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## **Parent Network Meeting – Community Health Services**

**Cambridge, 20 June 2016 (evening)**

**Ross Street Community Centre, Cambridge**

### **Attendees**

Parents:

Service Providers: Diane Gypps, Elizabeth Locke (from 7pm), Siobhan Macbean, Nicola Mclean, Jacqui Taylor, Helen Lindsay, Aoiffe Donnellan, Leah Moors, Michelle Best, Kate Dunne

Pinpoint: Eve Redgrave, Lenja Bell

### **Overview**

The topic for these network meetings was improving community health services. Professionals from Cambridgeshire community services (CCS) presented on the new service model 'The Flower' and answered questions on their services and how to access them. Parents worked in groups with providers from services including local authority representatives from E and P (Enhanced and Preventative services) social care, and healthwatch as well as CCS to discuss the new model for services, information on Global Development Delay and development milestones and the current sleep service, including individual sleep issues. After the group work, each provider fed back the key points which had been captured on flip chart paper and are recorded below. There was then a mini training session around sensory processing run by Kate Dunne, Occupational Therapist that included information about the service, interventions as well as a Q and A session. The parents had a chance to talk individually with each other and service providers after the session.

### **The Flower**

- Child or young person should be at the centre of the diagram
- When a concern arises at school, the teacher should recognise it and talk to the SENCo who can then talk to the parent and signpost / refer, don't just leave it
- CCS needs a stronger link with education and LA
- There should be 'no wrong door' for access – whoever notices a potential problem, should know what to do about it, where to signpost, etc.
- Good to have one professional that knows your child – huge variation in professionals e.g. GP's
- Take a friend with you to important meetings

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- The Autism Strategy Group should take into account learning disabilities with autism
- Feedback to SEND P&C: everyone should work to notice issues and do something about it e.g. 'noticing and acting'
- Need better information for parents, steps to take when there's a problem
- Flower: what's the significance of the numbers? Is there an order?

### **Development skills leaflet**

Needed:

- Average age brackets for stages of development
- Speech and language ideas
- Activities and strategies in different areas of development

Who is the target group?

- Not clear
- For all parents or just those with concerns?

Sources:

- School
- GP practice (if a parent has concerns about their child)
- Website/google
- Univeral
- Children's centres/playgroups
- Health visitors
- Red book

### **Sleep**

Service for ages 0 – 19

- Ages 0 – 5 Health visiting services (Future) 0 - 8
- Ages 8 – 19 School nurses
- Access to school nurses fails if education not engaged.
- Education does not see the child as a whole.
- The route into health services: School nurses, Sleep specialists, Enuresis service.
- It is felt that there is a gap in the service regarding sleep and a lack of awareness for school age children and families.
- Forms of information: Online, new registration to school.

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## Next Steps

The feedback from the group work will be collected and analysed across the five network meetings and shared with Cambridgeshire Community Services, Social care and Education services, including the Health Joint Commissioning Board. Our new 'Are You Listening to Parents' feedback form will be used to highlight the issues around Post 16 healthcare and lack of transition planning. Pinpoint will update parents on how this work is taken forward.

## Sensory Processing Mini Training Notes

We all have sensory processing, problems occur when there is an issue with that processing. We have the usual 5 senses but there are also vestibular senses (That effect sea sickness etc) and Proprioceptive senses (These effect joints and muscles and our awareness of our body position etc) For an action like going punting for example this will use all our senses just to get in the boat. Sense of touch is very important, discriminative system (Which is part of this) tells you what you are touching. Children with additional needs have trouble with this. Things like hugs can be painful, there is a fine line between pain and what is acceptable and our children can have a fear of being touched due to this. Sensory Processing Disorder is not a diagnosable condition in Cambridgeshire, it is labelled as Sensory Processing issues or as part of Autistic Spectrum Disorder. Sensory processing can change over days and weeks as well. Some children will experience things on a normal level of arousal, some will have low arousal (They won't notice if they hurt themselves) or high arousal (Sensation of hair falling on their face can be painful) Children can move between all these levels. A useful video to explain high arousal is [https://www.youtube.com/watch?v=Lr4\\_dOorquQ](https://www.youtube.com/watch?v=Lr4_dOorquQ)

For times like this noise cancelling ear defenders can help. Fledglings [http://www.fledglings.org.uk/docs/pdf/brochure\\_online.pdf](http://www.fledglings.org.uk/docs/pdf/brochure_online.pdf) have equipment for special needs as well as Sensory direct [http://www.sensorydirect.com/sense/sensory-dens.html?gclid=CjwKEAjwn7e8BRCUqZiP\\_vnrtBkSJAC\\_lp4HRR895mem2JFe7bQldRJCXgbEKzwsZnqM\\_CZ8RqAyOBoCpjfw\\_wcB](http://www.sensorydirect.com/sense/sensory-dens.html?gclid=CjwKEAjwn7e8BRCUqZiP_vnrtBkSJAC_lp4HRR895mem2JFe7bQldRJCXgbEKzwsZnqM_CZ8RqAyOBoCpjfw_wcB)

Please click on the link below to open the power point.

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## Welcome and Introduction

- My Name?
- What might you get from today's talk?

