

Speech, Language and Communication Needs (SLCN)

Task and Finish Group

Report January 2014

Contents

1.	Structure of the work and this report	Page 2
2.	SLCN – the national perspective	Page 3
3.	Harrow – demography and population data	Page 5.
4.	Support for Children with SLCN	Page 9
5.	Recommendations	Page 13
6.	Conclusions	Page 18
	Appendices - 1. Group membership 2. Pre-school SLT data sets 3. Supporting children’s speech, language and communication development. 4. Available resources to support children’s speech, language and communication development. 5. Talk of the Town. 6. Triage services. 7. HELLP role.	Page 19

Section 1 - Structure of the work and group membership / purpose

The SLCN task and finish formed as a subgroup of the Early Years Strategy Board in June 2013 with the purpose of informing a local strategy which would support the development of speech language and communication skills in children under 5 years of age in Harrow. Membership of the group included representatives from the Local Authority (LA) early years service, children's centres, parents, Private, Voluntary and Independent (PVI) sector childminders, and speech and language therapy services (SLT) (see appendix 1).

The group undertook to:

- Review relevant research and findings of several national reports and initiatives including
 - The Bercow Review of speech, language and communication services for Children and Young People (CYP) and subsequent action plan 2008
 - Better Communication Research Programme(BCRP) – Improving provision for Children and Young people with Speech Language and Communication Needs DfE (2012)
 - The Marmot Review- Fair Society, Healthier lives – Strategic Review of Health Inequalities in England Post- 2010
 - Graham Allen report 2011 – Early Intervention: Smart Investment, Massive Savings The second independent report
 - Early Language Delays in the UK –James Law (2013) Save the Children.
 - The Healthy Child Programme – DH (2010)
 - Children and Families Bill (2013)
 - All Party Parliamentary Group on Speech and Language Difficulties – The links between speech, language and communication needs and social disadvantage (2013)
 - Statutory Framework for the Early Year's Foundation Stage (EYFS) 2012
 - Information Sharing in the Foundation Years - task and finish group (DfE /DH Nov 2013)
- 1 Review relevant local data and provision in relation to SLCN in Harrow.
 - 2 Review interventions and support systems available in Harrow at universal and targeted stages in particular, recognising that specialist services will need further scrutiny as part of the SEN pathway
 - 3 Review existing pathways for children with SLCN from birth to 5
 - 4 Highlight good practice and suggest interventions which would be effective in improving outcomes for children with SLCN by the age of five, taking into consideration the three main themes from Harrow Early Years Strategy of building capacity , broadening participation and high quality services for all when reviewing local evidence and provision.
 - 5 The group while recognising the particular needs of Children with SLCN who had English as additional language did not address this issue as this is part of a parallel workstream.

The work of the task and finish group was carried out through six meetings, some separate 1;1 meetings and sharing of local data from the LA and Health regarding children with SLCN.

SECTION 2 NATIONAL AGENDA

2.0 Introduction

Communication is a foundational life skill. Research indicates that the development of a child's communication ability has an impact on their literacy, school performance and employment prospects as well as on their emotional wellbeing and behaviour.

Most children acquire speech and language skills with relative ease. Where difficulties arise they may be due to neurodevelopmental problems or other impairments. Others may be as a result of reduced developmental opportunities limiting the child's learning of language which are commonly linked to social disadvantage.

The term speech language and communication needs (SLCN) refers to the broad range of children with developmental speech and language difficulties, as outlined in Bercow report. These can include difficulties with fluency, forming sounds and words, formulating sentences expressing ideas, understanding what others say, and using language socially. SLCN encompasses a wide range of needs and levels of severity, some of which will require specialist intervention from speech and language therapists and some which can be adequately supported by differentiated teaching strategies and through supporting parents to help their child's development.

The Bercow Report¹ concluded that the following prevalence data can be taken to broadly represent the prevalence of children with SLCN in England:

- 1% of children at school entry will have severe and pervasive speech, language or communication needs which will require long term specialist support and will have communication needs which are likely to go on into adulthood.
- 7% of children at school entry will have significant speech, language or communication needs which will not improve without specialist interventions as part of the team working with the child, including the parents. Children in this category may have long term needs but their access to learning can be improved with appropriate support. These children have SLCN which are associated with an underlying speech, language and communication impairment or as a secondary issue associated with other learning disability or complex needs. The prevalence in this group is not correlated with socio-economic factors or disadvantage
- Disadvantage, poor socio-economic factors and a language poor early environment have been shown to correlate with SLCN in terms of early language development which, whilst not necessarily a result of a long term underlying impairment, can result in poorer learning outcomes and children not achieving their potential. In the most disadvantaged areas of England, up to 50% of children at school entry present with communication skills that are below those expected for their age.

The BCRP has demonstrated that socially disadvantaged children are much more likely than other children to be identified as having SLCN, i.e. that there is a strong 'social gradient'. Pupils entitled to free school meals, i.e. children whose parents are receiving any of a number of state benefits, are 1.8 times more likely than other pupils to be identified as having SLCN. Pupils living in a more deprived neighbourhood are 1.3 times more likely than other pupils to be identified as having SLCN. This means that pupils entitled to free school meals and living in a more

¹ <http://www.dcsf.gov.uk/bercowreview/docs/7771-DCSF-BERCOW.PDF>

deprived neighbourhood are 2.3 times more likely to be identified as having SLCN than those not so socially disadvantaged.

2.1 Impact of Social Disadvantage

The Marmot review points out that reducing social and health inequalities requires a focus on improving educational outcomes. It also identifies communication skills as being necessary for ‘school readiness’. Improving the communication development of socially disadvantaged children would therefore have an important wider benefit in terms of promoting social equity

Early language development is rooted in the interactions that children have with their parents, carers and peers. Early social exchanges foster developing language skills and provide a vital foundation for children’s school readiness and academic achievement. Research indicates that the way parents talk to children and the way they give children opportunities to talk influences children’s early language development - the richer the opportunities provided the faster language develops. Studies indicate that poverty can seriously hamper a parent’s ability to adequately respond to their child’s early language needs and provide a home learning environment that is best suited to enhancing language and communication skills in the early years.

The BCRP suggests that children from the most disadvantaged backgrounds may need additional support in the early years to ensure they have a secure foundation for language and literacy development. This is important in the light of research showing a very strong association between children’s early language development and their performance at school entry. Children with poor language development at 5yrs are at a substantial risk of low achievement at 7 years and beyond. The BCRP also refers to the substantial research evidence that children with SLCN are more likely than other children to develop behavioural, emotional and social difficulties (BESD).

There is a strong link between CYP with SLCN and those in the Youth Justice System studies reveal that over 60% of those in the Youth Justice System have an SLCN and approximately 50% of these went undiagnosed throughout their school lives.

2.2 Early Language Development

The Save the Children Review of Early Language Delay in the UK (2013) identified five principals that specifically relate to language development which underpin effective service provision are summarised in the table 1 below.

Table1

	Principle
1	Communication is key to the fostering of life chances in early childhood. Everyone in the child’s environment has a role in fostering the child’s communication skills. This starts at birth and includes immediate and extended family and potentially a wide variety of professionals such as health visitors, GPs early years practitioners etc
2	The importance of early communication skills and their implications for the child’s social and educational development across the early years and beyond need to be understood by all parents.
3	All professionals need to be aware of how to identify early language delays and what they can do to enhance language skills
4	There is a need to roll out interventions that have been shown to be effective and test their value across wide populations and over an appropriate length of time
5	There is a need to sustain the pressure on policy makers to improve services for the child who is language delayed in the very early years (i.e. before aged three years)

This is supported by the EYFS which places a strong emphasis on communication and language as one of the three prime areas of learning, considered to be crucial for building children’s capacity to learn. Similar significance is given to communication and language skills with the Healthy Child Programme.

