

NEW WRITING

Making a bumpy journey smooth: TAC and transition

Elizabeth Wassall, Suzanne Rimmer and Lynne Boulter



The authors, along with other multi-agency team members, were instrumental in establishing TAC (Team Around the Child) in Walsall and have worked to ensure its ongoing success since. All three have given presentations on their work at national conferences to promote the TAC model in the UK. Liz trained as a Speech and Language Therapist in Leicester, qualifying in 1991. She has worked in community settings, specialising in special educational needs and autism, gaining her Masters in Autism Spectrum Disorders in Children in 2001. Suzanne trained as a Physiotherapist in Sheffield, qualifying in 1988. She has worked as a Paediatric Physiotherapist in community settings both in England and Canada, specialising in neuro-developmental work and multi-agency working. She will shortly be leaving physiotherapy to take on the role of Head of Children's Specialist Services (nursing) in Walsall. Lynne trained as an occupational therapist in Salford, qualifying in 1987. She has worked as a Paediatric Occupational Therapist

since 1988 in community settings across the West Midlands, initially specialising in early years intervention for children with complex physical needs, but later working across all ages and disabilities.

Summary

This article is a description of a successful TAC system that facilitates the smooth transition into nursery and on into school through co-ordinated planning and effective communication across all agencies in Walsall. A detailed case history is given to show how the system worked in practice for one child and family.

TAC in Walsall

TAC was established in Walsall in 2002 for children aged up to 5 years who have complex needs. The aim was to improve the co-ordination of early, appropriate family-centred intervention, and to give effective support and guidance to a diverse population. Transition is an integral part of the journey for the young child, the family and their team and this article describes the process and the outcomes for families and professionals.

A multi-agency referral and assessment tool is used to identify the holistic needs of the child and family. Its format is similar to CAF but was developed before CAF was available. In fact, we have continued with our original format as we find it gives a greater depth of detail around the child and family's needs and is more family friendly. This assessment develops into a Family Service Plan (FSP) which contains current information about the child's abilities and in particular focuses on measurable 'steps' (objectives) that are designed to assist the child in moving forward. The FSP describes the joined-up working that has been agreed with shared actions, roles and responsibilities. It allows the family to be fully involved in, and aware of, any actions required to meet their child's needs. The FSP is a continually evolving document that reflects the evolving team and is used to help facilitate our TAC reviews. Transition is therefore a natural phase within this process but, as a safety measure, there is an identified point in the timeline when the child is 2 years 3 months to 2 years 6 months old when the TAC review focuses on ensuring that transition is being anticipated and co-ordinated.

The whole TAC process establishes a timeline that everyone adheres to. Professionals are therefore aware of what is expected of them and the timescales for actions to be achieved. Parents have confidence that things will be done because they have information and clear expectations and are always kept in the loop with joint decision-making. Transition is therefore not a major or traumatic event in the life of the child or the family as needs are anticipated and fears are dispelled. Some typical examples of problems that have arisen in the past are:

1. Children arrive in an early years setting without appropriate visual support, e.g. Makaton or a timeline.
2. Staff in the new setting who do not understand the needs of the child as therapists and parents do.
3. The absence of a co-ordinated plan that can be used as soon as the child starts in the new setting.
4. Parents who are anxious because they have been given no knowledge of what the nursery environment will be like and understandably fear this venture into 'the big wide world'.

Supporting Transition

The value-added parts to the TAC process for transition in Walsall include:

1. Parents who lack confidence are given additional support, for instance where English is not their first language or when they are not used to dealing with bureaucracy.
2. Staff from schools are introduced early on in the process. This allows the parents and the child to get to know these new faces and to develop first relationships and contacts in the school.
3. As parents get to know the new people they are reassured that they will be able to look after their child safely.
4. The parent is encouraged to remain involved in the child's life outside of the home.
5. The new environment is prepared and tailored to the individual needs of the child, e.g. Makaton symbols, visual timeline, equipment and adaptations.
6. There is an agreement that anyone involved with the child can call a review at any point and parents can meet up with professionals in school whenever they need to.
7. Parents have an understanding of the foundation stage curriculum and of how their child's skills can be mapped directly onto it. (The foundation stage curriculum is for children from birth to the end of the child's reception year in school, i.e. the academic year in which they are 5.)

In order for TAC to be successful at any level we have worked hard to achieve true collaboration. This has only been made possible by agreeing priorities across all agencies, investing in workforce development, and designing systems for documentation and the sharing of information. Therefore to make the transition element of TAC as successful as possible we have ensured the following:

1. Local strategic planning that incorporates such national guidelines and recommendations as Aiming High and Every Child Matters. This includes The Multi-Agency Strategy, Disability Access in Education Strategy and its Physical

Disability Subgroup and the multi-agency transition panel.

2. Staff training programme with competency levels.
3. Opportunities for staff to learn from others through 'on-the-job' team working.
4. Giving staff deep, embedded knowledge of all professional roles and responsibilities across the agencies and of how to access services effectively.
5. Building formal and informal support networks to give staff and families help and advice.
6. Agreeing a work force structure that allows therapists and nurses to continue their involvement with the child and family without the demarcation of teams into 'pre-school' and 'school-age' services.
7. Designing shared transition paperwork that includes the FSP plus a written transition plan. In the transition process TAC members begin to use education paperwork for target-setting to ensure staff in the new setting understand how the Family Service Plan and Individual Education Plan (IEP) blend together.

