experiencing difficulties with everyday activities. These children will have a GP within the Hammersmith and Fulham, Kensington and Chelsea or Westminster, or be seen through external contract. These children may or may not be known to the CDS paediatricians.

How do you access this service?

This service is categorised as a specialist service, which means that it is only available to children who have been individually referred to the service. Referrals in the first instance should be made by a professional involved with your child. They can refer by completing a CYPOT referral form forwarded to Children & Young People’s Occupational Therapy, Referrals, Room 2.10, Parsons Green Walk In Centre, 5-7 Parsons Green, London, SW6 4UL, or email: Referrals.Cypot@clch.nhs.uk

We can also be contacted to discuss referrals on 020 3311 6836.

If your child has been seen and discharged from CYPOT, they can be re-referred after a 3 month consolidation period, if you have new goals or your child has not reached the goals set.

We can also discuss your child’s goals in relation to their condition as well as their potential.

How do we ensure the quality of this service?

The service is commissioned (contracted and funded) to deliver CYPOT with all staff registered with the HCPC.

The service reports to funders on performance through submission of a quarterly report and through discussion at quarterly meetings.

The service and any service issues (such as capacity, any emerging areas of need or specific trends) are also discussed.

All children assessed will be provided with a report and advice. They should have up to 3 goals which should be discussed to be the most practical for the child’s current difficulties in up to 3 specific areas.

Occupational Therapy is provided to support children’s ability to carry out their everyday activities as independently as possible in line with their own ability and any medical condition.

It is essential for parents, carers and education to understand how to support the child and enable
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them to achieve. CYPOT provide training and support to enable this as standalone sessions as well as with other professional groups.

FOR MORE INFORMATION, PLEASE CONTACT:
Team Lead Sheena Lorusso
T 020 8 846 7836
Sally Ledgister Team Administrator
T 0203 311 1641

Paediatric
Occupational Therapy (OT): Imperial College Healthcare NHS Trust

What does this service do?
The Occupational Therapy (OT) Service based at ICHNT provides occupational therapy for children and young people in hospital wards, outpatient clinics and in local community settings such as nursery/ school and homes.

Children’s occupational therapists provide specialist advice, assessment, treatment and management for children who demonstrate difficulties with everyday activities such as:
- Self-care (e.g. eating, dressing, bathing, toileting and grooming)
- Productivity (e.g. pre-school/ school skills such as writing and drawing)
- Play and leisure skills (e.g. games, sport and social skills)

This may be due to a short term condition, such as fractures, or may be due to a long-term illness or disability such as cerebral palsy.

The OT works with parents & carers, and nursery/ school to develop maximum participation and abilities in everyday activities for the child. This may be through provision of general advice and strategies, individual advice and programmes, or providing treatment in groups and/ or individually. The OT may address areas of fine and gross motor abilities, visual perception, attention, motivation, personal care, play development and/or sensory skills. Intervention may also include recommendations regarding the environment, posture and positioning, specialised equipment and upper limb management and splinting.

The OT service is an integrated acute and community team, providing services to acute inpatients and neonatology, and to designated community services (Child Development Service and Early years, RBKC Mainstream Schools, and Westminster Special Schools). This facilitates transitions between acute and community services and between preschool and schools services.

Who is this service available to?
The service is available to infants, children and young people:
- age 0 – 5 years – Child Development Service and Early years
- age 6 – 19 years – Westminster Special Schools, RBKC mainstream Schools, and some Child Development Service (see below)

Occupational Therapy is available for a wide range of conditions which affect a child’s ability to participate in everyday activities. This may include:
- delays in development
- neurological conditions such as cerebral palsy
- Other long term conditions such as autism
- Coordination difficulties
- Sensory processing difficulties

The service based at ICHT is delivered in the following teams:

Child Development Occupational Therapy Services are provided for children with more complex health needs who are resident in north Westminster or in north RBKC. This may include children with neurodisability such as cerebral palsy, learning difficulties, or social communication disorders such as autism. It is part of the broader Child Development Service, multi-disciplinary team, with the focus of the OT service being for children aged 0 to 5 years. In addition to Westminster Special Schools, the
service for children aged 6 – 19 years assists transitions from nursery into primary school & between acute and community services, and sees children when specific specialist advice is requested for example upper limb function and splinting.

