



Building
stronger
families
150 years

Nottinghamshire Small Steps Service

Menu of Interventions

Children should be managed in line with the Nottingham and Nottinghamshire and Referral Guidance for paediatric outpatient care from Primary Care, which can be found on the Mid Notts Pathway Website, F12 or Nottingham Care Navigator in the City.

In line with this document, developmental regression or significant developmental delay warrants a direct referral by the GP without the need for additional information gathering.

If you are concerned about a child's Mental and Emotional health, a referral to CAMHS should be considered.

Please note: Escalation in concerning behaviours and risk of exclusions are not a red flag for direct referral to GP for onward referral to Paediatricians.

Referrals to the Small Steps Service (Small Steps):

- Children or young people (0-18) that display behaviours that causes concern or challenge
- Children or young person (0-18) where there is no formal diagnosis of ASD/ADHD but who display behaviours that may be indicative or characteristic of these conditions
- Children and young person (0-18) who have been diagnosed as having ASD/ADHD and where a need for support has been identified in line with the criteria of the Small Steps Service (see criteria for each area of support outlined in this document)
 - Children or young people (0-18) who are registered with a Nottinghamshire GP within Mansfield and Ashfield, Notts North East, Notts West, Rushcliffe, Newark and Sherwood CCG area **(excluding Bassetlaw)**

Making the referral

Please ensure:

1. Parental written consent is gained and is evident on the referral form. Child/young persons NHS number and GP practice is also evident on the referral form.
 2. Evidence of Tier1 intervention completed. This can include through education, healthy family team, family service, children's centres etc.
 3. Clearly state what service/intervention you are requiring (info on each intervention is outlined in this document)
- Completion of the three points above will ensure the most appropriate service is identified and a timelier allocation.

How to refer to the Small Steps Service for behaviours indicative of ASD/ADHD:

Healthy Family Team	Getting to Know Me Form
Children's Centres	Getting to Know Me Form
Education Settings	Getting to Know Me Form
Early Help Unit	EHAF
Paediatricians	Letter/Getting to Know Me Form
Other	Getting to Know Me Form
Please send all completed Referral forms to Nottinghamshiresmallsteps@family-action.org.uk	

If you have not heard anything regarding your referral after 12 weeks, then please contact the Small Steps Team on 01623 404345

The brief description below will help you identify the correct service for the parents/ children with whom you are working. Please check the full core offer description to ensure that the appropriate service is requested. This will enable a swifter response to referrals.

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Post diagnosis support	Core Offer 1: Parent Drop In Sessions (Provides support, guidance and signposting)	6-7
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1-1 support will be offered to families where it is evident that they are unable to attend a group programme. This will be decided by the Small Steps Service.

Aim of the Service
Families affected by concerning behaviour/ASD/ADHD are supported to improve wellbeing and to better understand and manage their child’s behaviour positively.
Small Steps Menu of Interventions

Offer 1: Parent Drop In Sessions	
Output	To provide: <ul style="list-style-type: none"> • A range of support groups and informal networks for parents and their children in community settings but particularly schools • Tailored information and signposting to other local resources including support to access where needed • To work in partnership with local authority, health, social care, education settings and voluntary sector providers
Delivery team	<ul style="list-style-type: none"> • Small Steps Group Facilitators • Volunteers
Delivery Model	Group – peer support Group size depends on room setting
Frequency and Duration	1 per month in each CCG area Length of session: 2 hours
Availability	Available Countywide
Target group/referral criteria	Parents/ carers of: <ul style="list-style-type: none"> • Children with Concerning behaviour or a diagnosis or ASD/ADHD • Who have limited social support networks • Who may benefit from peer support • Who may benefit from gaining information about relevant local and national support/services • No diagnosis of ASD/ADHD needed.
Description	Group – peer support Group size depends on room setting
Referral Process	No referral needed to access Drop in sessions.
Assessment and tracking tools	Evaluation form is completed by the parent as they leave the session which captures feelings and thoughts and whether the parent has been in receipt of any other Small Steps intervention.
Outcomes (linked to KPI’S)	To improve: <ul style="list-style-type: none"> • Mental wellbeing of participant parents and children

