

**“More therapies in the community”
Parent Carers’ Council**

Short survey findings

There were responses from 47 families, representing 49 children with additional needs. The responses are grouped within the different age bands.

Number of returns received by 1/12/08 (sent out 3/11/08) = 47

- ✓ 3 from parent carers of 0 to 4 year olds (6%)
- ✓ 19 from parent carers of 5 to 11 year olds (40%)
- ✓ 14 from parent carers of 12 to 15 year olds (30%)
- ✓ 6 from parent carers of 16 to 19 years olds (13%)
- ✓ 5 from parent carers of 20 to 25 year olds (11%)

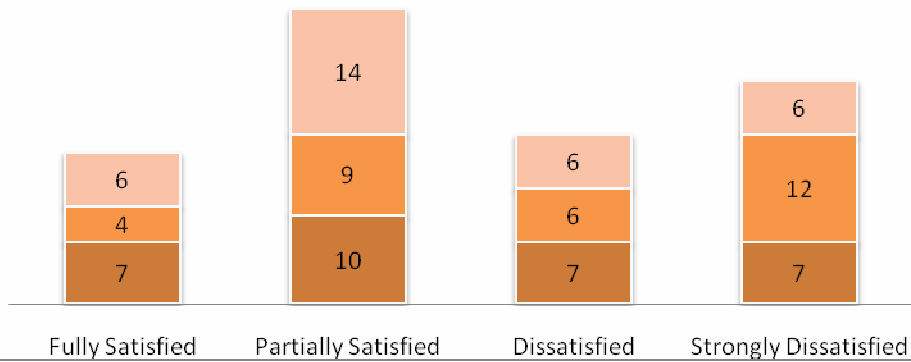
Within the short survey, families were asked to indicate their level of satisfaction with each of the therapy services their child receives. The results from this indicate:-

Therapy	fully satisfied	partially satisfied	dissatisfied	strongly dissatisfied	
SALT totals	17	33	19	25	94
Assessment	7	10	7	7	
Amount	4	9	6	12	
Quality	6	14	6	6	
Occupational Therapy totals	13	17	13	15	58
Assessment	5	6	3	6	
Amount	3	4	7	5	
Quality	5	7	3	4	
Physiotherapy totals	3	25	5	3	36
Assessment	1	9	2	1	
Amount	1	9	2	1	
Quality	1	7	1	1	
Psychology totals	17	14	9	18	58
Assessment	7	2	4	5	
Amount	4	6	4	7	
Quality	6	6	1	6	
group totals	50	89	46	61	246