SECTION 3 HARROW PERSPECTIVES

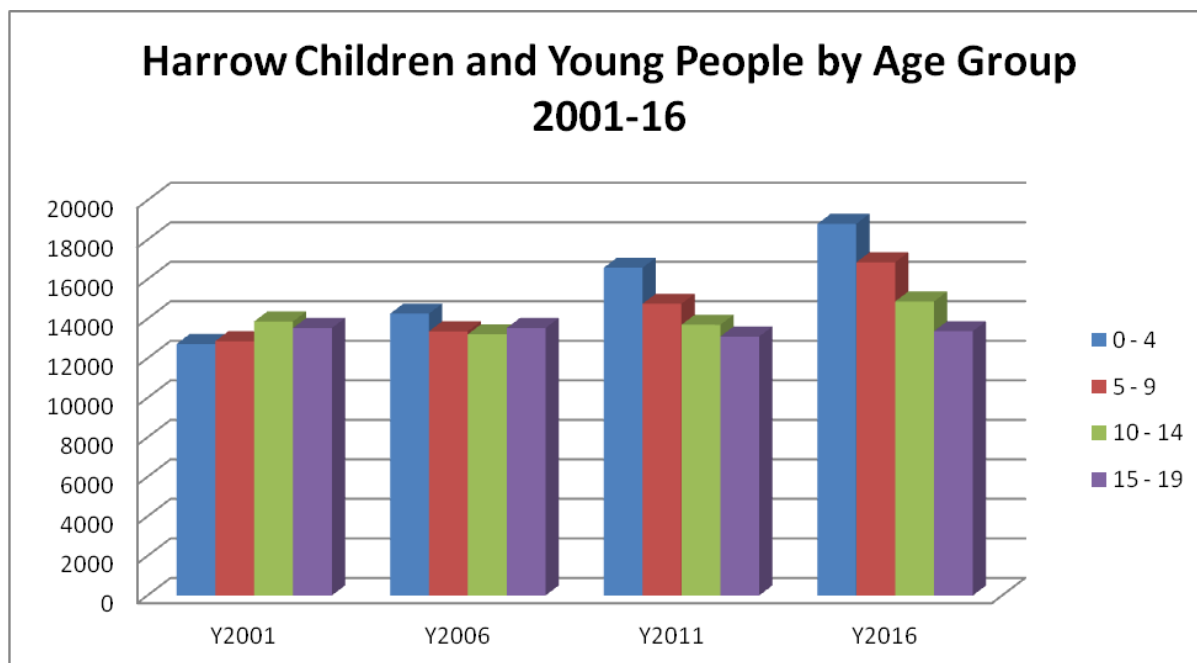
3.1 Harrow Population Data

The 2011 Census estimated that there were 239,056 people living in Harrow. It estimates that there are 60,000 CYP aged 0-19 which makes up approximately 25% of Harrow’s total population.

	Age: 0 - 4	Age: 5 - 9	Age: 10 - 14	Age: 15 - 19	Total: 0 - 19
Census 2011	15,900	14,400	14,600	15,100	60,000

This represents an increase of 12.84% in this age group in a decade; the biggest increase is in the 0 - 5 age group at 32.29%. The table 2, below demonstrates predicated rises in population by 2016 (provided by greater London Authority) again the 0-5 age group being one of the largest increases predicted.

Table 2

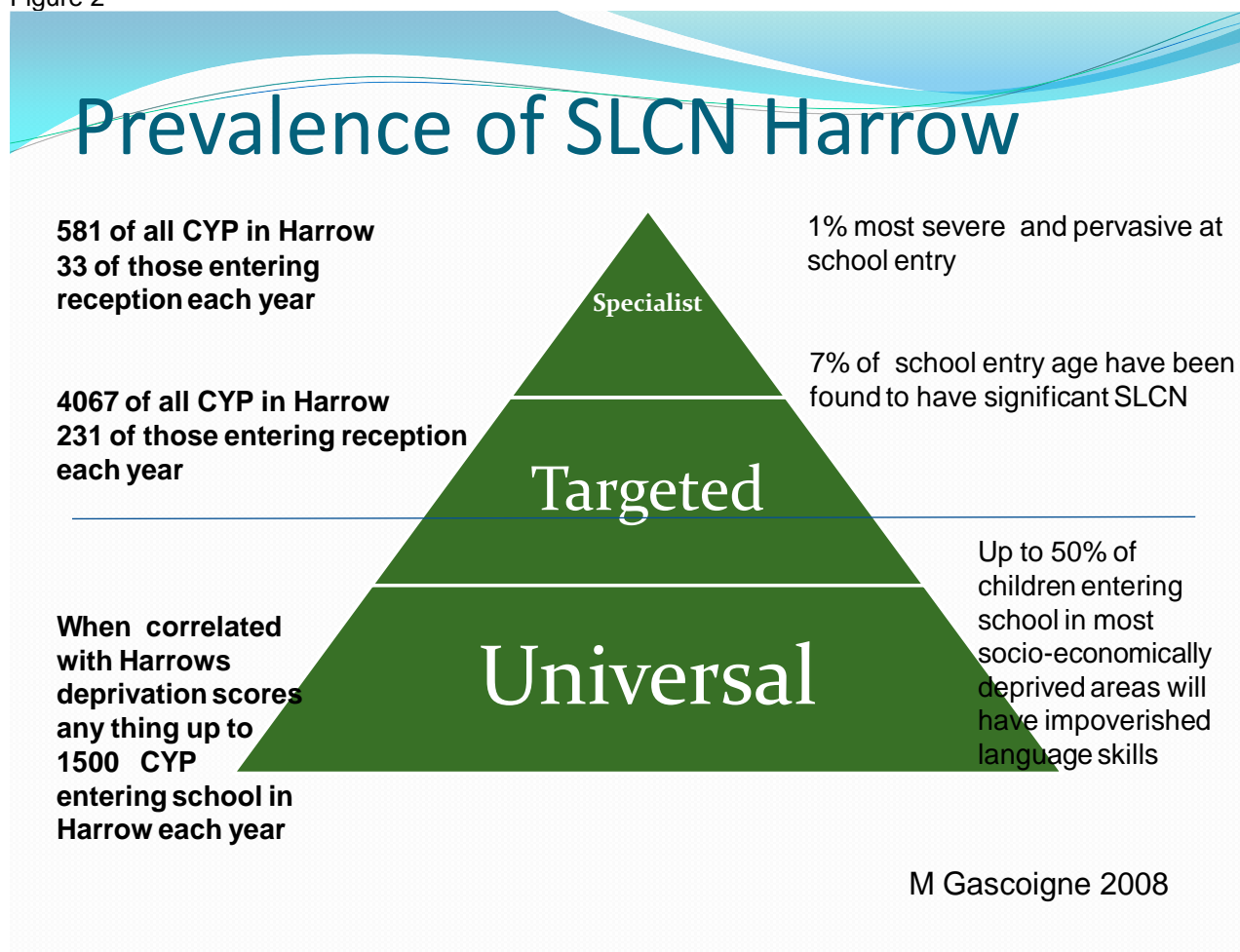


3.2 Poverty and links with SLCN

- The Child and Maternal Health Observatory (ChiMat) report states that-
 - 21.2 % of Harrow children aged under 16 years live in poverty, which is similar to the national average.
 - A lower than average percentage of children in Harrow i.e. 60%, achieve a good level of development at the end of the EYFS; compared with the national average of 63.5 %.