Early Years Occupational Therapy services for children aged 0 – 5 years, are provided in north RBKC and north Westminster for children who have less complex needs such as a delay in one area of development e.g. fine motor skills affecting writing, or delay in development of self-care skills such as dressing.

RBKC Mainstream Schools (north) occupational therapy service sees children in school with a range of difficulties affecting their ability to participate in and access school activities. This could be due to delayed fine motor skills affecting handwriting, coordination difficulties, or more long term disabilities. After initial assessment the OT may provide general strategies, a specific programme, and/ or group or individual treatment, and will work with the school to implement OT strategies and recommendations into daily routines.

Children’s Inpatient Occupational Therapy Service provides services to the following areas:
- The children’s wards at St Mary’s Hospital (including Paediatric Intensive Care Unit)
- The neonatal units at both Queen Charlotte’s and Chelsea Hospital and St Mary’s Hospital

How do you access this service?

Occupational Therapy is a referral based service which means that it is only available to children who have been individually referred to the service.

In the boroughs of RBKC and Westminster, Children’s Occupational Therapy services are provided by health, education and social care, and provision currently varies between and within boroughs. The referral process and eligibility for specific services will depend on where the child and family are resident, where the child goes to nursery or school, and where their GP is located.

ICH  T Paediatric Occupational Therapy services can be accessed as follows:

Child Development Service and Early Years Westminster – referrals need to be made to the multi-disciplinary Child Development Service. If a child is known to the Child Development Service or attends special schools in Westminster, then occupational therapy can be accessed as part of the child’s health care plan.

Early years RBKC (North) – referrals from Early years staff are made directly to Paediatric OT, St Mary’s

RBKC (north) schools – referrals can be made by the school SENCO to the SEN Team, RBKC Town Hall.

Once a referral has been accepted, it is prioritised according to clinical need. Parents will be contacted, and an appointment arranged. Waiting times vary for community services but most children are seen within one term (13 weeks).

During an occupational therapy appointment, the Occupational Therapist will talk about general development, daily routines, and any difficulties the child may have in doing everyday activities (such as play, self-help tasks, table top activities, school work) and what are the main goals for Occupational Therapy intervention. They will also talk about the layout of both the home and school/ nursery, and any strategies which have been used to help e.g. any equipment.

There may be a more formal assessment – which may include observations of play, table top activities, self-care activities such as dressing and eating.

Recommendations will be made to maximise functional skills and independence, and participation in everyday activities. This may include specific activities to develop skills or next ‘steps’/ stages of development, provision of equipment ranging from special seating / wheelchairs to small aids such as cutlery and special scissors and changes within the environment. The OT will work with the child and their family and other carers, school and nursery staff, to implement any recommendations.
How do we ensure the quality of this service?

The children’s occupational therapy service is commissioned by Clinical Commissioning Groups. The service reports to local children’s health commissioners via quarterly meetings (annual for RBKC Mainstream schools), reporting on key performance indicators. These include the number of referrals, waiting times, levels of clinical activity, quality of the service provided and feedback from service users.

Children’s occupational therapists are regulated by the Health and Care Professions Council (HCPC), adhering to their Standards of Practice. The majority of children’s occupational therapists are members of the British Association of Occupational Therapists which outlines national standards of practice.

FOR MORE INFORMATION, PLEASE CONTACT:
Paediatric Occupational Therapy Service
Imperial College Healthcare NHS Trust - St Mary’s Hospital
Praed Street, London W2 1NY
Tel: 020 3312 6098.