	<ul style="list-style-type: none">• Social networks and reduce social isolation of participant parents and children• Self - esteem and future employment opportunities of volunteer befrienders and participants• Support parents/carers to manage their child's behaviour positively• Increase knowledge for parent/carer of support available
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Offer 3: Workshops

Output	<ul style="list-style-type: none"> • To deliver evidence based parenting programmes appropriate to the level of need • To provide tailored information and signposting to other local resources, including support to access where needed • To provide a range of support groups and informal networks for parents and their children in community settings but particularly schools
Delivery team	<ul style="list-style-type: none"> • Family Support Workers • Group Facilitators • Volunteers (peer support, group facilitation support)
Delivery Model	<p>Group – Parent/carer learning Group size of up to 15 participants</p>
Frequency and Duration	<p>1 session per week over 4 weeks Length of session: 2 hours Delivered monthly</p>
Availability	Available countywide
Target group/referral criteria	<p>Families that:</p> <ul style="list-style-type: none"> • Have completed tier 1 intervention • Children have concerning behaviours or diagnosis or ASD/ADHD • Do not require 1-1 Family Support at point of referral • No diagnosis of ASD/ADHD needed.
Description	<p>Families meeting the referral criteria are invited to attend 4 workshop sessions. The main aspects of the programmes are:</p> <ul style="list-style-type: none"> • Introduction to concerning behaviours, ADHD and Autism • Routines • Education • Parental mental-wellbeing • Difficult times of the day • Sleep • Toileting • Communication • Self-esteem • Emotional health • Rewards and consequences • Brain development • 123 Magic • NVR • Public outings.

	<p>Additional outcomes include: Peer support and network building with other parents Sharing of experiences Receipt of a certificate on completion</p>
Referral Process	<ol style="list-style-type: none"> 1. Complete Getting to Know Me form. 2. Referral letter from Paediatricians accepted 3. Completion of EHAF forms (Early Help Unit Only). <ul style="list-style-type: none"> • No self-referrals accepted.
Assessment and tracking tools	<ul style="list-style-type: none"> • Progress tracker completed at the beginning and end of the workshop • WEMBS is measured on the progress tracker at the beginning and end. • Evaluation postcards completed by parents to identify any ongoing needs • Staff evaluations
Outcomes (linked to KPI'S)	<ul style="list-style-type: none"> • Reduction in inappropriate referrals to paediatricians and the number of follow up appointments • Improvement on mental wellbeing of participant parents and children • Improve parent's understanding of their child's behaviour • Parents report they are able to manage their child's behaviour positively • Improvement on social networks and reduction on social isolation of participant parents and children • Improvement on the relationships between participant parents and children • Increased self - esteem and future employment opportunities of volunteer befrienders and participants

Offer 4: Specialist Practitioner

Output	<p>To provide:</p> <ul style="list-style-type: none"> • Tailored information and signposting to other local resources, including support to access where needed • Specialist Practitioner input into the assessment process with relevant services • Advice to schools and tier 1 universal services • Coordinating information with families where behaviour is indicative of ASD/ADHD and a referral to tier 3 maybe needed e.g. CAMHS or Paediatrician • To work in partnership with local authority, health, social care, education settings and voluntary sector providers
Delivery team	<ul style="list-style-type: none"> • Specialist Practitioner • Senior Practitioner
Delivery Model	<p>1-1 liaison between Specialist Practitioner/Senior Practitioner with family and other appropriate services, in preparation for onward referral. Delivered within the family's home setting or in a community setting.</p> <p>Liaison with Paediatricians Liaison with CAMHS</p>
Frequency and Duration	<p>1 introductory visit followed by weekly/fortnightly contact, either home visit, telephone contact or meeting within the community depending on the need of the family.</p> <p>1-2 hours per visit depending on the family's needs.</p> <p>Monthly liaison with Paediatricians/CAMHS</p>
Availability	Available Countywide. Behaviours indicative of ASD/ADHD
Target group/referral criteria	<ul style="list-style-type: none"> • Families whose children have behaviours indicative of ASD/ADHD and have completed tier 1 intervention. • Tier 1 intervention can be ongoing alongside tier 2 intervention from Small Steps • Families whose children have concerning behaviours but do not meet the criteria for tier 3 intervention. • No diagnosis of ASD/ADHD
Description	<p>Specialist Practitioner/Senior Practitioner support families to access specialist neurodevelopmental assessment if behavioural needs persist and it is deemed clinically appropriate by a specialist practitioner including support with referral processes, coordination of information gathering and recording of observations.</p> <p>Specialist Practitioner role:</p>