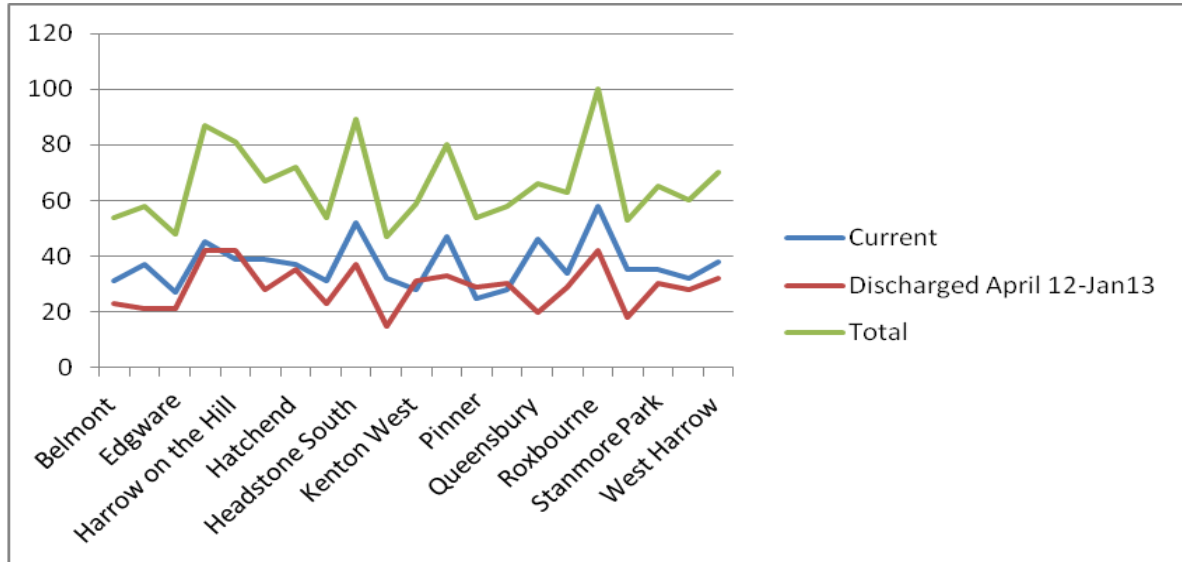
- Harrow has a high percentage (9.1%) of low birth weight babies when compared to the national average. Low weight births constitute a major health problem to the individual infant, the family and to society and are often associated with neuro-developmental impairments and learning disabilities and subsequent SLCN.
2. Assessments at the end of the EYFS indicate that there is a high correlation between poor results in communication and literacy and Lower Super Output Areas (LSOA) with as many as 22 schools where between 30% and 64% of children did not achieve the expected levels of communication skills at school entry. It is acknowledged that within these data sets there are children for whom English is an additional language and they may not have any additional speech language or communication needs.
 3. Working on national prevalence and local population data figure 2, provides an estimate of population needs in Harrow based on the 2011 census

Figure 2

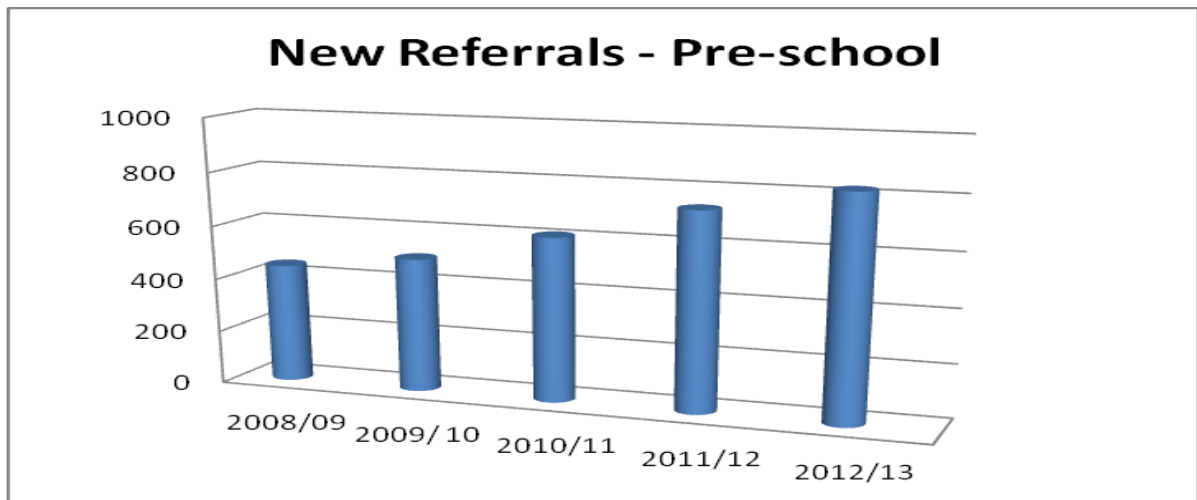


3.3 Speech and Language Therapy Data Sets

An analysis in January 2013 of children aged 0-4 years, accessing SLT services (see appendix 2 and graph below) mirror LSOA with the wards of Roxbourne, Marlborough, Greenhill, Headstone South and Queensbury having significantly higher numbers of children with SLCN. A separate analysis of school aged children accessing SLT reflected similar patterns.



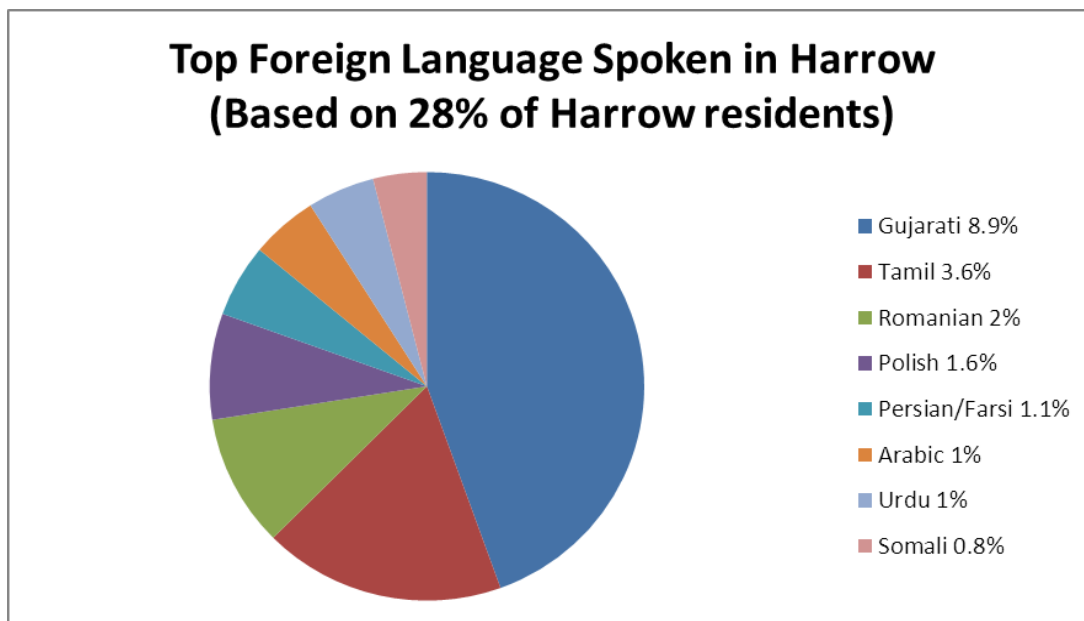
Reviewing trends of new referrals of pre-school children over a five year period indicates almost 100% rise in demand with 445 children receiving an assessment in 2008/9 compared with 824 children in 2012/13.



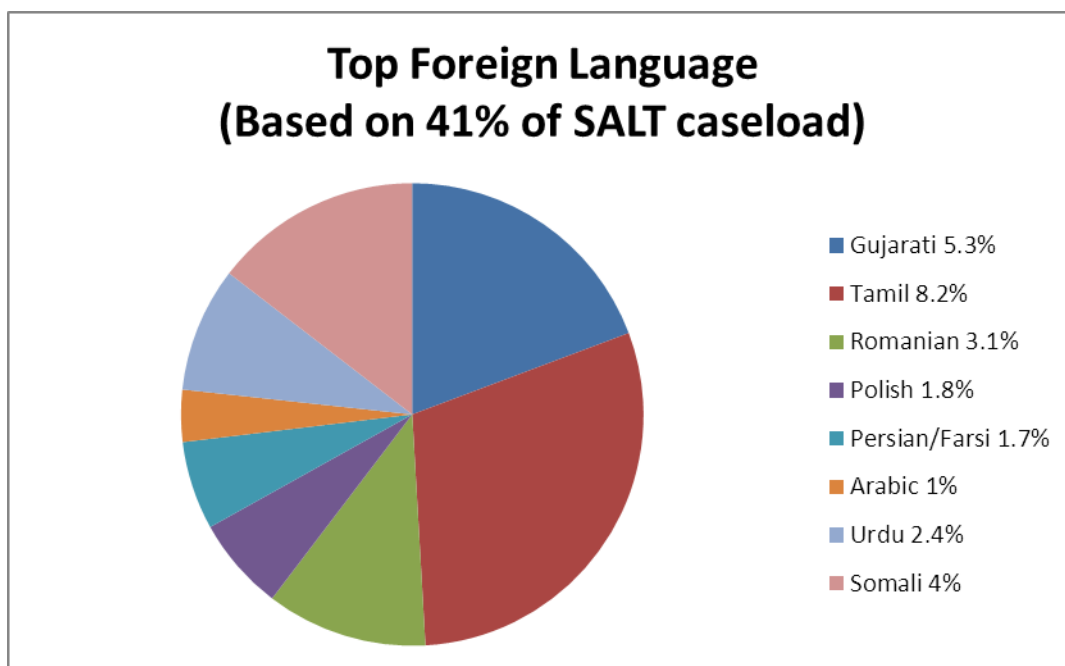
Caseloads reveal growing numbers of pre-school children with special needs and persistent SLCN with an increase of approximately 35% from 200 to 290. This is also reflected in the growing caseloads of children with SLCN across Harrow's primary schools.

