**Freedom of Information Request: Our Reference CTMUHB_554_23**

**You asked:**

Further to your response CTMUHB_484_23 to my earlier Freedom of Information request I should now like to raise a further Freedom of Information request, for details of **therapy provided by Cwm Taf LHB for treatment available for children/CYP living with Cerebral Palsy**.

As a result of your responses I should like to raise a further freedom of information request as shown below:-

Freedom of Information Request
Strategy

1. **Does a strategy exist for therapy needs of children living with Cerebral Palsy for your LHB area i.e. Cwm Taf, in each age category 0 - 3 and 4 - 19?**

   Cwm Taff Morgannwg University Health Board (CTM UHB) does not have a specific strategy for children with Cerebral Palsy. We have a good practice framework in place for internal purposes to support multi-disciplinary working, clinical discussions and care planning. We also refer to key national policy such as the Nice Guidelines on Cerebral Palsy in Under 25 and other internal guidelines/protocols to help inform therapy input.

2. **If a strategy does not exist, what efforts would need to be made to collate adequate data to enable a strategy to be established?**

   It is not possible to comment on this as not enough detail has been provided on the purpose of a strategy and the intention behind it. As mentioned in point 1 there are already a number of national guidelines in place to aid delivery of services to CYP with a diagnosis of CP.

3. **If a strategy exists will you please send me a copy?**

   A strategy does not exist.

4. **What is the Cwm Taf LHB strategy for any vulnerable children, CYP, living with a neuro conditions, especially Cerebral Palsy?**

   The Health Board has robust safeguarding policies in place for all CYP. All staff have regular clinical/practice supervision and there are ongoing MDT meetings to ensure vulnerable CYP's needs are being appropriately met. This includes links with Social Services and Education.

5. **If no strategy exists how does the LHB know if it has the correct mix level of therapy resources to support treatment requirements?**

   All CYP will be assessed and treated based on their individual needs. Each therapy service has slightly different referral criteria in place and different models in place for delivering therapy all linked to assessed clinical need. In paediatric physiotherapy and occupational therapy CYP are discussed as part of clinical supervision, case load reviews are also carried out of neurodisability caseload to ensure input is being delivered appropriately

across all sites. In Speech and Language Therapy in a similar vein to physiotherapy and occupational therapy children would be discuss as part of their clinical supervision, advice and clinical support is available from senior SLT's. The Physiotherapy and Occupational Therapy services have a clinical specialist who leads on neurodisabilty.There is also a Highly specialist SLT working in the specific field of AAC and a Highly Specialist Dysphagia Therapist. Dietetic staff would also discuss children within clinical supervision with senior dietitians, for further advice, escalating care to senior dietitians if needed. Cwm Taf Morgannwg have invested in a Multi – Disciplinary Team neonatal follow-up service investment allowing for earlier identification and intervention for this caseload.

6. **If a strategy exists will you please send me a copy?**

   Please see response to question 3 above

7. **What strategy does the Cwm Taf LHB have in place for children/CYP, living with Cerebral Palsy when they meet important transition points in education?**

   (a) entry into primary school
   (b) transfer into junior school
   (c) transfer into senior school
   (d) life skills training for adulthood

   CTM UHB has regular meetings with education and adult services, where appropriate, to discuss what support CYP will require to support them to have smooth transitions. The paediatric physiotherapy and occupational therapy service also links with other therapy services and organisation, such as colleges, to support these periods, where appropriate. The physiotherapy service has a local transition pathway to support children from early years starting school. The speech and Language Therapy and dietetic service has close working relationships with schools and would support any child known to the service upon transition point in education. The ALN Act has now extended the age range for support increasing this to 25 whilst the child in is further education (IDP dependent).

8. **What financial resources are made available by the LHB, or local Social care bodies, to families to fund 5(a) to 5(d)?**

   If CYP are known to physiotherapy/ occupational therapy services and require support/advice to support transition into school/adult services this is covered as part of ongoing core service provision. This is the same position for dietetics.

9. **What criteria are used to determine if external facilities/resources are used for treatments for children and CYP living with Cerebral Palsy?**

   CTM UHB has a Service Level Agreement in place with Cerebral Palsy Cymru to deliver some additional therapy input. Prioritisation criteria is used to ascertain who is appropriate to be put forward for this.

**10. Does the Cwm Taf LHB have enough resources and skills to treat all children 0-3 living with CP?**

CTM UHB's Paediatric Therapy service works hard to ensure it has the appropriate resources in place to meet the needs of CYP with Cerebral Palsy. The Physiotherapy and Occupational Therapy services have a clinical specialist who leads on neurodisabilty. The SLT service has a highly specialist SLT in AAC and Dysphagia. Staff have frequent training to ensure practice remains evidence based and CYP are regularly discussed as part of clinical supervision to ensure their needs are being met. The dietetic service does not have any staff with a defined neurodisability role, however senior paediatric dietitians have much experience in supporting children with neurodisability, and continue manage caseloads to ensure resources are prioritised to those at highest risk and need.

**11. Does the Cwm Taf LHB have enough resources and skills to treat all children 4 - 19 living with CP?**

CTM UHB's Paediatric Therapy service works hard to ensure it has the appropriate resources in place to meet the needs of CYP with Cerebral Palsy. The Physiotherapy and Occupational Therapy services have a clinical specialist who leads on neurodisabilty. The SLT service has a highly specialist SLT in AAC and Dysphagia. Staff have frequent training to ensure practice remains evidence based and CYP are regularly discussed as part of clinical supervision to ensure their needs are being met. The dietetic service does not have any staff with a defined neurodisability role, however senior paediatric dietitians have much experience in supporting children with neurodisability, and continue manage caseloads to ensure resources are prioritised to those at highest risk and need.