



The  
Apple Tree  
Centre

Wellbeing and Therapy for Children, Young People & Families

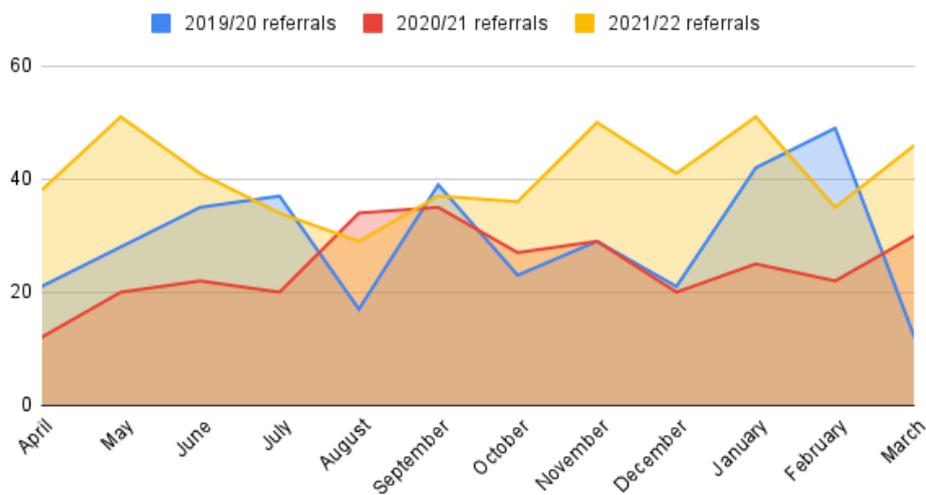
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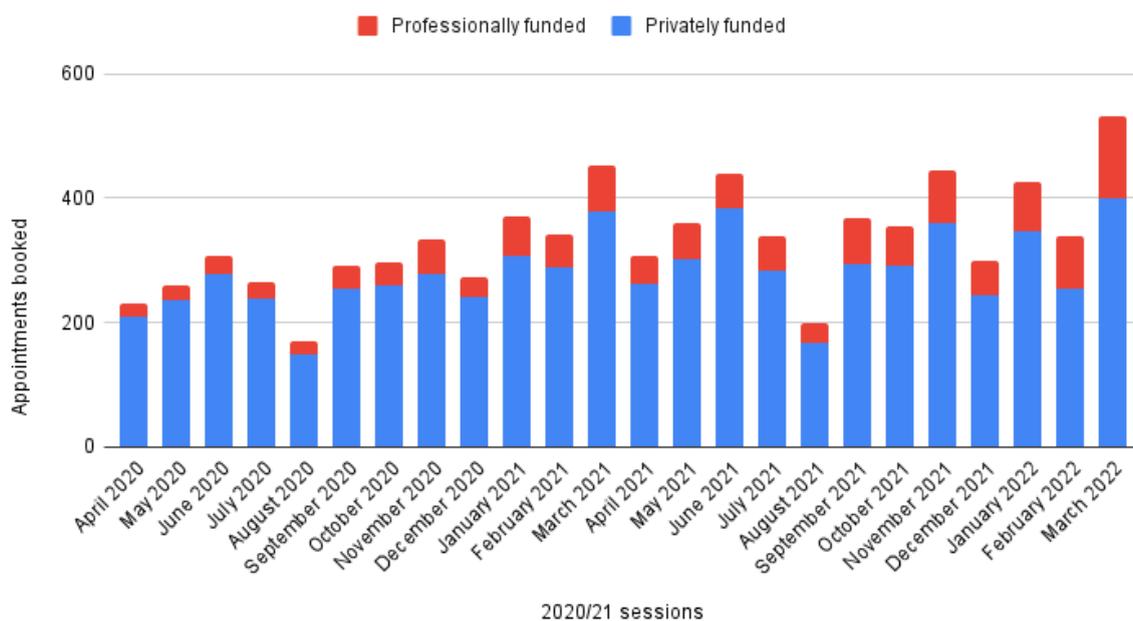
# Annual Evaluation Report

## March 2022

Number of referrals



Appointments offered by month



## Big Achievements

Over the past year, we have:

- Sustained a reliable and effective therapeutic service through the later stages of a pandemic.
- Developed an effective and sustainable online therapy service.
- Moved to a more robust and secure system for storing therapy records.
- Successfully renewed our position on the North Yorkshire Approved Provider List, which is used by all Local Authorities in our area to source therapy for children, young people and families.
- Continued to provide work for eighteen self-employed therapists.
- We were identified as a specialist service for Children and young people by the Commissioner for young people's mental health at Sheffield City Council and awarded a Grant to deliver a 9 month pilot project offering therapeutic support to children & young people affected by sexual abuse. This pilot project ends in July and we have supported 13 Young People and their parents and siblings to date.
- Delivered our Certificate in Creative Counselling for Young People in a new online format to Counsellors and Play Therapists from across the country.
- Supported 17 adopted children and their families as well as 6 children under Special Guardianship Orders, in Foster placements or in residential care.
- Developed a relationship with an Academy Trust to provide staff training and individual therapy for vulnerable children.
- Employed a virtual admin assistant to enable our Centre Manager to focus on higher level strategic priorities as well as the continued smooth running of the Centre.
- Commissioned full team Pre-Trial Therapy training online with IMARA (an independent specialist service that supports children, young people and their safe family members following a disclosure or discovery of child sexual abuse).
- Facilitated a family to identify an appropriate neurodiversity assessment service and provided a safe neutral space at the Centre for this assessment to take place.
- Fitted with fully opening UPVC windows to enable effective ventilation for Covid-safer practices.
- Fitted a bespoke secure storage unit in one of our therapy rooms to enable Art Therapists and Music Therapists to effectively share space and storage.
- Worked hard to provide as many opportunities as possible for our therapists to feel supported, valued and appreciated at the Centre. This includes the directors and manager being available for ad hoc face to face or Zoom check ins and scheduling social & team building time into the calendar.

## Significant Challenges

- Managing a hybrid face-to-face and online service during the continuing uncertainty caused by the Covid pandemic.
- We invested significant management time in developing a Client Record Management System which we discovered at a late stage was not fit for purpose.
- Changes in criteria for Adoption Support Fund applications and renewals, including a move towards shorter-term therapy.
- Administered a new project at short notice in order to meet an urgent need identified by the Local Authority. At time of writing, future funding for this project is uncertain despite positive feedback and outcomes.
- Invested time in full-staff training with a very reputable national charity, which was not suitable for our service needs and raised significant concerns about that charity's recommended practice.
- Several of our Associate Therapists have had to end their work due to personal circumstances related to the Covid pandemic. This has made it necessary for us to reallocate therapeutic work for many children and young people at short notice.
- We have received an unprecedented volume of referrals, meaning that we now have a long waiting list for all therapies. We have introduced a formalised system for prioritising referrals for adoption support, as well as re-referrals from families known to the service.
- Adapting to new personal challenges throughout our staff team, including perimenopausal symptoms experienced by both directors, mental health and caring commitments throughout our staff team which have increased as a result of the pandemic and the global mental health crisis, and unrelated health needs.

## Feedback from Monitoring and Evaluation

We use a range of non-intrusive measures to collect feedback from the children and families who use our service. We ask all families for feedback at the end of therapy. This information is taken from:

- Notes left in the Comments Box in our waiting room
- Comments made to therapists during therapy sessions and review meetings
- Letters, cards and emails sent to the centre during and after therapy

We actively look for and monitor feedback relating to key aspects of our Model of Care and Theory of Change. These are:

- Children and families' experiences of change (in themselves and their relationships)
- Experiences of the therapeutic relationship
- Experiences of the Centre

We acknowledge the potential for bias inherent in this method of evaluation. Some of these quotes are selected and recorded by therapists, who may tend to favour positive feedback over negative, and children and families may also find it easier to offer compliments than criticism. We have analysed all the comments collected in our Monitoring and Evaluation folder and identified the following themes, illustrated by anonymous quotes.