3.4 Ethnicity

School data indicates that 82% of CYP attending Harrow schools are from black or ethnic minority groups. The profile of CYP accessing SLT services is similar in terms of ethnicity. At least 88 different languages are spoken in Harrow including three categories of sign language.



A recent audit of children accessing speech and language therapy revealed similar languages spoken but with Tamil and Somali speakers being over represented on SLT caseloads when compared with the population as a whole.



4.0 SUPPORT FOR CHILDREN'S SPEECH, LANGUAGE AND COMMUNICATION DEVELOPMENT.

The support provided for children's SLCN is normally understood in terms of three levels:

- Universal provision (for all children), i.e. high quality inclusive provision with a language rich environment which promotes all children's speech language and communication development.
- Targeted provision for children who are at risk of speech, language or communication difficulties or who need additional support that can be provided by skilled early years practitioners (EYP) or parents and guided by specialists such as SLT's within mainstream settings
- Specialist provision for children with severe and specific SLCN who require specialist interventions provided or supported by a speech and language therapist in collaboration with EYP and parents.

Appendix 5 outlines this provision in more detail and provides an analysis of the roles of EYP's, parents/ carers, SLT's and other professional at each level of intervention/ provision.

4.1 Universal provision

The BCRP stresses the importance of universal provision and in particular the importance in educational contexts of providing oral language environments that foster good communication skills. It describes universal provision as "the first phase in a systematic approach to reduce the impact of lower language competence on attainments in schools". It suggests that such provision may be cost effective: "Only when children have been provided with appropriate language learning environments to develop their language and communication skills at school and at home, can financial and professional resources be allocated in cost effective and efficient ways."

Taking the evidence base and local knowledge (see appendix 6) of available resources and support the group concluded that at a universal level all children in the early years 0-5 years (including advice to expectant mothers) need:

- Parents and carers who are supported with information and resources to encourage their role as primary educators and communicative partners for their children. Analysis of information and resources locally indicated that while there was a considerable recourse both in terms of information and tools are available locally these were not always accessible to parents or indeed practitioners. Parents had variable skills and knowledge in relation to SLC development and this impacted on their ability to support their child, it is important that there is a focus on families who had not yet been reached and that available parenting programmes included reference to SLCN.
- Early support is essential. Local initiatives such as triage and the two year old SLT project has reduced the average age of referral to SLT services towards the 2yr 6mth target. However a significant number of children are still not referred prior to their 3rd birthday (45% January 2013). It is essential that more families are encouraged to understand the importance of participating in the 2yr old progress check so that children receive timely support. Challenges in sharing information between the LA and child health data bases at a borough level has impeded progress in accessing parents of two year olds.
- Places where children spend time need to be communication friendly environments (including home, educational and community based settings that children access with their parents - libraries, leisure facilities etc). Staff ability and confidence in their role as

facilitators of communication and language development varies. The BCRP recommends that there should be a comprehensive programme of initial and post qualification training for all relevant practitioners in relation to children's communication needs that would develop the joint planning and implementation of evidence-based provision. The BCRP sites 'Talk of the Town' project as a good example of where universal training can result in positive outcomes for children (see appendix 3). Locally both bespoke and specialist training programmes are available for Early years practitioners however these are not available on a continuous basis and can be difficult for settings to access. Early indicators from an audit of training needs locally indicate a high demand for further training in the area of SLCN.

- Harrow children's centres continue to develop their ability to meet a core offer in terms of SLCN, regular talk groups for parent support and triage sessions are run by SLT's are available across six centres. Children's centres are recognised as having a particular role in providing locally based additional support for language and communication development by local health and education services with increasing demand for triage and support for parents of children with SLCN.

One of the main recommendations of the BCRP is that EY settings should systematically collect evidence of outcomes in relation to SLCN including the perspectives of children and young people and their parents. The group noted that while the early years foundation stage provides guidance to practitioners this is often not detailed enough to address the needs of children with SLCN and more formal screening and assessment tools could be used to assess and monitor a child's progress i.e. WellComm assessment.

4.2 Targeted provision

Some children will require additional targeted support in relation to their SLC. The group is wide ranging including children with delayed language and communication skills who can be expected to respond to intervention through to early identification of children who may go on to have more persistent need and potentially require specialist services. This group by definition will be a mobile group and children may go back to the universal level or move to the specialist level

Children with a primary language delay may require relatively straight forward interventions for SLCN which can be delivered by EYP/parents, with appropriate knowledge and skills in SLC development. They may require initial advice and support from an SLT following which lead can be taken by/early years staff with reviews where indicated.

Other children may have long term SLCN but will benefit from access to a programme of targeted speech, language and communication interventions with the support of a speech and language therapist delivered in the most appropriate context for the child (typically early years setting, children's centre, home) by the most appropriate person. This provides the child with the opportunity to learn, practise and consolidate new skills over time in their everyday setting.

Children who require targeted provision need:-

- Early identification where they are not making expected developmental gains in terms of speech, language and communication and access to relevant/ resources services to support these needs Considerable progress has been made in increasing EYP awareness of SLCN there are still a number of children refer post their 3rd birthday Similarly a significant number of children have not had their needs identified prior to

school entry , many of these are not in settings and there is a need to continue to raise awareness of parents to the importance of SLC as a pre-request for school readiness.

- Parents need to be confident in their role as a key communication partner for their child; this will require specific additional support from EYP and other staff working with their child. Parents may require condition specific information and training to support their understanding and skill in communicating with their child.
- The success of this strategy will depend on EYP having access to appropriate advice and training themselves and access to information regarding appropriate activities and strategies to use with children with SLCN. Practitioners in settings have had to be trained that raises awareness of the differing levels of need amongst children and increases practitioners' understanding of their influence in interactions within the setting. However many are not confident in using strategies and tools to improve outcomes for children with SLCN and require further support within settings.
- A core group of practitioners locally have completed their Learning Language and Loving training course, this is an accredited to a master's degree level and equips practitioners to identify and support children with SLCN as well as evaluation of their own ability to adapt their SLC skills to the needs of children. We will refer to this group of practitioners as Harrow Early Language Lead Practitioner (HELLP). Anecdotal evidence suggests that opportunities to use their newly acquired skills and knowledge vary significantly when they return to their settings. Some HELLP's are used as a resource to cascade skills and knowledge within settings, others run 'talk groups' with support from SLT and others have not had opportunities to develop further in this area.. There is a need to harness this expertise and formalise the HELLP role to create capacity at a local level See Appendix 4 for a more detailed proposal of the potential role for the HELLP.
- Children who require targeted interventions will also need a planned transition into their schools settings even where their SLCN have resolved as evidence suggests that children with early speech and language difficulties are at a high risk of having later difficulties in literacy skills. While there are more robust arrangements for children with a recognised SEN, transition is often less effective for children with primary SLCN. Providers should be incentivised to provide robust evidence of children's SLCN in their final assessment prior to school entry so that schools are ready to meet their needs.
- The demand for speech and language therapy services continues to grow with 100% increase in referrals over the past 5 years, increases in the numbers of children requiring specialist support particularly those with complex disability, Autistic Spectrum Disorder (ASD) and severe language disorders. The service has used several strategies such as group therapy, parental education and up-skilling early years practitioners to meet the high level of demand both in terms of new assessments and interventions for children with most significant needs. In the absence of additional resources this has resulted with less time being available to support EYP / settings to deliver targeted interventions. This can result in some children not receiving the level of support they need at a targeted level which has a negative impact on their SLC skills and school readiness. It also results in more children requiring specialist interventions during their school years.