Additional Paediatric Occupational Therapy services in north Westminster and north RBKC are provided by

- Westminster Children with Disabilities team, (The Medical Centre, Woodfield Road, Tel: ) – who have specific responsibility for major equipment and adaptations
- RBKC Children with Disabilities team (based at RBKC Town Hall) who have specific responsibility for major equipment and adaptations
- Westminster Education (based with SEN Outreach team at QEII School) - (for children with OT in Part 3 of statements of Special Educational Needs)
- CYPOT (CLCH, based at Parsons Green), - providing service for children of school age in north Westminster with non-complex needs.

Child and Adolescent Mental Health Services (CAMHS)

What does this service do?

The Child and adolescent mental health service (CAMHS) provide a comprehensive range of targeted and specialist community mental health assessments and treatments that are compliant with NICE guidance and other evidence based assessment and treatments.

The service comprises of multi-disciplinary teams of child and adolescent psychiatrists, psychotherapists, family therapists, clinical psychologists, nurses and allied health professionals based in Kensington Chelsea and Westminster.

The service provides:

- Targeted services (Tier 2) to promote capacity of non CAMHS specialist, community services to support the emotional and mental health of children and young people. Provision includes training, consultation, assessment and short term treatment with a focus on early recognition and intervention for children and young people with emerging mental health difficulties.
- Specialist services (Tier 3) which assesses and treats children and young people with moderate to severe mental health difficulties (including mental illness) and ADHD using evidenced-based treatments that are consistent with guidance and best practice.
- Additional commissioned services for looked after children (LAC) and support to young people with learning disabilities or neurodevelopment difficulties such as Autism Spectrum Disorder in the Behaviour Family and Support Team (BFST). Services for Youth offending are also available.
Who is this service available to?

The service is available to children and young people aged 0 to their 18th Birthday and their families/carers who are registered with GPs within Central London and West London CCG areas (Kensington and Chelsea and Westminster).

Services are offered to support children, young people with mild to moderate (Tier 2), moderate to severe (Tier 3) mental health needs, Looked after children (LAC) and children with learning disabilities in the Behaviour Family Support Team (BFST), and youth offending.

We aim to offer an initial assessment to all new referrals within 4 weeks. There may be an additional wait of up to 4 weeks for treatment to commence if this treatment is necessary.

CAMHS offers talking therapies such as Cognitive Behaviour Therapy (CBT), Family Therapy, Psychotherapy and Medication. We offer a consultation service to other professionals, and specialist mental health input to other partner agencies including YOT and BFST.

How do you access this service?

CAMHS services are categorised as targeted and specialist services, which means they are available to children who have specific additional needs and who have been individually referred to the service.

Any professional working with children, young people and families can refer a child to the services. This is usually a GP, a member of schools staff or a social worker. If they are unsure whether they should make a referral or a concerned about a child or young person they can contact the service Mon-Fri between 9am and 5pm and speak to the duty CAMHS professional who can provide information and guidance. The duty CAMHS professional can arrange an urgent appointment where necessary.

Emergency CAMHS services can be accessed 24/7 by visiting the A&E department of Chelsea and Westminster or St Mary’s hospitals.

How do we ensure the quality of this service?

The Children and Young People’s Improving Access to Psychological Therapies Programme (CYP IAPT) works with existing CAMHS including the voluntary sector and local authorities to transform delivery at Tiers 2 and 3 across the country.

KCW CAMHS is involved in the CYP IAPT programme and is committed to listening to the views of children, young people, parents and carers and, crucially, acting on them to make improvements in their services and share good practice.

CAMHS use ‘session by session’ and ‘Routine Outcome Monitoring’ (ROM) which means we ask children and young people using services, and where appropriate their parents or carers, to feed back about sessions they take part in and their symptoms. This helps guide the therapy in the right direction, making it as effective as it can be.