John's story

John has received services via TAC since he was 8 months old. He was seen fortnightly by the Early Years Team, regularly by the occupational therapy service and physiotherapy service and also attended a group at one of the clinics where he saw the speech and language therapist as part of the group remit. TAC reviews, co-ordinated by John's TAC key worker, were held regularly (with gaps of between 3 and 6 months) to set new steps and monitor progress. When John was two and a half years old the transition review was held with discussions around local schools and their accessibility. Grandparents were very supportive of mum in this process.

The local primary school was identified by mum as her preferred option. The occupational therapist and early years teacher made a visit to the school in April to identify any adaptations that were needed. This would give time for any building work to be carried out over the summer holiday. The head teacher was present as was a member of the asset management team, which has responsibility for overseeing adaptations needed to the physical environment. John's new

head teacher made a visit to the private day nursery to meet and get to know John. Staff in this setting had been part of the original TAC team.

Adaptations to the toilet area in the nursery were recommended, to include the provision of a height adjustable changing bed. This was phase one of a programme of work that would need to be carried out at the school over the next few years as John moved through each year group. A seating assessment was also carried out at this time by the occupational therapist to update the seating system at home and to inform the accessibility strategy of John's seating needs in school. Building work and adaptations to the toilet area in nursery were completed in the autumn term ready for John to commence in January. The accessibility strategy group agreed funding for John's chair, which was duly ordered but had not arrived as John was due to start nursery. As school were aware of John's physical needs they recruited a Learning Support Assistant (LSA) to take up post when John started school.

John was referred to the Outreach Service for children with a physical disability in order that a risk assessment could be completed with regard to moving and handling and safe systems of working. 'Outreach @ Lindens' is a service for pupils with physical disabilities that offers support to individual schools. It has a multi-disciplinary approach. The support is to enable the child to access the curriculum by:

- providing training for support staff
- enhancing disability awareness
- helping with target setting and IEP writing
- addressing access issues
- providing moving and handling training
- doing risk assessments
- designing safe systems of work

John's LSA also went on the 'Centaur' training to enable her to carry out these safe systems of working with an understanding of the principles of safe moving and handling. Walsall Education has a service level agreement with Centaur who provide training and annual updates regarding handling people with special needs in education.

The Outreach Service was able to support by loaning a chair in the short term. In addition, they gave help and advice to nursery staff with regard to differentiating the curriculum so that the work offered to John was at his level of ability while remaining within the realm of the curriculum. The Outreach Service also advised on moving and handling issues and safe systems of work. Outreach loaned a Chailey Toilet Seat when it became evident that John was ready to commence toilet training. This supported mum's efforts at home, even though John was only in nursery for half days. The Outreach Service is now supporting John's learning with the use of a computer and a touch screen monitor. This service is currently in the process of assessing his ICT skills to look for a suitable programme to support his control of the mouse and the recording of his work in the future.

John's learning needs have been supported whilst at the Foundation Stage by the teacher from the Early Years Team. His communication needs in the school environment were identified with the special needs co-ordinator (SENCO), a designated member of the school staff whose responsibility it is to ensure children with special educational needs have their needs met. Through discussion the priority interventions for speech and language therapy were identified from a menu of options. It was decided that John would benefit from a programme of language activities that could be carried out on a daily basis by the LSA. Parents also received a copy of all the information given to school.

John continues to receive regular occupational therapy, physiotherapy and speech and language therapy. This includes advice to school on such strategies as photographs of new classrooms and a visual timeline to ease transition, and specific activities to promote motor and language skills. In addition the LSA has received demonstrations on how to carry out all programmes. The suggestion was made that peers could join John during his sessions to encourage teamwork and to provide him with a positive language model. Where possible all activities are included in the day-to-day routine of the school programme.

The LSA is empowered to make direct contact with the therapists once new activities are required or if adaptations to the programme are needed. She can also contact the Outreach Service as required and has been able to ask for

support from the Early Years Team whilst John has been in the foundation stage. A visit was carried out in May 2007 to check accessibility issues in preparation for John's move to reception.

John is nearing the end of his reception year now. A further visit has been made by the occupational therapist and asset management to set in motion the plans for phase 2 of the toilet-management provision in preparation for September 2008 when he moves to year 1 and it is no longer possible for him to use the toilet provision in nursery.

Conclusion

On an individual basis transition to nursery and subsequently into reception is generally well managed within Walsall for children with complex needs, including both those with physical difficulties and those with social and communication difficulties. Questions can be answered quickly and difficult issues resolved as they crop up through the use of the TAC transition process. This ensures that as the key worker withdraws the SENCO has the confidence to continue to manage the co-ordination of the child's needs. Whilst the TAC process changes once the child enters the foundation stage, with reviews being managed by the special educational needs co-ordinator in the educational setting, and the TAC key worker withdrawing, the general principles of TAC remain with centralised co-ordination. Longer term, our ideal would be for the model to be rolled out to all children and young people from birth to 19 years. This is currently supported by the robust training programme in place for children's centre staff, which will be taken into extended schools in the future phase.