	<ul style="list-style-type: none"> • Supports families to understand the Concerning Behaviour Pathway process. • Ensures all necessary interventions have taken place and all reports and evidence have been completed by relevant professionals.
Referral Process	<ol style="list-style-type: none"> 1. Completion of the Getting to know me form 2. Completions of EHAF form (Early Help Unit Only). 3. Referral letter from Paediatricians accepted. 4. Referrals through Small Steps following a tier 2 intervention. (workshop) <ul style="list-style-type: none"> • No self-referrals accepted
Assessment and tracking tools	<ul style="list-style-type: none"> • Progress tracker completed at the beginning and end of the 1-1 support • WEMBS is measured on the progress tracker at the beginning and end. • End of support review completed on progress tracker
Outcomes (linked to KPI'S)	<ul style="list-style-type: none"> • To reduce inappropriate referrals to paediatricians and reduce the number of follow up appointments <p>To Improve:</p> <ul style="list-style-type: none"> • The mental health and wellbeing of participant parents and children • parent's understanding of their child's behaviour • parents/carers to manage their child's behaviour positively • social networks and reduce social isolation of participant parents and children • relationships between participant parents and children • To increase self - esteem and future employment opportunities of volunteer befrienders and participants

Offer 5: New Forest Parenting Programme

Output	<ul style="list-style-type: none"> • To work in partnership with local authority, health, social care, education settings and voluntary sector providers • To deliver evidence-based parenting programmes appropriate to the level of need • To provide tailored information and signposting to other local resources, including support to access where needed
Delivery team	<ul style="list-style-type: none"> • Family Support Worker • Volunteer (with support of Family Support Worker)
Delivery Model	Group – Parent/carer learning Group size of up to 15 participants
Frequency and Duration	1 session per week over 6 weeks Length of session: 2.5 hours Delivered termly.
Availability	Available Countywide. Delivered Termly.
Target group/referral criteria	<ul style="list-style-type: none"> • Families whose child/ren are aged 3-11 years and • Diagnosis of ADHD/behaviours indicative
Description	<p>New Forest is an evidence-based parenting programme. The topics covered during the programme are:</p> <ul style="list-style-type: none"> • What is ADHD • Sensory issues • Communication • Understanding behaviour • Behaviour strategies • Play • Routines • Communication • Social stories • Mindfulness • Boundaries • Feelings
Referral Process	<ol style="list-style-type: none"> 1. Completion of the Getting to know me form 2. Completions of EHAF form (Early Help Unit Only). 3. Referral letter from Paediatricians accepted. 4. Referrals through Small Steps following a tier 2 intervention. (workshop) <ul style="list-style-type: none"> • No self-referrals accepted
Assessment and tracking tools	<ul style="list-style-type: none"> • Progress tracker completed at the beginning and end of the program • WEMBS is measured on the progress tracker at the beginning and end. • End of support review completed on progress tracker

<p>Outcomes (linked to KPI'S)</p>	<p>To improve:</p> <ul style="list-style-type: none"> • parent's understanding of their child's behaviour • parents/carers ability to manage their child's behaviour positively • social networks and reduce social isolation of participant parents and children • relationships between participant parents and children • mental health and wellbeing of participant parents and children • To reduce inappropriate referrals to paediatricians and reduce the number of follow up appointments • To increase self - esteem and future employment opportunities of volunteer befrienders and participants
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Offer 6: Cygnet Parenting Programme