It is important for there to be choice about what therapies are available to children, young people and their families. CAMHS offers a range of interventions from ‘talking therapies’ to medication.

Quarterly monitoring reports are sent to commissioners and our service data is discussed at service team meetings and our Senior Management Meetings and any quality concerns are addressed at CAMHS Quality Meetings. We also have a quarterly internal review of all our CAMHS services with CNWL directors and operations managers.

FOR MORE INFORMATION, PLEASE CONTACT:

Westminster CAMHS
Paddington Green Clinic: 020 7723 1081
Marlborough Place Clinic: 020 7624 8605

You might also be interested in:

- CNWL CAMHS and Me Website
  http://camhs.cnwl.nhs.uk
- CAMHS on Twitter
  @CNWLCAMHS
Paediatric Physiotherapy

What does this service do?

The Children’s Physiotherapy Service at Chelsea and Westminster Hospital provides physiotherapy to babies, children and young people in the hospital and also in the community.

The Acute team offer a service for children who are In-patients, and also an Out-patient musculoskeletal service.

Physiotherapists see children on the wards who require physical rehabilitation due to orthopaedic or respiratory difficulties, or neurological or rheumatology disorders.

Children are seen in Children’s Out-patient Department within the hospital.

The Community team offers a service in healthcare, community or educational settings or at home, depending on specific need.

The Service works closely with the wider multidisciplinary team including doctors, therapists, health visitors, social workers and school staff, and as part of the Cheyne Child development team they take part in Multidisciplinary assessments and reviews.

The Children’s Physiotherapy Service offers assessment and intervention for children referred with movement concerns and children are seen in clinic for assessment, and identification of individual need. Assessment findings are discussed with the parent/ carer and child and a plan agreed.

The outcome of assessment may be advice only, an individual programme, access to group therapy or blocks of individual therapy depending of level of need.

Further intervention and assessment for specialist equipment may be needed and onward referral to other services may be required; eg for orthotic provision of splints.

Group or individual hydrotherapy sessions are available and allocated on need eg post- surgical intervention rehabilitation.

The Children’s Physiotherapy Service aims to:

• Help restore function through rehabilitation following trauma or surgery
• Support and develop motor skills, manage postural risk for children with more complex and long term needs
• Work closely with other partners in the health, social care and education to integrate care offered including contribute to the child’s health care plan
• Support families and carers to integrate programmes into daily activities to maximise movement potential and independence
• Promote healthy living and enable / facilitate access to activities within the community

Who is this service available to?

The Children’s Physiotherapy Service is available for children and young people:

• 0-16 years for the Musculoskeletal Physiotherapy Service
• 0-19 years for the Community Physiotherapy Service (if in full time education)

Children can access the service if they live in Hammersmith and Fulham, South Westminster or South Kensington & Chelsea.

Musculo skeletal service for children is available to children with diverse difficulties including:

• conditions children are born with e.g. positional talipes
• acute soft tissue injuries e.g. muscle and ligament sprains
• rehabilitation following orthopaedic surgery e.g. fractures
• long term joint and muscle pain e.g. low back pain, anterior knee pain

The Community service is available to children who present with:

• delayed motor development, long term conditions with concerns about motor ability (neurological, congenital, degenerative or neuromuscular conditions) acquired injury or life threatening conditions (oncology)
If the child lives out of area but has a GP within area services can be accessed within borough, but home visits are not provided.

Children with identified special educational and physiotherapy needs, and attending schools in borough are offered assessment, advice and intervention in school as determined by the physiotherapist at assessment and review.

How do you access this service?

This is a specialist service, available to children who have been individually referred to the service.

Direct referrals to the Community team are accepted from a range of professionals including GP’s and Consultants; Therapists; Health visitors; Social workers; SENCO’s and through the Cheyne Child Development Service.

Referrals to the Acute team are accepted from GP’s and Consultants

If parents have concerns they can discuss with their GP and a referral can be made if appropriate

Most initial assessments are offered within 6 weeks following receipt of referral.