4.3. Specialist Support

Children who require specialist provision are identified as having specialist needs over and above those that can be met via universal and targeted provision (although some elements of the child's overall need may be met by the offer at these levels and children should access these in addition to specialist services). They may include children who are cognitively able and have specific speech, language and communication difficulties as well as children with profound and multiple learning needs of which language and communication are a part.

This significant but growing minority of children in Harrow will need:

- Specific specialist support for parents in order to ensure their confidence in their role as a key communication partner for their child and to increase their understanding of the specific communication challenges associated with their child's needs. This support is provided by SLT in a one to one / group setting and specific training programmes such as parent child interaction , Early Bird , Sign-along and Lidcombe training available to parents
- Joined up, multi-disciplinary support building on existing good practice such as the Early Support Programme and team around the child is essential with multiple needs. While elements of this are deployed locally the ESP is no longer available due to resourcing constraints
- To be able to access a range of settings in which appropriate support and learning opportunities can be provided for their child. One such setting available to children with severe language impairment is the Pre-school Language Resource 'Chatter Tots' which offers 16 places to children with severe and specific language impairments. SLT services are also available across a range of community settings including clinics, children's centres, PVI, and the Child Development Centre at Northwick Park hospital.
- Settings where the infrastructure has been developed to support children with additional or complex needs through adaptations, training and support with advice from specialist practitioners.
- Access to a range of specialist interventions for children with additional or complex speech, language and communication needs under the guidance of a speech and language therapist

It is recommended that the area of specialist support to children with SLCN be reviewed in the context of children with special educational needs agendas and the Early Support / Team around the child programmes.

5.0 Recommendations

The following recommendations are made in relation to universal and targeted provision.

<i>Area / need</i>	<i>Recommendation</i>	<i>Risk</i>
<p>Public awareness / health campaign <i>There is a need to increase awareness of the importance of SLC development for all children particularly in LSOA and attached schools</i></p>	<ol style="list-style-type: none"> 1. The Communications and Public Health departments to develop a communications strategy to promote the development of Children’s SLC skills. 2. Community events should foster awareness of SLCN and support interventions particularly in LSOA which have high levels of SLCN. 3. High risk populations including Tamil, Somali and Traveller communities need a focus. 4. Schools in LSOA should be encouraged to promote the development of CYPs SLC skills. 5. The two year old check should be seen as a vehicle to promote the early identification of SLCN locally. Sharing of information sharing with children centres of 2yr old child health data sets could assist this [process 	<ul style="list-style-type: none"> • SLCNs of CYP are not a priority of local public health agenda. • Resources to organise and fund community events may not be available. • Targeting high risk populations requires a systematic approach and manpower/ resources within children’s centres are limited
<p>Information and resources to support SLCN <i>There are a range of resources and information available to support SLCN at both locally and nationally</i></p>	<ol style="list-style-type: none"> 1. A multiagency group of early year’s practitioners need to systematically catalogue information and resources available for both parents and EYP. 2. Family Information Service (FIS) to be supported to accommodate a SLCN page with resources contacts etc for both parents and professionals. 3. Links need to be improved with key groups who will disseminate appropriate information midwives, health visitors, GPs Parents as First Teachers, parent forums, play groups, schools and community leads/ groups. 4. EYP need to have access to resource pack which will allow them identify and 	<ul style="list-style-type: none"> • <i>Staff within SLT , children’s centres and HELLP’s need to have allocated time to catalogue resources</i> • <i>FIS needs technical support and supports from SLT services to quality assure information on website.</i> • <i>Staff within SLT, children’s centres and HELLPS needs to have allocated time to link with key groups.</i>

	<p>support children with SLCN .It is recommended that the WellComm assessment be purchased as a central resource for child minders and children centre staff.</p>	<ul style="list-style-type: none"> • <i>Requires funding to purchase assessments and training to roll out assessment to EYP.</i>
<p>Information and resources to support parents.</p> <p>The importance of early communication skills and their implications for the child’s social and educational development across the early years and beyond need to be understood by all parents.</p>	<ol style="list-style-type: none"> 1. A leaflet for parents and early years providers that explains explicitly the link between early communication skills and school readiness and learning outcomes 2. Leaflet for parents regarding pre-natal – infant communication (pregnancy to 6 months.) 3. The role of parent ambassadors in supporting parents and children with SLCN should be explored particularly within LOSA and communities not yet reached. 4. Parents need to be actively encouraged to take their child for the two year old check by all EYP and partners within Health services. 5. To link with existing parenting programmes to ensure parents have access to appropriate materials advice and support with regard to SLCN. 6. Ensure that early years practitioners and health workers have the appropriate knowledge and skills to provide agreed consistent advice to parents. <p>Recommendations 3, 4, 5 & 6 should to be linked with the communication strategy and public awareness campaign</p>	<ul style="list-style-type: none"> • <i>Requires funding to print</i> • <i>Requires funding to print / purchase</i> • <i>Requires further investigation and business plan</i> • <i>Requires communications strategy / public health campaign/ funding</i>
<p>Training for early years professionals</p> <p>All professionals need to be aware of how to identify SLCN what they can do to enhance a child’s speech language and communication skills.</p>	<ol style="list-style-type: none"> 1. An annual rolling training programme is offered locally to enable EYP to support and identify and plan for children’s SLCN. The training would include short bespoke training packages on various aspects of SLCN in addition to more intensive courses such as Learning language and loving it / ELKAN. 2. EYP to have access to appropriate assessments and resources, including an online reference tool that can be sourced 	<ul style="list-style-type: none"> • <i>Requires , development and commissioning</i> • <i>Requires development of FIS</i>

	<p>via the FIS site</p> <ol style="list-style-type: none"> 3. The WellComm assessment & resource pack is a recommended tool for early identification and measurement of improvement 4. A conference to launch SLCN as a primary focus for early years in Harrow and to provide recommended universal and targeted interventions over 2014/15 	<p>website</p> <ul style="list-style-type: none"> • <i>Piloting in children's centres and with childminders</i> • <i>Requires funding and inputs from partners working with children with SLCN.</i>
<p>Harrow Early Language lead practitioner (HELLP)</p>	<ol style="list-style-type: none"> 1. The role of the HELLP to be formalised and promoted across all early years settings. 2. Training programmes to be commissioned to ensure quality trained HELLPs who can support universal interventions in settings. 3. Children's centres should be commissioned and resourced to provide HELLP functions to support targeted interventions for groups of children in LOS areas with support from SLT services. 4. Peer support for HELLPs to be commissioned to include regular meetings and telephone support from SLT/ Early years advisors. <p>See appendix 4 for further details.</p>	<ul style="list-style-type: none"> • <i>Requires development and sign up from early years providers</i> • <i>Requires commissioning</i> • <i>Requires commissioning</i> • <i>Requires resourcing</i>
<p>Early years settings supporting the development of children speech language and communication skills</p>	<ol style="list-style-type: none"> 1. <i>The annual conversation with providers should incorporate specific reference to the identification and support of children with SLCN. Providers should be able to demonstrate that they have</i> <ul style="list-style-type: none"> • <i>Practitioners that have the appropriate skills and knowledge in this area</i> • <i>Identified children with SLCN and sought appropriate support.</i> • <i>Assessed and monitored children's progress</i> • <i>Demonstrated positive outcomes for children</i> • <i>Transition plans in place for children with</i> 	<p><i>Lack of engagement from early years providers to sign up to the agenda.</i></p> <p><i>The reduced role of the LA in quality assuring early years provisions.</i></p>