Output	<ul style="list-style-type: none"> To provide parents with strategies to manage challenging behaviours To work in partnership with local authority, health, social care, education settings and voluntary sector providers To deliver evidence-based parenting programmes appropriate to the level of need To provide tailored information and signposting to other local resources, including support to access where needed To provide a range of support groups and informal networks for parents and their children in community settings but particularly schools
Delivery team	<ul style="list-style-type: none"> Family Support Worker Volunteer (supported by Family Support Worker)
Delivery Model	<p>Group – Parent/carer learning Group size of up to 15 participants</p>
Frequency and Duration	<p>1 session per week over 7 weeks 4 additional sessions available at family's request Length of session: 2.5 hours Delivered Termly across County</p>
Availability	Available County wide. Delivered Termly
Target group/referral criteria	<ul style="list-style-type: none"> Families whose child/ren are aged 5-18 and have a diagnosis of ASD
Description	<p>Cygnet is an evidence-based parenting programme. The topics covered during the programme are:</p> <ul style="list-style-type: none"> Overview of what Autism is Autism and diagnosis Sensory issues Communication Understanding behaviour Supporting behaviour Parents' choice (parents choose what they would like to discuss) <p>4 additional sessions are offered at parent's request, these include:</p> <ul style="list-style-type: none"> Healthy relationships Puberty Sexual health Catch up session (a date is agreed by the group for them to come back together as a social occasion)
Referral Process	<ol style="list-style-type: none"> Completion of the Getting to know me form Completions of EHAF form (Early Help Unit Only).

	<ol style="list-style-type: none"> 3. Referral letter from Paediatricians accepted. 4. Referrals through Small Steps following a tier 2 intervention. (workshop) <ul style="list-style-type: none"> • No self-referrals accepted
Assessment and tracking tools	<ul style="list-style-type: none"> • Progress tracker completed at the beginning and end of the programme • WEMBS is measured on the progress tracker at the beginning and end. • End of support review completed on progress tracker
Outcomes (linked to KPI'S)	<p>To improve:</p> <ul style="list-style-type: none"> • parent's understanding of their child's behaviour • parents/carers ability to manage their child's behaviour positively • social networks and reduce social isolation of participant parents and children • relationships between participant parents and children • mental health and wellbeing of participant parents and children • To reduce inappropriate referrals to paediatricians and reduce the number of follow up appointments • To increase self - esteem and future employment opportunities of volunteer befrienders and participants

Output	<ul style="list-style-type: none"> • To deliver evidence-based parenting programmes appropriate to the level of need • To work in partnership with local authority, health, social care, education settings and voluntary sector providers • To provide a range of support groups and informal networks for parents and their children in community settings but particularly schools • To provide tailored information and signposting to other local resources, including support to access where needed.
Delivery team	<ul style="list-style-type: none"> • Family Support Worker • Volunteers (peer support)
Delivery Model	Group – Parent/carer learning Group size of up to 15 participants
Frequency and Duration	3x2 hour sessions. Delivered termly
Availability	Available Countywide. 3 sessions per year. Diagnosis of ASD/ADHD
Target group/referral criteria	Families whose children have: <ul style="list-style-type: none"> • Behaviours indicative of ASD/ADHD and have completed tier 1 intervention. • Diagnosis of ASD/ADHD and tier 1 intervention has been completed • An identified need for support around toileting
Description	2 hour transition programme for families where this need has been identified from referrers. Sessions are adapted to meet parent/carers needs. Parents are presented with a certificate at the end of the session.
Referral Process	<ol style="list-style-type: none"> 1. Completion of the Getting to know me form 2. Completions of EHAF form (Early Help Unit Only). 3. Referral letter from Paediatricians accepted. 4. Referrals through Small Steps following a tier 2 intervention. (workshop) <ul style="list-style-type: none"> • No self-referrals accepted
Assessment and tracking tools	<ul style="list-style-type: none"> • Progress tracker completed at the beginning of the programme and then at the end. • WEMBS is measured on the progress tracker at the beginning and end. • End of support review completed on progress tracker
Outcomes (linked to KPI'S)	To improve: <ul style="list-style-type: none"> • parent's understanding of their child's behaviour • parents/carers ability to manage their child's behaviour positively

	<ul style="list-style-type: none">• social networks and reduce social isolation of participant parents and children• relationships between participant parents and children• mental health and wellbeing of participant parents and children
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Offer 8: Volunteer Befriender