How do we ensure the quality of this service?

Physiotherapists are registered with the Chartered society of Physiotherapy and the Health and Care Professions Council, and have further training and experience of working with children.

The service reports quarterly to the commissioners on performance.

Standardised outcome measures are used and professional and national standards are followed

Questionnaires are undertaken at intervals to help monitor patient satisfaction and guide service development.

FOR MORE INFORMATION, PLEASE CONTACT:
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369 Fulham Road, SW10 9NH

T 020 3315 1615
Deryn Watts - Paediatric therapy lead

Paediatric Speech and Language Therapy Service (SALT)

What does this service do?

Speech and language therapy is concerned with the management of disorders of speech, language, communication and swallowing.

Speech and language therapist are allied health professionals (AHPs) and locally all therapists are employed by the NHS.

Many children locally receive face to face speech and language therapy (SALT) in an individual or group approach. However many children will also benefit most from receiving speech, language and communication approaches from people who are with them on a day to day basis. This would include a class teacher, a teaching assistant, a parent, carer or grandparent, or an early year’s member of staff. There is a strong evidence base for this approach as we know that this how children learn to communicate and verbalise. Whatever approach and programme is appropriate for a child, parents and carers will play an absolutely critical role in developing their child’s speech, language and communication skills.

The service aims to ensure that children and young people reach their speech, language and communication potential, whatever their level of ability and preferred communication method (speaking, writing or using alternative or augmentative communication aids like PECS or electronic devices). The service also delivers any therapy approach specified in a statement of special educational needs (SEN) or in the new education, health and care (EHC) plans and supports children who have swallowing difficulties.
Who is this service available to?

This service is available to children aged 0-18 who have:
- mild, moderate or severe learning difficulties
- physical disabilities
- language delay
- specific language impairment
- specific difficulties in producing sounds
- hearing impairment
- cleft palate
- stammering (dysfluency)
- autism/social interaction difficulties
- dyslexia
- voice disorders
- selective mutism
- swallowing difficulties

Children will receive an assessment by a speech and language therapist if they have a significant speech, language and communication need. The service will usually ask a parent or carer and the child’s school or nursery to complete a questionnaire which helps to identify a child’s needs. If a child is assessed as having a significant level of need then an appropriate therapeutic programme, based on the best available evidence of what will work, will be designed and then put into action.

The service is delivered in the following teams:

**Early Years SALT**

This team supports children who are not yet at school (under 5) and their families. This service mostly takes place in children’s centres, nurseries and nursery classes attached to schools. Support provided includes groups and individual therapy for children and their parents. In addition therapists support early year’s practitioners to ensure that children’s centres and nurseries/schools can also help develop children’s speech, language and communication. This is achieved by training staff, sharing resources such as language focused games, and ensuring the child’s environment promotes language and communication. The focus in early years SALT is on the prevention of problems and on early identification of needs and a quick resolution to issues.

**Waits**

Current waiting times for early year’s SALT assessment are 12 weeks. If a child has an identified need for therapy then it will be a further 12 weeks until this starts. In the interim many programmes and much support is offered to help children continue to develop their speech, language and communication. Groups offered include getting ready for school, developing play between child and parent and using music to develop speech skills.

**Access**

Early year’s SALT is available to children resident in Hammersmith and Fulham, Westminster and Kensington and Chelsea or those attending early year’s settings in these boroughs.

**Child Development SALT**

Some children have higher and more complex levels of needs and disabilities such as Autism, Down's Syndrome or Global Developmental Delay (GDD). These children will be supported, under 5, via group and individual therapy programmes. A multi-disciplinary team including paediatricians, SALT, physiotherapists, occupational therapists, music therapists and clinical psychologists will develop joined up programmes that support a child across many areas of need (physical, emotional, verbal etc). The SALT teams are based at child development centres – at White City, Chelsea and Westminster Hospital, South Westminster clinic, St Mary’s hospital and Woodfield Road health centre.