	<p><i>SLCN when they transfer to a new setting.</i></p> <ul style="list-style-type: none"> • <i>A lead practitioner i.e. an HELLP who will support others to identify and manage children with SLCN in that setting.</i> <p>2. <i>Parent satisfaction surveys should include reference to support for children with SLCN.</i></p> <p>3. <i>Incentives should be identified to encourage providers to participate - awards for good practice, training for practitioners etc.</i></p>	
<p>Children's centres</p>	<p>1. <i>The role of children's centres in supporting children with SLCN is crucial and should be developed further to include:</i></p> <ul style="list-style-type: none"> • <i>Provision of targeted support for groups of children with SLCN with demonstrable outcomes children</i> • <i>Expansion of SLT triage services.</i> • <i>Expansion of the Rising Stars programme/ school readiness initiative to focus on children with SLCN.</i> • <i>Developing links with schools to assist in the assessment and transition of rising 5's and children awaiting nursery class placements.</i> • <i>Supporting the two year old check and onward referral of children with SLCN.</i> • <i>Support the development of 3&4 year old checks in partnership with schools staff and SLT services.</i> • <i>Developing the role of outreach workers with specific community groups to assist the early identification and support for children with SLCN .In particular Tamil, Somali, Polish and Traveller groups.</i> <p>2. <i>Consideration needs to be given to key children's centres as knowledge centres for other early years practitioners to access information and resources.</i></p>	<p><i>Will requires resourcing and appropriate levels of support from SLT services.</i></p> <ul style="list-style-type: none"> • <i>Requires resourcing and communication strategy so that other EYPs are aware of the resource and its value</i>

<p>Speech and language Therapy services</p>	<p><i>SLT services have a crucial role in supporting children with SLCN across universal, targeted and specialist services. In relation to universal and targeted support -</i></p> <ol style="list-style-type: none"> <i>1. SLTs should provide training across the continuum of provisions in partnership with colleagues from the local authority and children’s centres as part of an annually commissioned training programme.</i> <i>2. SLTs should be commissioned to support the development of targeted services within children’s centres and early years settings</i> <i>3. SLTs should be commissioned to work in partnership with LA colleagues and community groups to broaden participation of difficult to reach groups.</i> <i>4. SLT services to review current triage pathways and usage and expand this provision where demand is high.</i> 	<p><i>Will require additional investment in SLT services/.</i></p>
<p>Sharing of information and outcomes for children with SLCN</p>	<p><i>SLT services should continue to work in partnership with colleagues in the LA to review population data and outcomes for children with SLCN on an annual basis to identify</i></p> <ul style="list-style-type: none"> <i>• Population groups of children with SLCN</i> <i>• Impact of initiatives such as triage , Rising Stars programmes etc</i> <i>• Agree priorities for coming year etc</i> <p><i>Public health services, Harrow clinical commissioning group and LA should;</i></p> <ul style="list-style-type: none"> <i>• Review information sharing processes with regard to the recommendations made in report ‘Information sharing In the Foundation Years ‘(November 13).</i> <i>• Available data sets regarding children with SLCN and ensure these are incorporated into the local JSNA.</i> 	<p><i>Information systems and partnership working</i></p>

Conclusions

There are rising numbers of children with speech, language and communication needs within Harrow's pre-school population. This is attributable to a number of factors including an increasing 0-5year old population, the changing demographics of the population including levels of poverty and ethnic diversity. Evidence suggests that there needs to be a systematic and whole system approach to address support at a universal, targeted and specialist levels for children with SLCN. It is crucial that universal support for the development of Speech, language and communication skills is addressed so that children are enabled to be successful learners and develop socially and emotionally. Children with SLCN need to have their needs identified early and programmes of targeted support to ensure 'school readiness' and referral onwards to specialist services as required.

Key to achieving this is

- Building capacity within the early years work force so that all those who work within the early years sector recognise the needs of children with SLCN and are able to support them and their parents to ensure positive outcomes for children.
- Staff within early years settings i.e. HELLP's who have additional training and skills in enabling them to provide targeted interventions for children with SLCN and support colleagues within settings to do the same.
- High quality early years settings where staff have the knowledge and skills to support the needs of children with SLCN, monitor their progress and demonstrate positive outcomes for children and families.
- A graded and rolling training programme is available to early years practitioners and parents with regard to children with SLCN.
- Supporting parents to develop strategies so that they can create positive home learning environments where a child's speech, language and communication skills can develop.
- Accessing and supporting parents and children within LOSA areas and specific communities where there is evidence of high risk of speech, language and communication needs i.e. wards of Roxbourne, Marlborough, Greenhill, Headstone South and Queensbury. Tamil, Somali and Traveller communities. The role of community groups and parent ambassadors should be considered in accessing groups not year reached.
- Speech and Language Therapy services that have the necessary resources to support practitioners, parents and children with SLCN across universal, targeted and specialist services.
- Partnership working across Health and Local Authority services to ensure the early identification of children who may require more targeted or specialist levels of support so that they are afforded maximum opportunities to develop their SLC skills prior to school entry and receive appropriate transitional support into school settings.
- Information sharing across Health and Local Authority to ensure appropriate data sets are collected and shared so that children with SLCN are identified early and outcomes are measured. In particular the uptake and impact of the two years old check in relation to SLCN.

The group asks the Early Years Strategy Board to consider the evidence, its findings and recommendations in informing a strategy to address the needs of children with SLCN in Harrow.

Appendix 1.

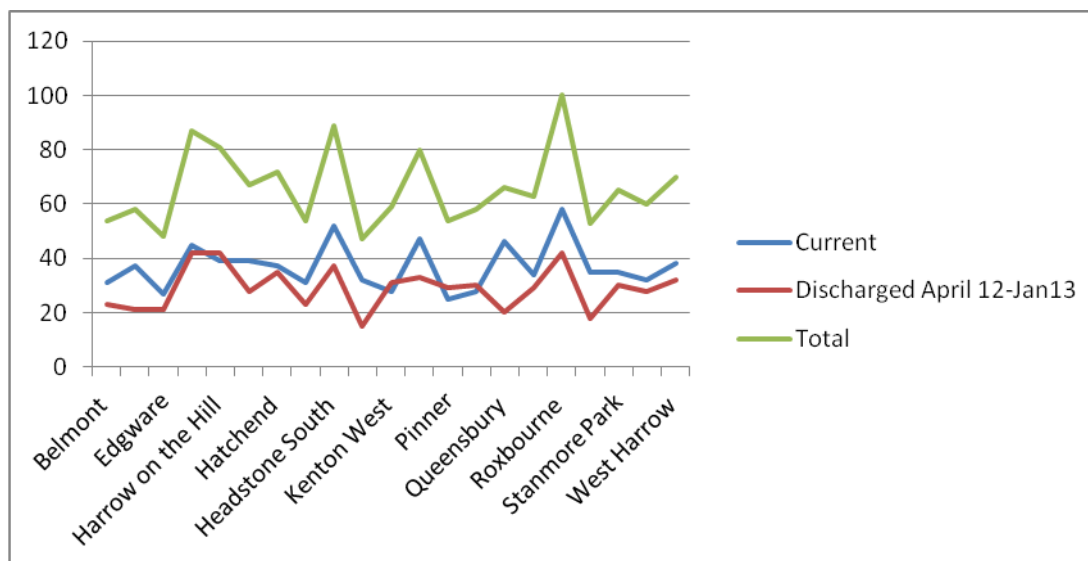
Speech Language and Communication Needs – task and finish group

Membership.

- Maria Luscombe - SLT services (Chair)
- Sophie Scott - SLT services
- Julie Trainor – Early Years Services
- Angie Hicks – Child Care Development Team.
- Rochelle O’Byrne - Children’s centres
- Olivia King Boateng - Parent
- Joan Ugwu.- Family Information services
- Ann Nash -Pre-school play group association (until July 2013).

Appendix 2 - Children accessing SLT services January 2013.