Output	<ul style="list-style-type: none"> • Volunteer befrienders provide support to participant parents • To work in partnership with local authority, health, social care, education settings and voluntary sector providers • To provide a range of support groups and informal networks for parents and their children in community settings but particularly schools
Delivery team	<ul style="list-style-type: none"> • Volunteer Coordinator • Volunteer befrienders
Delivery Model	Group settings 1-1 peer support for families
Frequency and Duration	As and when needed
Availability	Various depending on Volunteer availability and family's needs.
Target group/referral criteria	<ul style="list-style-type: none"> • Families whose children have a diagnosis of ADHD/ASD
Description	<p>Volunteer befrienders:</p> <ul style="list-style-type: none"> • Offer peer support to families who have completed an intervention within the Small Steps service and the need for ongoing support has been identified. • Provide support within the family home or a community setting. • Focuses on supporting families through listening, encouraging and empowering families to develop self-care and coping strategies. • Can support parents in attending groups, appointments and meetings. • Can support parents with attendance at drop-in groups and parenting programmes as peer support for families.
Referral Process	<ol style="list-style-type: none"> 1. Internal referral from Small Steps following completion of a Small Steps intervention. 2. Diagnosis of ASD/ADHD needed.
Assessment and tracking tools	<ul style="list-style-type: none"> • WEMBS is completed with Volunteers at the beginning of training and completed again at the end of induction
Outcomes (linked to KPI'S)	<p>To improve:</p> <ul style="list-style-type: none"> • parent's understanding of their child's behaviour • parents/carers ability to manage their child's behaviour positively • social networks and reduce social isolation of participant parents and children • relationships between participant parents and children • mental health and wellbeing of participant parents and children

	<ul style="list-style-type: none"> • To reduce inappropriate referrals to paediatricians and reduce the number of follow up appointments • To increase self - esteem and future employment opportunities of volunteer befrienders and participants
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Offer 9: Sleep programme	
Output	<ul style="list-style-type: none"> • To provide parents with strategies to manage challenging behaviours

	<ul style="list-style-type: none"> • To work in partnership with local authority, health, social care, education settings and voluntary sector providers • To deliver evidence-based parenting programmes appropriate to the level of need • To provide tailored information and signposting to other local resources, including support to access where needed • To provide a range of support groups and informal networks for parents and their children in community settings but particularly schools • To work alongside NICE guidelines
Delivery team	<ul style="list-style-type: none"> • Family Support Workers • Volunteer (with support of Family Support Worker)
Delivery Model	Group – Parent/carer learning Group size of up to 15 participants
Frequency and Duration	1 session per week over 5 weeks Length of session: 2 hours Delivered twice per year across County
Availability	Available Countywide Delivered twice per year.
Target group/referral criteria	<ul style="list-style-type: none"> • Families whose child/ren have a diagnosis of ASD • Families whose child/ren have behaviours indicative of ASD/ADHD
Description	<p>Sleep programme will be offered to families over a 5 week period with sessions running for 2 hours. The topics covered during the programme:</p> <ul style="list-style-type: none"> • Sleep Cycle/Patterns • Sleep Foods • Sleep Diary – promoting positive routine • Melatonin hormone • Sleep Environment

	<ul style="list-style-type: none"> Supporting strategies to implement routine. <p>Sessions can be adapted to meet parent/carers needs. Parents are presented with a certificate at the end of the session.</p>
Referral Process	<ol style="list-style-type: none"> Completion of the Getting to know me form Completions of EHAF form (Early Help Unit Only). Referral letter from Paediatricians accepted. Referrals through Small Steps following a tier 2 intervention. (workshop) <ul style="list-style-type: none"> No self-referrals accepted
Assessment and tracking tools	<ul style="list-style-type: none"> Progress trackers to be completed at the start of the programme and at the end
Outcomes (linked to KPI'S)	<ul style="list-style-type: none"> To improve parent's understanding of their child's behaviour To support parents/carers to manage their child's behaviour positively To improve social networks and reduce social isolation of participant parents and children To improve relationships between participant parents and children To improve mental wellbeing of participant parents and children To reduce inappropriate referrals to paediatricians and reduce the number of follow up appointments