

CARE & LEARNING SERVICE THE ROLE OF THE PHYSIOTHERPIST

Information for Parents

Paediatric Physiotherapists assess and manage children and young people with movement disorders, caused by disability, injury or illness. They aim to improve the quality of life of children and young people by promoting independence and encouraging physical wellbeing. They work in close partnership with the child and their family to work with them to develop an effective treatment plan that takes into account their lifestyle, leisure activities, general health and what they want to get out of the treatment. Together they have a shared responsibility for meeting the child's needs.

Which children should be referred to the Paediatric Physiotherapy Team?

Children who have significant difficulty with movement, balance and mobility, over and above what would be expected at their age and stage of development, may benefit from physiotherapy. Thus referral to a Paediatric Physiotherapist should be considered if your child has problems:

- Learning to move, roll, crawl, sit up, get up on their feet
- Walking, managing stairs and uneven surfaces
- Accessing and participating in play/leisure activities, such as riding a bike, swimming, playing football, soft play, etc due to difficulties with their movement, balance or mobility
- Participating in school activities such as PE, accessing the curriculum, moving around the school
- Moving around at school
- With their posture or movement which causes pain, functional difficulties or breathing difficulties

Referral

Referral to the Physiotherapy Service is via any Health Professional, eg Paediatrician, GP, Health Visitor, School Nurse.

When a referral is received by the physiotherapy team, additional information may be gathered and a decision will be made as to the appropriateness of the referral. If the referral is appropriate, your child will be assessed by a physiotherapist.

There may be occasions when it is decided that physiotherapy will not help your child. In these cases the referrer will be informed of the decision so they can discuss this with you.

Assessment

The primary aims of assessment are to determine:

- The impact of your child's difficulty on their life
- The likelihood of physiotherapy effecting change at this time

To help with this the assessment may include information gathering from medical notes, yourselves, your family and others involved in your child's life, such as education staff, before the physiotherapist meets your child.

It may also involve formal assessments or informal observation to consider your child's:

- Strength and co-ordination
- Movement development
- Posture and balance
- Quality of movement
- Function

This may take place in a variety of settings, eg home, school, leisure centre, swimming pool or hospital clinic, depending on what is most appropriate for your child.

The decision whether to offer further support from physiotherapy is based on the outcome of the assessment, ie the impact of the difficulty on your child's life and whether physiotherapy can help.

Reporting

Following assessment the outcome will be discussed with you and a written report will be sent to yourselves and the referrer. It may be helpful for this information to be shared with other people for your child's benefit. This will be discussed with yourselves at the assessment.

Interventions

If it is decided that physiotherapy can offer further assistance the therapist will agree clear aims of therapy with you and your child. Other carers and education staff may be included if this is relevant.

There is a range of possible ways of providing therapy to support your child. These will always involve working with and through yourselves and others, such as classroom assistants, class teachers, learning support teachers, nursery staff or other carers and support workers.

Possible ways of supporting your child may include the following:

- Training and advice for yourselves/carers
- Provision of individual programmes of work and ways of helping your child in different environments and by different people
- Group therapy programmes to be carried out by school staff or other carers
- Provision of and advice on specialist equipment and appliances
- Liaison with education staff to support decision making around adaptations to the school building to improve access
- Involvement with education planning and goal setting in Individual Education Plans and Co-ordinated Support Plans
- Direct therapy individually or in groups to be carried out by a therapist in a variety of places, eg school, home, leisure centres, hydrotherapy pools, horse riding

Your child's progress will be regularly reviewed in partnership with yourselves and others. Intervention and the level of input may change according to your child's changing needs.

Discharge

Your child will be discharged from physiotherapy for one or more of the following reasons:

- They have met the goals set and further physiotherapy input is not required
- They are not benefiting from physiotherapy at this time
- They and/or the family do not want to continue with therapy
- They fail to attend 2 consecutive appointments and there has been no contact from the family to cancel or rearrange appointments
- Three appointments are cancelled in succession without a satisfactory explanation

Contact Details

For **enquiries about specific children**, contact their **named physiotherapist**

For **general enquiries** about Paediatric Physiotherapy, contact:

Sheila Lowther
Physiotherapy Team Lead
HC Care & Learning Service
Birnie Centre
Zone 11
Raigmore Hospital
Inverness
IV2 3UJ

Secretary: 01463 706106 (answering machine available)