

Title:		Occupational Therapy Policy			
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Review Cycle		Frequency:	1 year		
Lead Staff:		Head of Therapy			
Support:		Lead Occupational Therapist			
VERSION CONTROL:					
Version No	New document or reasons for revision			Agreed by	Date
1	Migration to new document version control system			Office	April 2021
2	Policy Update			Clinical Lead	Autumn 2021
3	Policy update			Therapy Lead	Autumn 2022
4	Policy review			Lead staff	Autumn 2023
LINKED INTERNAL DOCUMENTS:					
Therapy Policy					
LINKED EXTERNAL DOCUMENTS:					

Equalities Statement:

We have carefully considered and analysed the impact of these policies on equality and the possible implications for people with protected characteristics, as part of our commitment to meet the Public Sector Equality Duty (PSED) requirement to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations.

Requests for Paper Copies:

If you require this policy in a different format e.g. print or braille please contact Co-Headteachers@lindenlodge.wandsworth.sch.uk

Wellbeing statement of commitment

We are committed to providing a healthy working environment and improving the quality of working lives for all staff and students. The wellbeing strategy aims to support our mission, core values and freedom of thought and expression, freedom from discrimination and the recognition that our community is our greatest asset. For further information on our schools commitment to wellbeing, please see the Mental Health and Wellbeing Policy and Strategy document, or visit our school website.

Introduction

This policy has clear links to other policies in our school, in particular to the Therapy Policy which is an overarching policy. This Policy specifically identifies the roles of the Occupational Therapy Department.

The Occupational Therapy department provides a specialised service to meet the individual needs of students at Linden Lodge. Occupational Therapy (OT) helps our pupils to be as independent as possible in every aspect of their life at school. Occupational therapy is a person-centred profession concerned with promoting a balanced range of occupations to enhance health and wellbeing

Aims

- To provide a specialist Occupational Therapy service to meet the changing and wide ranging complex needs presented by the children and young people of the school
- To propose adaptations of the service to meet any additional demands presented by the children or young people, e.g. profound and/or multiple disabilities
- To autonomously deliver highly specialist assessments and clinical interventions to support children and young people with OT recommendations on their Education Healthcare Plans.

Assessment

The Occupational Therapists will assess for and provide programmes for therapeutic management of postural needs, sensory and upper limb motor skills development, daily living skills including hand skills, equipment needs to access the curriculum and ensure safe transfers. Additionally, they will work closely with other therapists to provide support around eating and drinking and AAC. Assessment may be formal, where appropriate or informal in nature, including observations in different sessions, play-based sessions and discussions with teaching staff and families.

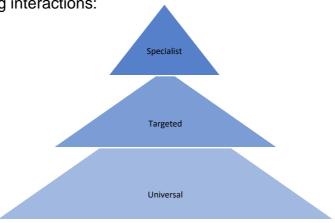
A baseline assessment will be performed on each child with an occupational therapy provision and further reassessment on a yearly basis. This will be aimed at doing in a multi-disciplinary assessment alongside Physiotherapy and Speech and Language Therapy where appropriate.

Delivery

Each OT has a designated caseload that covers each class in the school. The OT has the responsibility for the assessment of pupils in their class, as well as response to any referrals made by the Class team. Therapists are attached to class groups of 6-8 children and work intensively and collaboratively with the other members of the staff team. Working closely with a class team is part of the whole school philosophy and allows therapists to take a holistic approach. Occupational Therapy time is allocated to each class and priority is determined by the needs of the students. OT deployment in class will be in consultation with the Professional Lead. OT provision

can be consultative in nature where implementation of programmes and advice need to be integrated throughout the day.

Therapy will be provided as per the WAVE model and OT involvement may take the form of the following interactions:



Universal: Support for quality teaching for all students

Universal support involves high quality teaching at a whole class/school level. At this level occupational therapist may be involved in building school capacity through:

- Providing professional development opportunities about postural management, sensory impairment, daily living skills and upper limb skills development
- Assisting class to design educational activities that are consistent with the needs of the students
- Assisting teachers to interpret data and to interpret professional reports
- Advising teachers on appropriate resources to support intervention at this level
- Providing support in the development of IEPs.
- Training to staff and parents
- Facilitate the teacher's capacity to generalise successful strategies and implement accommodations to support the student's access to education.

Targeted: Group or whole class therapy sessions

Layer 2 support is class based targeted intervention for students or groups of students identified as at risk of poorer health or wellbeing outcomes. At this level, Occupational Therapists may be involved in:

- Providing sessions that contribute to EHCP/Statement statutory requirements
- Demonstrating and providing class-based therapy sessions for all students or small groups. All staff required to be present.
- Providing support to teachers and assistants to target specific goals and elicit target responses for individual students or groups of students.
- Advising teachers and assistants on appropriate resources to support intervention at this level (e.g. Occupational Therapists have supported teachers to adapt the motor challenges of classroom tasks which enabled the enhanced participation of children and young people with developmental coordination disorder in school life)
- Teaching dressing skills, upper limb management and fine motor control in the classroom.
- Will assess and devise programmes for daily living skills to include hand skills
- Reviewing that all students have appropriate access the school curriculum, environment and social activities which may require specialist equipment.
- Supporting and advocating those with sensory integration difficulties by providing programmes and advice to class teams
- Providing plans/programmes, where deemed appropriate
- Providing advice for EHCP/AR reports

Specialist: Specialist 1:1 therapy

Specialist intervention would comprise of individual students identified as requiring specialist support to promote their independence. Students will receive Specialist 1:1 therapy if they:

- Predetermine by statutory guidelines
- Use Low or High Tech AAC and require positional and hand function advice and/or mounting

- Identified as needing appropriate equipment to assist with personal care (e.g. slings)
- Assessment and promotion of personal independence in all daily living activities (e.g. feeding, drinking, dressing, toileting and bathing) which may require specialist equipment.
- Assessment and review of appropriate static seating to provide postural stability and promote function. Any equipment needed for static seating in school will be funded by the student's LEA.
- Work in conjunction with the manual handling co-ordinators in school to assess for and provide manual handling equipment (e.g. slings, crickets).
- Liaise and collaborate with Wheelchair Services, who identify and manage appropriate wheelchair(s).
- Have eating and drinking needs that require support to develop independence or support with postural needs. Students may also require support for behavioural/sensory feeding difficulties.
- Referral for home equipment via SSOT
- Students will be assessed or reviewed, receive a set block of therapy and staff will be trained to carry-over the skills