Ward	Current Jan 13	Discharged April 12-Jan13	Total
Belmont	31	23	54
Cannons	37	21	58
Edgware	27	21	48
Greenhill	45	42	87
Harrow on the Hill	39	42	81
Harrow Weald	39	28	67
Hatchend	37	35	72
Headstone North	31	23	54
Headstone South	52	37	89
Kenton East	32	15	47
Kenton West	28	31	59
Marlborough	47	33	80
Pinner	25	29	54
Pinner South	28	30	58
Queensbury	46	20	66
Rayners Lane	34	29	63
Roxbourne	58	42	100
Roxeth	35	18	53
Stanmore Park	35	30	65
Wealdstone	32	28	60
West Harrow	38	32	70
	776	609	1385



Appendix 3

Talk of the Town – BCRP

‘Talk of the Town is described as “an integrated, community led approach to supporting speech, language and communication in children from 0-18 years, which focuses on a small community in Wythenshawe, South Manchester”.

A crucial element in Talk of the Town is workforce development. This includes supporting school staff to develop knowledge and skills, giving specific training around particular programmes and enhancing the work being done already. It has taken place in whole school training days, staff meetings and coaching and mentoring approaches with specialists. Some staff have been supported to complete a national qualification.

The area has a history of social and economic problems. Initial standardised language assessments of children entering two primary schools in the area at nursery age found that a quarter of the children were at a level that would qualify them for a statement of SEN in many areas and that half of the children were at a level that in other areas would lead to them being deemed in need of extra support. The outcomes reported from the project include substantial increases in standardised scores on a range of language tests after just one year, improved language levels across both nurseries - with a 15% increase in children not scoring below the expected levels - and improvement of both schools in relation to Ofsted inspections.’

Appendix 4

Harrow Early Language Lead Practitioner (HELLP) Proposed Role and Function

Harrow Early Years has a group of Early Years Practitioners who have knowledge and skills around speech, language and communication (SLC) skills and needs in young children (universal level). However, this group of practitioners have not been clearly defined and identified with a role in supporting children with speech, language and communications needs (SLCN).

This practitioners group includes early years practitioners working in children's centres and early years settings, including child-minders. Most of these practitioners will have received accredited training around SLCN through training provided by Harrow Early Years' Service (i.e. Learning Language and Loving It training). Some practitioners may have received other accredited training in a role outside of early years but which would have easily transferable knowledge and skills into early years practice (i.e. ELKLAN training in schools). Each individual has attended training delivered by Harrow. Opportunities for accreditation are provided by Edge Hill University. Specialist training will be available for development officers supporting childminders.

This group of practitioners are able to use clear strategies to support the development of SLC skills in all young children (universal level). They also have the skills to identify children with speech, language and communications needs (SLCN) and provide additional support around the development of skills in these children (targeted level).

Further identification and definition of this group of practitioners will maximise their ability to use these skills to support children and to support their colleagues working with them as part of the Harrow-wide speech language and communication offer in the early years. .

Practitioners with these skills would be able to fulfil the following role in regard to supporting the development of SLC skills in all children (universal level):

- To provide knowledge and support to other practitioners:
 - HELLP practitioners based in a setting would support other practitioners within their own setting (it would be expected that each setting would have at least one HELLP).
 - Child minder development officers, identified members of the Children Come First network would provide support to childminders.
- To provide parents with effective sign posting to other sources of support advice and guidance.
- To monitor children's development and be a key practitioner in supporting their setting to identify children with SLCN or those at risk of developing SLCN.

- To provide generic support advice and guidance to parents about language development.
- Where support is setting based to run generic language development groups as required (see children's' centre talk groups).

At targeted level HELLP practitioners would be expected to:

- Identify basic speech, language and communication difficulty and put targeted support strategies into place for an individual child (e.g. PCI strategies, key word level support, basic attention support, visual support, etc.)
- Run targeted language level groups (i.e. 1/2/3 word level groups) for children identified above, or for children where SLT have identified a need at this level
- Run basic social skills groups (e.g. early turn-taking) for children identified above, or for children where SLT have identified a need at this level
- Monitor progress towards targets / age appropriate skills, and refer onto specialist services if required.

Support for HELLPs in Harrow

The Harrow Early Years' Service will ensure that those practitioners who hold the HELLP role in their settings have access to a support network. This will provide support to allow them to maintain best practice and continue to develop their skills in regard to the supporting the development of children's SLC skills and also around identification and support for those with SLCN.

Harrow will provide:

- Bespoke training for Child minder development officers and identified members of the Children Come First network
- Learning Language and Loving It training for Early Years Practitioners in Harrow. (Hannen Centre, Toronto, Canada written by Janice Greenberg updated 2002)
- Peer support groups for those holding the HELLP role. This will be provided termly in each children's centre cluster areas to allow HELLPs to meet other practitioners in their area. The group will be facilitated by a speech and language therapist / Early Development and Learning Advisor. Setting managers are expected to release any HELLP working in their setting to attend these meetings.
- Telephone support from Speech and Language Therapy / Early Development and Learning Advisor (for children's centres) for brief discussions and queries in regard to identification of / support to children with SLCN.

Appendix 5.

Universal Support for Children with Speech Language and communication needs.

Universal support should

- Ensure all children have the opportunity to access supportive environments which will support the development of their Speech Language and communication skills. This includes Home Learning environments, early year’s settings and children’s centres).
- Children’s Speech language and communication development will be monitored to ensure appropriate levels of progress.
- Where children are not achieving expected levels of progress this will be addressed at the earliest opportunity through targeted interventions and may include referral to specialist services .(See targeted / specialist support)
-

Role of EY settings/Others	Role of Parents	Role of SLT	Other Early intervention services / professionals
<ul style="list-style-type: none"> • Provide competent practitioners to support SLC development in young children (e.g. modifying language to child’s level) • Provide communication friendly spaces • Commission training in specific areas and ensure appropriate CPD for practitioners • Source resources as required (EDLA, progress check, communication trust, talking point, etc.) • Monitor & evaluate progress and refer to specialist services if child not developing within range expected • Provide advice and support to parents around communication rich environments (e.g. PAFT, Talk groups, stay and play) 	<ul style="list-style-type: none"> • Provide communication friendly spaces and be aware of environments that may hinder communication development (i.e. TV, dummy use, etc.) • Take their child to have a 2yr old check • Monitor & evaluate progress and contact specialist services child not developing within range expected • Access advice and other resources from EY staff as needed in order to provide above 	<p>Where commissioned:-</p> <ul style="list-style-type: none"> • provide training on various aspects of speech, language and communications and disability (‘e.g. Learning Language and Loving It’) • Develop leaflets / information / resources around SLCN. <p>Provide general information / support for parents / other professionals (e.g. website, basic telephone advice)</p>	<ul style="list-style-type: none"> • To identify vulnerable CYP and implement generic strategies to support the development SLC. • Provide advice and training to settings in relevant areas of EYFS. • Support and involve parents in enabling their child’s SLC skills(PAFT, talk groups play and stay) • Children requiring additional support are referred to specialist services.

Targeted Support for Children with Speech Language and communication needs. (Includes all of the detail in Universal level plus)

- Children are at risk of or not achieving expected levels of progress in the development of their communication skills this will be addresses at the earliest opportunity through targeted interventions
- Children requiring relatively straight forward interventions or opportunities to practice / consolidate skills have targeted support delivered by EYP/ parents, with appropriate knowledge and skills in SLC development
- Where children present with less predictable pattern of progress and development there is a clear path way for referral to specialist services.
- Provision of a transition support programme to CYP transferring from pre-school to primary school.

Role of EY settings/Others	Role of Parents	Role of SLT	Other Early intervention services / professionals
<p>Provide competent EYP to support children with SLCN and their parents through: -</p> <ul style="list-style-type: none"> • Delivering structured targeted interventions either individually or in groups. • Adapt their communication skills to support children • Source and prepare resources • Monitor & record progress for discussion with SLT/ other professionals • Refer to specialist services if child not developing as expected • Attend sessions with SLT for planning/ modelling/ advice • Access appropriate training on relevant aspects of SLCN. • Provide advice and support to parents <p>Commission training in specific areas of SLCN and ensure appropriate CPD for practitioners</p>	<ul style="list-style-type: none"> • Provide communication friendly spaces • Monitor & evaluate progress and contact specialist services where child not developing within range expected • Access advice and other resources from EY staff as needed • Attend SLT assessment and follow up sessions • Provide information to the EYP/SLT service in regard to difficulties seen at home • Actively support treatment programmes and interventions. • Consent to onward referral if required • Take their child to have a 2yr old check. 	<ul style="list-style-type: none"> • Provide specialist assessment, advice and written strategies to support child's SLCN. (One off or review basis dependent on child needs.) • To support set up of individual / group interventions which are led by EYP/ parents • To review progress advice EYP/parents re target setting/ next steps. • To provide 'on the job' training and modelling to EYP/Parents. • Provide bespoke training packages for parents. • To advise on appropriate resources. • Provide training for EYP including child minders where commissioned on various aspects SLCN. 	<ul style="list-style-type: none"> • As for universal • Adapt their communication skills to support children with SLCN • Access appropriate training on relevant aspects of SLCN. • Provide advice and support to parents.

