

Guidance for Individuals Requesting Occupational Therapy for Children and Young People:

The role of the children's occupational therapist is to assess, evaluate, advise and/or provide intervention for children whose participation in activities of daily living (including self-care, play, leisure and school) is **significantly** compromised by physical, motor, sensory or learning difficulties.

Occupational therapy is a specialist service, we would expect that parents and school have tried to resolve the occupational difficulties before requesting the assessment of an occupational therapist.

Referrals should be completed on the designated occupational therapy referral form, which can be accessed from the ABUHB website. Requests to the service will be **triaged centrally** to determine the level of risk to the child/ young person and family, and whether occupational therapy has the potential to reduce this risk.

Your request for occupational therapy must include:

- A. Clear indication of the **everyday activities that are of concern** to the child/ young person, family or person making the request (please avoid general terms such as 'fine motor skills'). The request should include the **impact of these issues** on the child's participation in everyday activities and independence at home, in school and in the wider community.
- B. Evidence of the **developmental level** of the child/young person in relation to the areas of concern. This should consider whether the child/young person's skills are out of line with their overall level of development.
- C. The **anticipated benefits of occupational therapy for the child or family**. The triage process will review whether an occupational therapist is the most appropriate professional to address the risks identified
- D. Clear description on the **actions already taken** to address these concerns and the outcomes. Possible sources of supporting information would include IDP's, developmental and educational reports, all of which must be recent and relevant to the concerns being raised.
- E. Evidence of discussions with the child and/or family to demonstrate they are **motivated to make changes** to address these concerns.
- F. Details of any **previous involvement by an occupational therapist** (health or social services)

Key Points:

- Requests that do not include all necessary information, as outlined above, cannot be triaged by the occupational therapy service
- Children whose occupational therapy needs centre on the provision of equipment or home adaptation should be directed to the occupational therapist based within the relevant social services Children with Disabilities Team
- The outcome of the triage process will be communicated with the person requesting occupational therapy
- If you are considering referrals to more than one service please complete an ISCAN form.
- **Where occupational goals are identified, there will be an expectation that the family and/or school will work in partnership with the OT in the delivery of advice and/or a time-limited programme. Without this commitment from the family and/or school, occupational therapy intervention will not be offered**

Please feel free to contact the Team Lead occupational therapist at your local children's centre should you wish to discuss your potential request for occupational therapy.

Flowchart demonstrating occupational therapy process following triage