Levels of satisfaction regarding assessment, amount and quality of therapy

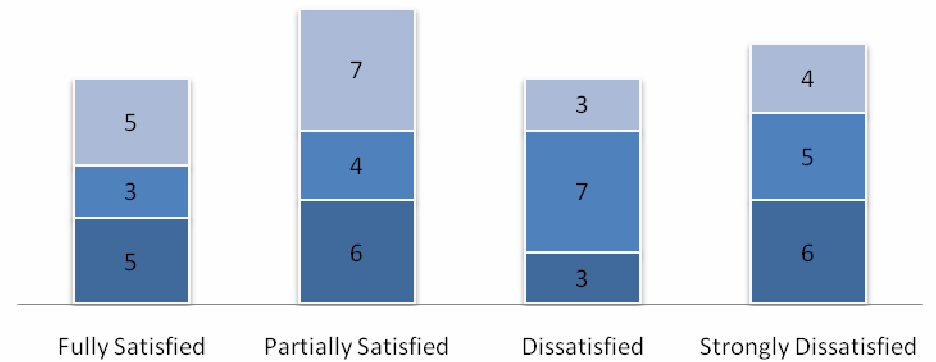
Speech and Language Therapy

■ Assessment ■ Amount ■ Quality



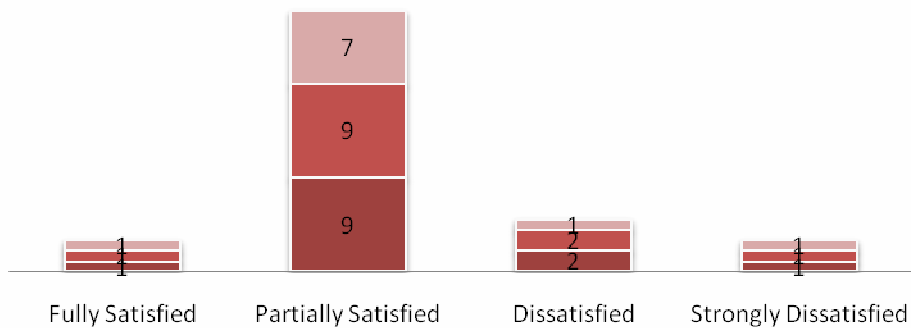
Occupational Therapy

■ Assessment ■ Amount ■ Quality



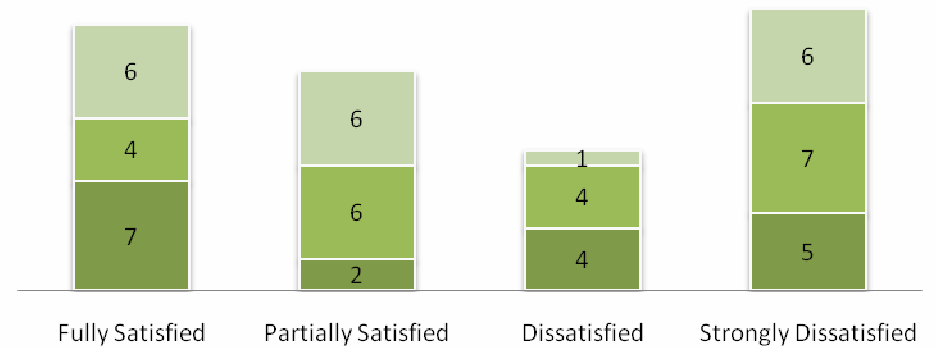
Physiotherapy

■ Assessment ■ Amount ■ Quality



Psychology

■ Assessment ■ Amount ■ Quality



The responses to the two questions follow :-

Question One

The best thing about the therapy my child receives is...

Question Two

My suggestion to improve this provision is...

Children 0 to 4 years

Speech and Language therapy

best thing The speech therapist is really good but only saw her twice.
To improve More therapists!

Best thing The service of ICAN at Carden
To improve Continued provision when moving from ICAN to reception in mainstream. After a year's excellent progress at ICAN, my son receives no service at school.

Occupational therapy

Best thing Occ Therapist off sick – was in a joint session and was a waste of time

Physiotherapy

Best thing She attends only once a month at hospital
To improve Not enough available (currently helped at Honeycroft Under Fives Centre)

Children 5 to 11 years

Speech and language therapy (SALT)

Best thing He has been assigned therapy every week. In reality this hasn't been the case but hope things will improve
Suggestion Instead of full hour, would like our child to see a therapist for 2 sessions of between 20 to 30 minutes. Make it manageable for child!!

Best thing The access to SALT albeit very limited, she does actually receive it.
Suggestion To provide another SALT so that could see children who have no formal language and need extra help