## **Suggestions and complaints:**

### **Waiting list**

We have received many emails and phone calls from families on our waiting list checking that they are still on the list, asking for updated information about when their children might be offered an appointment, and at times expressing anxiety or dissatisfaction in relation to the wait times, particularly in relation to children and young people's mental health deteriorating during this time and the estimated wait time we gave at the initial referral stage. We are attempting to give more realistic and explicit estimates of wait times at the time of referral and are exploring ways to reduce waiting times for those in most need, including offering one-off supportive consultations to parents and carers and the possibility of short-term therapy for those young people where this is most likely to be effective.

### **Paying for missed appointments**

Parents and carers periodically express dissatisfaction with our cancellation policy, including a feeling that it is unfair that families have to pay for appointments they are unable to use at short notice for reasons beyond their control (such as illness). We have paid particular attention to our cancellation policy since reopening after Covid-19 lockdowns, and now offer online or telephone appointments as an alternative wherever this is suitable for the child and family. We also work to communicate effectively about our cancellation policy at every stage of contracting. We review the policy frequently and at this time are clear that this is necessary in order for us to continue to offer a reliable, sustainable and affordable service.

### **Contact with non-referring parents**

We have received one complaint and a few comments in relation to the level of information which we offer to non-referring parents, particularly where parents are separated. We have revised our systems for communicating with all parents and carers and built in more robust systems for ensuring that all parents and carers are contacted at the beginning of therapy and are routinely invited to arrange therapeutic reviews (with the consent of the young person and/or referring parent,, and unless there are specific reasons not to do so). We have provided additional training for all our therapists through

Associate Meetings and will continue to emphasise the importance of effective systemic working through our meetings, supervision and in-house training.

### **Uncertainty about review timing / frequency / purpose**

File audits and some enquiries from parents revealed that therapists have been offering review meetings inconsistently, and that the purpose of these meetings is not always clear to parents / carers. We have requested that therapists begin to arrange reviews after roughly 4 therapy sessions to allow parents / carers time to plan, and communicate clearly with managers if there is a reason for reviews to be offered less frequently. We have highlighted our written guidance regarding the purpose of therapeutic reviews, offered increased internal supervision to support therapists to prepare for these meetings, and plan to develop in-house training in order to make these more effective.

### **Competence and Consent**

File audits revealed that therapists' recording of consent for therapy, particularly in relation to Gillick competence, is inconsistent. We have reinforced the need for therapists to seek approval from the Directors before any therapy is carried out without the knowledge of one or both parents. We will also include this in our in-house training over the coming year.

### **Waiting room / confidentiality**

One family and one supervision client fed back that they could hear conversations in the office very clearly while they were in the waiting room. We have discussed the possibility of providing background music in the waiting room but concluded that this would not be an effective way of maintaining confidentiality and would be intrusive for the many families with sensory needs who access our service. We have reminded all staff and therapists of the need to keep conversations at a low volume and avoid discussing confidential information in the office while the waiting room is occupied. We will also investigate the possibility of additional sound proofing.

## **Experiences of accessing therapy at the Apple Tree Centre**

### Noticing change

#### **Feedback at end of therapy:**

"Thank you so much for the support you have given my child over the years, it has been incredibly helpful for her to have a space to discuss, think and process tricky (and more mundane) events... I think you have given her some tools and processes that will set her up well to manage her emotions and circumstances, and also a good grounding in how useful therapy can be in helping us to look after our mental health." (*parent*)

"[Young Person] seems much more confident in asking for what they need and expressing their emotions with me." *(parent)*

"I think with you opening the door ajar... it's made things a lot easier for us. We've not had a meltdown in 3 weeks, and we used to be having 2-3 a day" - *(parent)*

"I wanted to reiterate what I said during our review and give a big thank you for all the effort you have put in to help [Young Person] build the relationships they needed to at school which will mean they will be able to cope until you're back. I don't think we could have come this far without the help and support from [Therapist] (and of course the office staff) at Appletree. I really am grateful for all you've done so far.!" *(parent)*

**Immediate impact of therapy:**

"[Young Person] managed to go into the school on his visit today... I'm sure it helped that he'd had his therapy session just before. He is always calm and relaxed after seeing [Therapist]." *(Parent)*

**Impact on Social Workers:**

"Thanks for your report which was so nice to read. It has been a long road for them both but your support has been so beneficial for them. What a fantastic outcome!!! Thank you for everything you have done. Great piece of work." *(Post Adoption Social Worker)*

