

Children's Community Learning Disabilities Nursing Team -behaviour support

Referrals **MUST** be completed using the Behaviour Support Referral form and attaching relevant copies of letters/assessments. Please ensure all areas are completed with reference to past intervention if relevant and expected outcome of referral. Any incomplete referrals or referrals made by other means will be returned to the referrers.

Referrals should be sent to ldnursingteam@suffolk.gov.uk or send them in the post to:-

Community LD service-behaviour support, Allington Clinic, 427 Woodbridge Road, Ipswich. IP4 4ER

Referrals are only accepted from Health & Social care professionals (with social care line manager approval).

Eligibility Criteria:

The team only accepts referrals for Children and Young People (under 18 years) who meet **ALL** the following criteria;

- Have a diagnosis of significant learning disability (established **IQ below 70**). Evidence of this may be requested.
- Have an identified specific behaviour need related to health presentation rather than significantly limited parenting skills and concerns around child neglect.
- The behaviour is **exhibited at home** (schools must follow their own internal pathways for behaviour guidance).
- Are GP registered within the Suffolk boundaries (Waveney excluded as served by Norfolk Suffolk Foundation Trust), despite where they may attend an educational facility.

Referrals may be not accepted if one or more of the following applies:

- Non engagement of the family, the behaviour work is time-limited and requires the full engagement of the parents/carers. Families must be made aware of the level of involvement which will be required from them.
- No consent, this should be obtained from the child/young person (if competent) or parent/carer.
- No evidence of first steps of intervention being offered by the School Nursing Alternate Provision (SNAP) /School Nursing team where appropriate.
- Duplication of a service such as with the SNAP/School Nursing team /ADHD Nurses/Psychology/Autism Project/LDCAMHs/specialist commissioned packages of support e.g. using Inroads for intensive behaviour support.
- Behaviours outlined being as a result of psychiatric presentation or requiring the input of clinical child psychology for specific phobias or explicit sexualised and offending behaviours.
- Repeat referrals for the same need.

An assessment of need will be completed with 4 weeks of referral receipt. If at this point it is shown that the referral is inappropriate the referral will be closed.

A client can be re-referred should this be required, however the Team may take the decision to refuse further intervention if felt to be outside the scope of service delivery, where either clinical psychology/psychiatry etc. is required. Refusal is likely if prior intervention has received limited success due to the child's parents/carers inability to engage effectively with the process and implement recommendations.

We work extremely closely with our colleagues in Social and Education services. Clients will be offered initially up to 12 sessions of input with a review to see if a further number of sessions are indicated. A total of 20 sessions can be offered before closure is required.

Areas of Behaviour management considered (this list is not exhaustive):

- Challenging behaviours: self-injury, aggression and harm to others, destruction of property, impulsivity, screaming, swearing, spitting, throwing, climbing, shredding, non-compliance, absconding, faecal smearing, repetitive language and behaviour etc.
- Self-care behaviours: toilet training (bladder and bowels), refusal to use toilet facilities across different environments, personal hygiene and management of menstruation etc.
- Daily living behaviours: mealtime management, sleep programmes, co-operating with routine etc.
- Sexual behaviour: maturation awareness, self-esteem, masturbation and hygiene, rights and responsibilities.