



Transdisciplinary Working in Percy Hedley School: Rationale and Process

Therapy provision in Percy Hedley School is delivered via:

1. 1:1 therapy sessions and / or small group therapy sessions
2. A transdisciplinary approach

This document refers specifically to how the transdisciplinary approach to therapy is delivered within the school setting and the rationale behind it.

What is Transdisciplinary (TD) working?

The term 'transdisciplinary working' means professionals from different disciplines working together to share skills and knowledge and reach a common goal.

Within Percy Hedley this is about teachers, support staff, occupational therapists, physiotherapists, speech and language therapists, nurses, school counsellor and educational psychology forming a team around the child, alongside parents and carers, with the shared intent of helping each student reach their potential across all aspects of the life. It may also involve working collaboratively with external providers such as orthotics, CYPS, wheelchair services, further education providers etc.

Why is it important?

All disciplines bring their own specialist knowledge to a team. They also have their own unique roles in supporting the student's development.

By working together, the core challenges linked to the student's complex and varied needs can be addressed in a holistic manner. Therapeutic interventions are embedded in our educational provision and curriculum, thus supporting our students to reach their potential. This approach upskills both staff and students and promotes the learning, generalisation and consolidation of skills. It facilitates staff to become empowered, knowledgeable, insightful, and skilful in their practice.

How do we do it?

Transdisciplinary therapy is embedded into the opportunities and activities that are ongoing as part of daily life, individual therapy, and throughout the curriculum.

Transdisciplinary input is based on clinical reasoning which comes from the therapist's professional expertise, their working knowledge of student priorities and educational practice. Therapists collaborate with class teams, parents/carers and other relevant stakeholders to help them determine the most appropriate goals and delivery methods. It is essential that this approach is dynamic and flexible so that the therapist can implement the most suitable delivery style to address identified need. This may be through individual, small group or whole class intervention, modelling, guidance, planning, or supervision. Transdisciplinary input, direct or indirect, is additional to teaching, it does not replace it.

Examples of types of Transdisciplinary (TD) intervention

Whole class timetabled sessions: Therapist led

These sessions usually focus on therapy objectives that feed into or underpin an area of the curriculum. These sessions are generally led by the therapists with a dual purpose of delivering learning to pupils but also supporting staff to understand and use therapeutic approaches throughout their practice. This facilitates the embedding of therapeutic approaches used within the classroom setting on a wider scale.

Interventions of this form are recorded in the dedicated section of TD record keeping in pupil case notes or on Earwig for pupils on the Engagement pathway.

Whole class timetabled sessions: Teacher led

In these sessions the therapist's role is to use their therapeutic and analytical skills to determine any barriers to learning and take appropriate steps to address them. This can take many forms including input into planning, preparation of resources, modifying the environment, access arrangement, activity analysis, language and communication, conceptual confusions, motor access etc. They may be pupil specific interventions or take a group approach. Pupil specific interventions of this form are recorded in the pupil case notes.

Both of the above approaches enrich the lesson therapeutically and empowers the staff to think in a TD way. TD will look different for every group, depending on the skill set of the therapist involved, the teacher, the staff, the topic, the environment and most importantly the student's needs.

Supporting delivery of key drivers: communication, wellbeing, functionality and independence

This intervention relates to everything that students are involved with throughout the day, over and above the regular lessons. It is about therapists working to ensure that best practice and therapeutic support is woven into the tapestry of school life, supporting functional independence, social interactions and many aspects of personal development. Interventions are responsive and allow for ongoing formal and informal monitoring and quality control of best practice.

Because this model of input is so pervasive and intrinsic to the school's practice it is not formally recorded. However, any observations of particular significance can be recorded in a student's individual case notes.

Appendix 1 gives some illustrations of the types of TD work that happens in school.

Monitoring and quality assurance

Casenotes are peer reviewed on a termly basis, overseen by the lead therapist of each discipline. In addition, an external quality assurance review is done on an annual basis with our Therapy Improvement Partner.

A highly specialist therapist takes a lead in mentoring and coaching less experienced staff in the delivery of TD working. This therapist reports directly to the Lead Therapist who will follow up any issues, concerns or training needs.

Appendix 1 – Examples of how TD working may look at PHS

Example 1: Understanding emotions using the Zippy's Friends programme

Led by the SaLT, with the teacher and LSA supporting pupils, this course of sessions is about helping pupils understand their own emotions and to explore situations where they may have experienced particular emotions. Delivering the sessions has multiple benefits; the SaLT gains in depth assessment of how each individual perceives their feelings and the things that impact them; all staff become more confident and skilled in knowing how to support pupils with their emotional regulation; assessment and observation of pupils helps inform educational and therapeutic targets. In addition, a reflection on the benefits and limitations of the programme have allowed its use to be adapted for more pupils across school.

Example 2: Developing prewriting skills and body awareness

The Mat Man program 'Learning Without Tears' offers a multisensory and kinaesthetic approach to develop the foundations of letter formation. Through having an OT deliver this programme in class, supporting staff increase their knowledge and understanding of the development of prewriting skills as well as how it can be supported on an individual basis. The highly structured approach to the delivery of this program, including visual aids, has been effective in ensuring that each student can access the program with a balance of group and individual learning.