**Impact of one off supportive sessions for parents on the waiting list**

"I can't tell you how much it helped to be clear going into my discussion with [child], which went as well as it could have." - *(parent)*

## The therapeutic relationship

**Review sessions:**

"Thank you again again for the review notes and for all the support you have provided both [Young Person] and I over this difficult year. I am not sure how either of us would have made it through without you all." *(parent)*

"some feedback regarding [Therapist's] recent review with both myself and [my partner] was extremely useful - [Therapist] has been a hugely positive influence on [Young Person] - they have a great relationship which enables [Young Person] to explore all sorts of issues." *(Parent)*

### **Initial meetings:**

“Please can you send my thanks to [Therapist] for a lovely first session with [Young Person] yesterday as she found [Therapist] really easy to chat to” *(Parent)*

## Experiences of the centre

### **Impact of Centre Manager**

“I’ve got the email [manager] thank you - and thanks again for your time - I know it’s not about me, but I feel much better having spoken with you.” *(Parent)*

“Thank you so much for your full attention, I’m really impressed with how you’ve kept us informed to this point.” *(Parent)*

## **Plans and Priorities**

We reviewed all areas of our work and identified the following priorities for the coming year:

- Increase associate pay in recognition of the increased cost of living (see below).
- Prioritise Adoption Support work, including developing a better understanding of the new online tendering process of OneAdoption East Midlands and establishing links with newer workers in OneAdoption South Yorkshire.
- Continuing to work with a caseload of 12-15 children and young people affected by sexual abuse, funded by Sheffield City Council.
- Identify a suitable therapist and agree robust policies for work with Wickersley Academy Trust.
- Employ an additional admin worker to take over and expand the work undertaken by our Virtual PA.
- Develop in-house training webinars for Associate Therapists to ensure a thorough practical and ongoing understanding of the Apple Tree Centre policies and procedures, particularly in relation to record keeping, safeguarding, competence and consent for therapy, and work with parents and carers.
- Explore ways of reducing waiting times, including the possibility of offering short-term therapy and/or parenting support to families further down the waiting list.
- Recognising the number of neurodivergent children and families that come through the centre, we would like to improve our links with local neurodiversity assessment and support services.
- We made the decision not to offer our Certificate in Creative Counselling for Young People in the coming year, recognising that this is costly in time and energy and will benefit from a longer lead time to attract a strong cohort for the 2023-4 academic year.

We have identified the following areas for improvement over the coming year:

- More regular individual meetings with Associate Therapists.
- Improved referral systems, ensuring that we have all the information needed to manage our waiting list efficiently.
- Develop more rigorous systems for ensuring all HR paperwork is up to date.
- Improve our interview process in light of learning from recent recruitment, to ensure that our expectations, model of care and the needs of the service match applicants' experience and expectations more closely.
- Work with our team of Associate Therapists to improve retention and identify obstacles and incentives to increased work within the Apple Tree Centre.
- Improve our routine communication with non-referring parents, particularly when parents are separated, and ensure that this is effectively recorded.
- Investigate increased soundproofing between office and waiting room.
- Develop a written menopause policy to help to ensure that all female, trans and non-binary members of staff feel fully supported by both management and co-workers during this potentially stressful and difficult phase in their lives – and to ensure that these individuals are treated fairly in the workplace.

We have reviewed our pricing policy for private work as well as the sessional rates offered to therapists, and highlighted the following points:

- Around 50% of our appointments incur VAT. Because of our policy of charging a standard rate for all therapies, this takes up a substantial part of our income on those therapies affected.
- Due to the increase in fuel costs and the overall cost of living, we will increase the sessional rate offered to Associate Therapists to £35 per privately funded appointment as of 1st August 2022. The rate for professionally funded work will remain at £40.
- To ensure that we can continue to offer a sustainable service, we will increase our charge to private clients to £60 per session from 1st August 2022.

Overall, we agreed that our main priority over the coming year will be to strengthen and consolidate our core therapeutic work by reinforcing links with referrers and commissioners, and by investing management time in support and training for our pool of Associate Therapists.