Best thing she needs it

<i>Suggestion</i>	lots more necessary
<i>Best thing</i>	Being able to have the support at home and then at her school
<i>Best thing</i>	There was someone coming to school weekly (but not sure if it still happens)
<i>Suggestion</i>	More involvement of parents/carers
<i>Best thing</i>	Reports which allows parents to continue strategies
<i>Suggestion</i>	There are simply not enough SALT provision. Shouldn't education issues be addressed or something
<i>Suggestion</i>	More group sessions at school
<i>Best thing</i>	He gets just a few minutes in a group once a week (at school)
<i>Suggestion</i>	The SALT needs more time, energy, to spend with each child. Provide SALT through direct payments etc. More SALT sessions at school
<i>Best thing</i>	My daughter currently has individual therapy
<i>Suggestion</i>	More direct therapy rather than programme carried out by others
<i>Suggestion</i>	Difficult to understand criteria professionals use to determine need.
<i>Best thing</i>	The early prevention she received at ICAN
<i>Suggestion</i>	More, more, more.
<i>Best thing</i>	Was when he attended Jeanne Saunders Centre – excellent
<i>Suggestion</i>	Poor community based provision/follow up. My 10 year old also need SALT
<i>Best thing</i>	he actually receives some SALT! Targets to work on
<i>Suggestion</i>	More input, regular reviews, not having to so clinics in school holiday times, access in schools. More money spent on therapies.
<i>Best thing</i>	The therapist is consistent and has been involved over 2 years. Also approachable (staff)
<i>Suggestion</i>	Therapist is not AAC trained – needs time and training to gain experience
<i>Suggestion</i>	Better communication with parents
Occupational therapy	
<i>Best thing</i>	Was assessed as part of statutory assessment
<i>Suggestion</i>	Has received none since assessment and he would benefit from seeing one once a term or at least once a year
<i>Best thing</i>	Quick diagnosis

Best thing She has OT at school
Suggestion More continuity of care for children with ongoing needs.

Suggestion have a group time at school

Best thing dedication of staff at Seaside View
Suggestion to improve the lack of consistent and ongoing groups

Best thing Fantastic home assessment/knife and fork.
Suggestion Involvement at school – follow up programme

Best thing Therapist is experienced and trained in working with physically disabled child and use of switches
Suggestion Not an permanent contract – future unknown. She doesn't get the back up needed ie equipment, technicians etc

Physiotherapy

Suggestion A termly check-up during the first year at school at best for the first year would be beneficial
Suggestion Partially satisfied by having it in the past but need more

Suggestion More general massage is needed for well-being of child

Suggestion appropriate and timely intervention and ongoing review needed

Suggestion Treat every child equally/ EVERY CHILD DOES MATTER

Suggestion Don't get feedback re. this therapy! Would like feedback please.

Suggestion involvement at school – follow up programme to give advise

Best thing fairly regular
Suggestion Therapist needs to do what she agrees to do!

Psychology

Suggestion Independent Educational psychologist assessing our child please. If they are Local authority (LA) employed, at best should be more than single hour with them (whilst making assessment).

Suggestion Needs to be ongoing support without long waiting times

Best thing The confidence it gave me of son being assessed- I'm helping him
Suggestion More educational psychologist provision and follow up made at school.
Suggestion Impact of disability on child

Children 12 to 15 years

Speech and language Therapy (SALT)

Suggestion Actually provide speech therapy in special schools!

A whole year without SALT contact assessment or programme.
therapy so they can continue programme at home.

Involve parents in their child's

Suggestion Child's emotional state to be taken into greater consideration

Suggestion More therapists

Best thing Is that it is in school and informs the whole process. The teacher and classroom assistants are all present

Suggestion I think I am satisfied but I don't really know because I am not in school and not able to know how it is working in practice.

Best thing My son has needed so much help and it just hasn't been forthcoming. Cut backs etc...

Suggestion Funding and a waiting list that isn't permanently shut!

Best thing It helps my child learn to communicate

Suggestion Needs to be integrated into daily school regime

Best thing My daughter has high IQ (as well as other problems)—she never ticked right boxes – lack of education due directly to this – all service providers now saying my daughter "slipped through the net".

Suggestion LISTEN to the parent/carers –they are professionals.

Best thing Improving his communication and reducing frustration

Suggestion Increasing the amount of support to the school

Suggestion More of it and through school years

Occupational therapy (scarce resource)

Best thing My son was told he was too old for this service – at 6 years old. We have been waiting a year for an appointment – have paid privately for past 3 years – son now goes to Northease Manor and gets the help he should have got before.