**Waits**

As this service supports children with some our highest levels of need waits times for assessment are the shortest at 6 weeks. Therapy programmes will commence in a further 6 weeks. Again much interim support such as parental advice and groups for families are available.
Access
Children are eligible for child development services including SALT if they live in the tri-borough or have a GP in these boroughs.

School SALT
Once children start school, whether a mainstream primary or a special school, speech and language therapy programmes will be developed appropriate to a child’s needs. This may be an individual or group therapy programme or it might be a programme designed by a therapist implemented by a class teacher or teaching assistant. All children with a statement of SEN or an EHC plan will have the therapy and other support specified within those documents, delivered by this service. For children who have been supported in the child development service, this transition to a new team of therapists might feel a bit difficult for a parent or the child. However all SALT teams work together to plan programmes and handovers and each team has different expertise which are most suitable for the children they work with.

Waits
Children in school who are new to the service will wait 12 weeks for an assessment and a further 12 weeks for a programme to start (unless they are part of child development services). Much work will have taken place before this by schools to try to develop a pupil’s speech, language and communication skills. Schools can also access funds (SEN budgets and pupil premium) that can buy additional SALT time or resources to help children will low level and moderate needs develop further as the schools service is only available to pupils with significant levels of need.

Access
Speech and language therapy in schools is available to children attending all local state schools, including free schools and academies, in the tri-borough.
Children attending schools outside the tri-borough will usually access therapy at their school. If funding is required for this therapy from a child’s home education or health authority this can be organised.

For children attending independent / private schools the service will assess children who are likely to have a significant need level of need, as happens in state schools. However no additional support and training is currently available from the service in these settings, unless the school purchases it. We would also expect the school to show evidence of how they have tried to develop a child’s speech, language and communication, as we do for pupils in state schools.

The above arrangements help to ensure we have a fair service for all children, whatever school they attend.

How do you access this service?
This service is categorised as a universal, targeted and specialist service, which means that elements of it, such as early year’s SALT programmes, are available to all children. However in order to receive an assessment and a therapy programme a child will usually need to have a significant level of speech, language and communication needs. All children who have a statement of SEN or EHC plan, with speech and language therapy and support specified within it, will have access to the service.

The service can be accessed in a variety of routes:
- In the early year’s parent can request advice and support and assessment in all early year’s settings (children’s centres, nurseries etc). Early years practitioners can also make referrals to the SALT service if they feel a child has needs requiring support, assessment and therapy.
- Children are usually referred to the child development service including the SALT team, via a hospital clinician, a health visitor or a GP. Referrals for this team do need to come from a professional such as those listed above, or from a school, educational psychologist or SENCO.
- Children requiring an assessment in school will usually be identified by a member of school staff and then referred to the school’s named therapist. Parents can also request a referral, and making this request to your child’s class teacher or the school SENCO is the easiest route. Parents can also ask their GP to make a referral.
How do we ensure the quality of this service?

The service is commissioned (contracted and funded) to deliver speech and language therapy that conforms with national standards including those from the Royal College of Speech and Language Therapy (RCSLT) and the National Institute of Clinical and Health Excellence (NICE).

The service reports to funders on performance through submission of a quarterly report and through discussion at quarterly meetings.

The service and any service issues (such as capacity, any emerging areas of need or specific trends) are also discussed at a tri-borough speech, language and communication commissioning group.

FOR MORE INFORMATION, PLEASE CONTACT:
Speech and Language Therapy Service
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London, SW6 4UL
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W Web: www.clch.nhs.uk

Westminster Early Support Service

What does this service do?

Early Support is a way of working underpinned by 10 principles that aim to improve the delivery of services for disabled children, young people and their families. It enables services to coordinate their activity better and provide families with a single point of contact and continuity through Key Working.