Example 3: Combined therapy assessment and intervention session

The SaLT, Physio and OT work together to deliver a session with multi-disciplinary objectives using rebound: The rebound therapy approach is used to help a pupil work on their balance and co-ordination skills. During this session, where the pupil is typically more likely to produce spontaneous utterances, the SaLT used this time to gain a sample for assessment of speech sounds. At the same time, the OT provided input to support with sensory and emotional regulation.

Example 4: Integrating postural management into education

The physio and OT work collaboratively with the class teacher and department lead to identify times within a pupil's timetable that changes of position, varied use of equipment and movement opportunities can be incorporated into class whilst at the same time not compromising access to accredited subjects. This might include, for example, walking to identified lessons, completing tasks in a seated or standing position using appropriate equipment, or being as independent as possible during personal care tasks. The importance of incorporating these opportunities is made clear to all staff who work with the pupil through training and monitoring by the class therapists, whilst working in the setting. Achieving a balance and effective management plan for every individual is dependent on close

collaboration between teaching, support and therapy staff and this is reviewed and adjusted on an ongoing basis according to the demands and priorities at any given time.

Example 5: Supporting the delivery of Essential Letters and Sounds

The Speech and Language therapist has worked alongside class teams to support students to associate auditory, visual and kinaesthetic features of sounds to strengthen their auditory skills and knowledge of common spelling patterns in the English language. This complements the systematic synthetic phonics programme ELS. The therapists have observed the delivery of ELS and have subsequently worked to develop the class team's knowledge of phoneme- grapheme correspondence. This has been modelled through therapist led class based sessions and adaptations to resources utilized during 'language and literacy' lessons. This has also been accompanied by the modelling of cued articulation signs and using a visual approach to representing the syllables and phonemes in words, therefore increasing teachers and learning support assistants' confidence and competence to utilise these approaches and adapt learning resources.

Example 6: Eating and Drinking Training

Upskilling staff to safely and effectively support pupils with their eating and drinking is an important aspect of the work of both SaLTs and OTs. Both disciplines work closely to ensure that mealtimes are as safe and enjoyable as possible for all students. The OT's main involvement in eating and drinking is around posture and positioning, equipment and maximising independence, whilst the role of the SaLT is around assessing safety and effectiveness of oral intake of food and liquid. Training delivered jointly by the SaLT and OT department is regular and ongoing, with induction for new staff and updates for others. This is followed up with pupil specific training as required. SaLTs and OTs are present during snack and mealtimes in order to monitor compliance, address any issues and make adaptations as needed.

Example 7: Supporting access to food technology practical sessions

The OT works alongside the class teacher to utilise a range of adapted resources which provide a framework and structure for teaching around the key themes of *'Healthy eating, Cooking and Where food comes from'*.

The OT considers factors which may impact on the student's occupational performance which includes their level of fatigue, any physical weakness, associated pain, fine motor ability and responses to sensory input. Working with the class team, the Occupational Therapist recognises the importance of upskilling staff to support pupils safely and effectively. This may occur through guiding, informing, and modelling to staff on how to adapt the task and the working environment to enable success for the student. This could for example, include altering the task by simplifying the recipe, preparing food items using adaptive equipment to help overcome fine motor and sensory challenges, and grading of the task to enable skill development.

Example 8: Combined therapeutic intervention when accessing supported community sessions.

For pupils working on Preparation for Adulthood, the OT and class teacher supported students to determine a functional themed activity to develop their functional independence. This included pupil choice and enabled opportunities for decision making, problem solving and compromise.

The OT led on discussing functional elements of the chosen task and by using activity analysis, determined community challenges linked to students desired goals, e.g. being able to store and retrieve money from a wallet/purse, communication skills during interactions with the public, social etiquette, using an escalator safely and making links to numeracy and literacy throughout the visit in tasks such as reading the menu, prices etc, using the touch screen devices and money management.

Example 9: Class based session focusing on social communication

A session is led by the SaLT and class teacher together where pupils are provided with structured opportunities to increase their awareness of peers and to interact with them. They make choices and direct activities using low-tech symbols and VOCAs. It aligns with the 5 areas of the engagement curriculum (persistence, anticipation, realisation, initiation and exploration) thus working towards both educational and therapy outcomes. The lesson format is repeated each week to allow for learning of routine and provide opportunity for anticipation. For example, does the pupil learn to anticipate the 'scrunchie task' when they hear the sound of the bells?

The SaLT models to the teacher and support staff how they can implement use of symbols and VOCAs into classroom activities, meaning they can they do the same across other sessions.

Example 10: Rebound therapy and communication

Through training support staff and OTs to deliver individualised rebound therapy sessions, more pupils can access this resource. Joint rebound sessions provide a motivating environment in which to deliver the curriculum alongside the work of teachers and other therapists. For example, a pupil who is working on upper limb movements will use a switch to request more bouncing. This also helps teach cause and effect and promote communication skills.

Upskilling others in rebound also gives these staff opportunity to broaden their skill set and use their own skills in a different context.