Suggestion Earlier intervention – my child/I was told nothing could be done to help when at the age of 6/7 but is now getting some help.

Comment – not sure what ‘OT’ covers – if it helps towards choosing and funding work we would be very keen for my daughter to have some!

Suggestion More of it – more input to schools

Suggestion End confusion between OT provision in school and in the home, Education OT’s or social services OT’s. Be clear to parents what OT is for and what it can do.

Physiotherapy (Scarce provision locally except hospital-based service)

Best thing Therapy helped my daughter to control her movements with conscious effort/exercise 4 homework.

Suggestion As she got older no ongoing check-ups currently walking pattern bad/shoes/boots do not last long and need ongoing check-ups – problems can be picked up sooner.

Best thing My child’s Physio is hard-working and communicates with us.

Suggestion Teach all Physio how to communicate with parents.

Psychology

Best thing They let you know if anything has gone wrong. Generally helpful

Best thing he doesn’t get it at the moment but I know it is available if I need it

Best thing It obviously helped my son’s diagnosis of autism and explained things we did not understand.

Suggestion Funding – fuller reports. Had to go privately to get full report.

Best thing Play therapy – improved my child’s self-esteem

Suggestion Greater awareness of benefits amongst parents to prompt demand

Best thing Helping her to gain confidence in herself, in being able to breakdown how she can go about everyday life situations

Suggestion Shorter waiting times was fortnightly visits, and consistent appointment – now Doctor has been off ill for 2 months and not seen anyone since 5/9/08

Best thing None of it was good when my daughter received it. She got worse, statutory services not good.

Suggestion listen to parents – more services, quicker response and more diverse therapies

<i>Suggestion</i>	More needed – more access to referral
<i>Suggestion</i>	Run group training in Severe learning disabilities/challenging behaviour for parents
<i>Best thing</i>	After requesting a 2 nd professional opinion she got a better service
<i>Suggestion</i>	Greater communication between the professionals.

Young people 16 to 19 years

Speech and language Therapy

Best thing having the same teacher
Suggestion More SALT sessions

Best thing nothing (strongly dissatisfied)
Suggestion to listen to patient and parent

Best thing The school offers it as part of learning
Suggestion This support needs to become an integral part of education also

Best thing Both children receive class lead SALT directed by teaching staff and on instructions from a speech therapist.
Suggestion A proper report twice a year on child's progress. 1 to 1 or small group with speech therapist weekly

Occupational therapy

Suggestion More of it!

Best thing This has been a very unsatisfactory experience
Suggestion I would appreciate still some practical help re. safer household devices

Physiotherapy

Best thing She is showing improvement in walking
Suggestion More hydro sessions

Psychology

Best thing she is given time to talk
Suggestion needs more

Best thing I think they made matters worse and still not given him proper diagnosis
Suggestion Stop expecting everyone to fit in neat little labels and try to listen to parents more often

Best thing – This has never been offered but there needs to be a service for people with learning difficulties

Best thing Knowing she can voice her own feelings in a safe environment
Suggestion More professionals and more appointment times made available

Young people 20 to 25 years (most provision from adult services)

Speech and language Therapy

Suggestion My son received a minimal amount of SALT and this was given grudgingly. I had so many cancellations I had to doorstep the service.

We need good, trained, willing therapists, who will listen to parents)

Occupational therapy

Suggestion Shorter waiting list – too late by the time we got to the top

Best thing High quality of service and experience from Senior (paediatric)OT when needed.

Suggestion A seamless (ie not having a gap) transition from children's OT to adult OT. An awareness of complex ongoing needs when moving to adult services.

Physiotherapy

Best thing Well intentioned and caring staff.

Suggestion Regular (six monthly) appointments even if in a period of remission

Psychology

Best thing The way it links to other agencies

Suggestion lack of appointments and continuity of the doctor who sees my child

Suggestion My son would like to learn more about his illness