Specialist Support for Children with SLCN (includes all of targeted and universal as above) includes those children identified as having complex SLCN and/or eating and drinking difficulties requiring a specialist service that should be led by the speech and language therapy service with support from schools, early year’s practitioners, parents and carers. This includes:

- Provision of specialist assessment and diagnosis of speech, language and communication needs, eating and drinking difficulties
- Provision of direct specialist intervention either individually, in groups, in class/early year’s settings as appropriate to meet the needs of the CYP
- Provision of advice and support in the use of AAC (alternative and augmentative communication) systems where oral language is limited or non-functional as a means of communication. This includes advice on the procurement of high tech communication aids.
- Provision of advice and training on specific areas of speech, language and communication, including modelling of specific approaches and techniques for health professionals, school staff/early education practitioners/parents
- Provision of specialist training programmes to support parents such as Early Bird, Sign along and Parent Child interaction programmes.
- Contribution to statutory assessment, annual reviews and IEP/target setting.

Role of EY settings/Others	Role of Parents	Role of SLT	Other Early intervention services / professionals
<p>As for targeted services to provide competent EYP to support children with SLCN and their parents through: -</p> <ul style="list-style-type: none"> • Supporting delivery of structured specialist interventions under the guidance of a Speech and language therapist • Monitor & record progress for discussion with SLT/ other professionals • Attend therapy sessions with SLT for planning/ modelling/ advice 	<p>As for Targeted services but also including</p> <ul style="list-style-type: none"> • Attend SLT assessment and follow up sessions • Actively support treatment programmes and interventions in the home setting. • Consent to onward referral if required • Attend specialist training programmes as necessary to support child’s SLCN. 	<p>AS for targeted intervention but also including</p> <ul style="list-style-type: none"> • Provide specialist assessment, advice and written strategies to support child’s SLCN. • To provide specialist interventions for individual / groups of children. • To provide training and modelling for EYP/Parents to support specialist interventions. • Provide specialist training packages for parents/ EYP. • To work with team around child to contribute to statutory assessments annual reviews and IEP’s /target setting. 	<ul style="list-style-type: none"> • As for universal & targeted • Adapt their communication skills to support children with SLCN • Access appropriate training on relevant aspects of SLCN. • Provide advice and support to parents. • To work with SLT’s to contribute to statutory assessments annual reviews and IEP’s /target setting

Appendix 6.

Information, Resources and Training Available to Support to Children with SLCN and their Families

	Universal	Targeted	Specialist
What we have In Harrow.	<p>People resources</p> <ul style="list-style-type: none"> • Parents as child’s early educator • Health Visitors / GP’s – advice and assessment • Midwives – accessible via children’s centres • SLT (general advice) • Children’s centres – advice, drop in, stay and play, groups, etc. • Family Information services (FIS) • Early Intervention Service • Social workers • EDLA (for children’s centres) • EY practitioners. N.B Early year’s practitioners refer to all practitioners including those working in school nurseries, PVI’s, Children’s Centres and child-minders. • Talk groups in children’s centres • Childcare Development Team • Community groups, libraries, etc. • Voluntary Groups • Parenting Forum <p>Information and tools:</p> <ul style="list-style-type: none"> • FIS website • Generic leaflets and websites • Healthy Child programme and 2 year check • SLC development wheel • Referral guidelines to SLT /Triage • EYFS development matters, • ES developmental profile 	<p>People resources as for Universal plus –</p> <ul style="list-style-type: none"> • Children’s Centre Talk groups • Trained HELPP’s • SLT’s for triage • SLT’s assessment, advice and signposting, therapy • EDLA (for PVI’s, childminders and children’s centres) • Child development team (Paediatricians, OT/PT/ Dietetics) • Specialist Health Visitors. • Early Years SENCO’s. • CHAPPS (Continyou Harrow Parent partnership Service) <p>Information and tools as for universal services and including :</p> <ul style="list-style-type: none"> • Specialist condition specific leaflets • Single point of referral at NPH for all child development queries. • Specialist assessments and programmes to support development of SLCN • Transition guidelines – school 	<p>People resources as for Universal and targeted plus</p> <ul style="list-style-type: none"> • SLT services • ‘Chatter tots’ Pre-school language resource • Portage services • Early Bird programme • Educational Psychology • CAMH’s • Children with Disability team • Assessment and review services • Voluntary agencies i.e. - MENCAP , NASH, • Parent forum. • Special school nursery classes <p>Information and tools as for universal , targeted and including:</p> <ul style="list-style-type: none"> • Early support toolkit and Leaflets • Contact A family resource • Statutory assessment framework • ASD pathway • Communication passports • Augmentative and alternative communication systems (sign , symbol , electronic aids etc.)

	<ul style="list-style-type: none"> WellComm assessment and tool kit <p>Training programmes :</p> <ul style="list-style-type: none"> Parents as first teachers Parenting programmes Every child a talker Two year old check. Learning Language and Loving it. Bespoke training packages around SLCN 	<p>entry</p> <p>Training as for universal and including</p> <ul style="list-style-type: none"> Parent child interaction programmes for parents. 	<p>Training as for universal and targeted plus –</p> <ul style="list-style-type: none"> Sign along courses Lidcombe programme for child with dysfluency Early Bird Programme. Specialist bespoke training for EYP on aspects of SLCN
<p>What is missing</p>	<ul style="list-style-type: none"> Consistent advice support for parents to ensure they have the knowledge and skills to provide language supportive environment for their child. Links with community and other groups who support parents Support for the most vulnerable families i.e. those in LOSA and identified groups / communities. Easy access to health advice and consistent messages for parents who have concerns about their child's SLC development. Promotion of the two year old check across Health and local Authority and sharing of information. Support for families who are not accessing children's centres or settings EYP who have appropriate knowledge and skills to supporting children's speech, language and communication skills. Accessible tools for EYP to identify and offer ongoing support to children with SLCN. Consistent knowledge and use of 	<p>As for universal services but also including -</p> <ul style="list-style-type: none"> Support for parents to enable them to support programmes and implement strategies to help their child's SLCN. Parent ambassadors / voluntary groups to increase access for at risk groups / families. EYP who are able to support targeted programmes of intervention within EY settings and to support parents to do the same, EYP and others working with young children to be able to refer to specialist SLT services for support and advice. HELLP role needs to be embedded across EY settings in Harrow More targeted SLC groups run by EYP. Identified support for the children come first network to support children with SLCN Knowledge centres for EYP with adequate support and advice around SLCN. Joint working with Schools in LOSA 	<p>As for universal and targeted services but also including -</p> <ul style="list-style-type: none"> EYP who are able to support specialist programmes of intervention within EY settings and to support parents to do the same Range of suitable pre-school provision for children with significant SLCN. SLT services commissioned to provide required levels of support to pre-school children <p>This section needs to be explored further with colleagues as part of the SEN reform locally.</p>

	<p>EYFS, ES developmental profile and other tools.</p> <ul style="list-style-type: none">• Settings who prioritise the development of children’s SLCN.• A rolling training programme for EYP to support SLCN• FIS webpage on SLCN• Public health campaign linking with the HCP and other health campaigns in Harrow to promote the importance and benefits of development SLCN and the impact of this area on education, later attainment and emotional development and wellbeing.	<p>areas to address needs at foundation stage with regard to SLCN.</p>	
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