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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | It is predicted that this plan will allow the service to establish a sustainable waiting list within 26 weeks of start of the project. | | | |  | | --- | | Icon  Description automatically generated | | |

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| |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **Our Key Principles** | | | |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | Icon  Description automatically generated | | Icon  Description automatically generated |  |  | | --- | | Icon  Description automatically generated | | |  |  | | --- | --- | | |  | | --- | | These are the principles that have informed this plan   * Responses should be consistent and driven by clinical need * Communications with service users will be open and honest, using clear and simple language * Self-care resources can be used to effectively empower service users to self-care and/or identify that they need further support * Co-production remains central to our ethos * Any digital tools or access points developed will have a clearly signposted alternative for those with limited or no access to the internet * The approach taken should support the development of the Balanced System Framework® and promote the development and use of community capacity to complement a specialist SaLT offer. | | | |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **Children attending school or early year setting** Video appointments will be arranged with schools/settings to discuss all children in their cohort who are currently on the waiting list.   The level of need will be identified for each child and young person and they will be offered an appropriate level of service for that need.   **Children referred by an individual (professional or parent/carer), and who do not currently attend a school or early years setting,** Parents/carers of these children will be offered a 30-minute video appointment to identify the child’s level of need and agree a plan of support. | | | |  | | --- | | Graphical user interface, application  Description automatically generated | | |

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| |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | All children and young people will be offered support through new self-care and training resources on Just One Norfolk and additional therapist resource within Just One Number for advice and support.    Support packages offered will be appropriate to the child or young person’s specific needs and will be offered at the following levels:   * Universal: single contact for advice, signposting and identification of wider support network * Targeted: triage appointment followed by 1-2 coaching sessions * Specialist: triage appointment, followed by full assessment and 6-8 1:1 sessions   We will be operating a throughput model with the majority of children being discharged once the agreed episode of care has been completed. This makes it vital that there is a timely re-referral mechanism for families and professionals who need to return to the service for further support. | | | |
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| |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | * All new referrals into the service will be managed through the same process as the backlog to support consistency, timeliness and effective clinical decision making. * Direct activity to address the backlog will commence in from 18th October 2021 after a period of preparation activity * All EHCP provision will be reviewed as part of ongoing care and new outcomes agreed within the context of the Balanced System Framework®. * EHCP provision will only be provided if we are in agreement with the clinical recommendations stipulated. If we are not in agreement the local authority will source this provision from elsewhere within the wider system I.e. independent practitioners. * Ordinarily the service will only provide EHCP advice/assessment for children and young people already known and being supported by the service. If the service isn’t involved in a child’s care their current setting is better placed to advise on their needs and access the local offer accordingly. * Planned work with Better Communications to develop the Balanced System for Norfolk and Waveney will indicate further release of capacity by May 2022. * Service redesign will take place in collaboration with partners during this time to develop a long term sustainable service provision. | | | |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  | | --- | | Text  Description automatically generated | | |  |  | | --- | --- | | |  | | --- | | * Weekly reviews of project progress will be held by the service * A monthly report for commissioners to identify any potential risks or concerns. * Robust monitoring of response to triage appointments and of the proportions of level of need identified. This will support us to review the resource requirements and pace of work. * Monthly internal review meetings to monitor impact and changes relating to ECHP process and provision. * Monthly reviews of project progress will be held with Better Communications to inform and support the implementation of the Balanced System Framework® by May 2022 for Norfolk and Waveney. | | | |

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