Early Support ensures that service delivery is child and family centred. It focuses on enabling services and practitioners to work in partnership with children and their families.

The Early Support Service in Westminster offers key working support to families caring for a child aged 0 to 5 years who has a disability or complex health needs.

Key workers:

a) Work in collaboration with children and young people with disabilities and/or complex health needs and their families to ensure that all support is family-centred

b) Co-ordinate provision of and communication between services and ensure families are fully aware of who is involved, for what purpose and when.

c) Provide a single point of contact responsible for providing of information and facilitate access to services and support at the appropriate time.

d) Maximise early intervention, proactive practical and emotional support and provision of coherent packages of services.

e) Empower parents/carers to feel and become more involved in and in control of achieving positive outcomes for their child with a disability and/or complex needs, themselves and their family.

The aim of the Early Support Service is to ensure a consistent approach in working with parents to be and parents with children 0 – 5 years, according to shared set of key principles.

These are:

• co-ordinate, streamline and add value to existing services for children with disabilities

• involve parents, grandparents and other carers in ways that build on their existing strengths;

• ensure lasting support by linking activities to services for older children;

• be culturally appropriate and sensitive to particular needs.

Who is this service available to?

Early Support Service is available to families who have a child under age of 5 with complex disability (children identified by Child Development Service on Nurturing, Down Syndrome, Cerebral Palsy and Social Communication Pathways). Support is offered for limited time, between 6 months
and year and a half, pending on individual circumstances and complexities of child’s condition.

The service support families with management of appointments, access to mainstream services and better coordination of care package. Parents are active partners, involved in decisions that impact on their children and them. They are involved in setting priorities for their child’s needs through Family Support Planning meetings. This is a meeting when the care package is agreed, reviewed and monitored.

How do you access this service?

This is a specialist service available to families whose child has complex additional needs and involvement of a large number of different professionals ranging from specialist Health Visitors to Occupational Health, Speech and Language Therapist, Educational Psychologists and Paediatricians.

A child is usually referred, with family consent, to Early Support by a medical professional e.g. paediatrician, specialist health visitor or therapist who works in Child Development Service. The Professional, with the family, fills in a referral form called CAF (Common Assessment Form) and discusses family’s needs and expectations of this service with the family. Once we receive a referral, our Key Worker will arrange a home visit and assess child’s/family needs. They will set up a plan of how it is best to address the needs identified. They will notify other professionals of their involvement and will coordinate future support with family agreement. They will organise a Family Support Planning meeting where parents and professionals together talk about an action plan of the best way to support the child and family. The Plan will clearly identify who will lead on specific elements of work and a time frame to achieve a progress. Family will have a chance to contact Key Worker whenever they feel they need support and the Key Worker will regularly update the family regarding work other professionals do.

How do we ensure the quality of this service?

The Early Support Service provides quarterly reports about service and if they meet Key Performance Indicators identified. This report is presented to Commissioners and comprises of statistical data about the number of families supported by us and a case study that demonstrates work we do with families. Families are asked to give consent for case studies (always presented anonymously).

Once a year, we ask all families that we supported during the year to fill in a yearly survey and give us their views about the service including any suggestions on how service could improve. At the same time, we send survey to professionals that work with us closely and ask for their views about services and suggestions of how we can provide service that is fit for purpose.

We continuously ask families that we support to give comments about their experience with a service and are willing to listen to the views expressed by families.

When we close an Early Support case, we ask family to tell us how we have supported them to move on, what we have achieved while working with them and if they feel better equipped to deal with complex family circumstance as a result of support they received.

Throughout the year, we collate informal feedback from families and professionals. These are used in addition to formal survey to help us improve service.

FOR MORE INFORMATION, PLEASE CONTACT:

For more information about the Early Support Service in Westminster, contact Nada Calovska or Azniv O’Driscoll at Rainbow Family Centre, The Westminster Society for People with Learning Disabilities

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