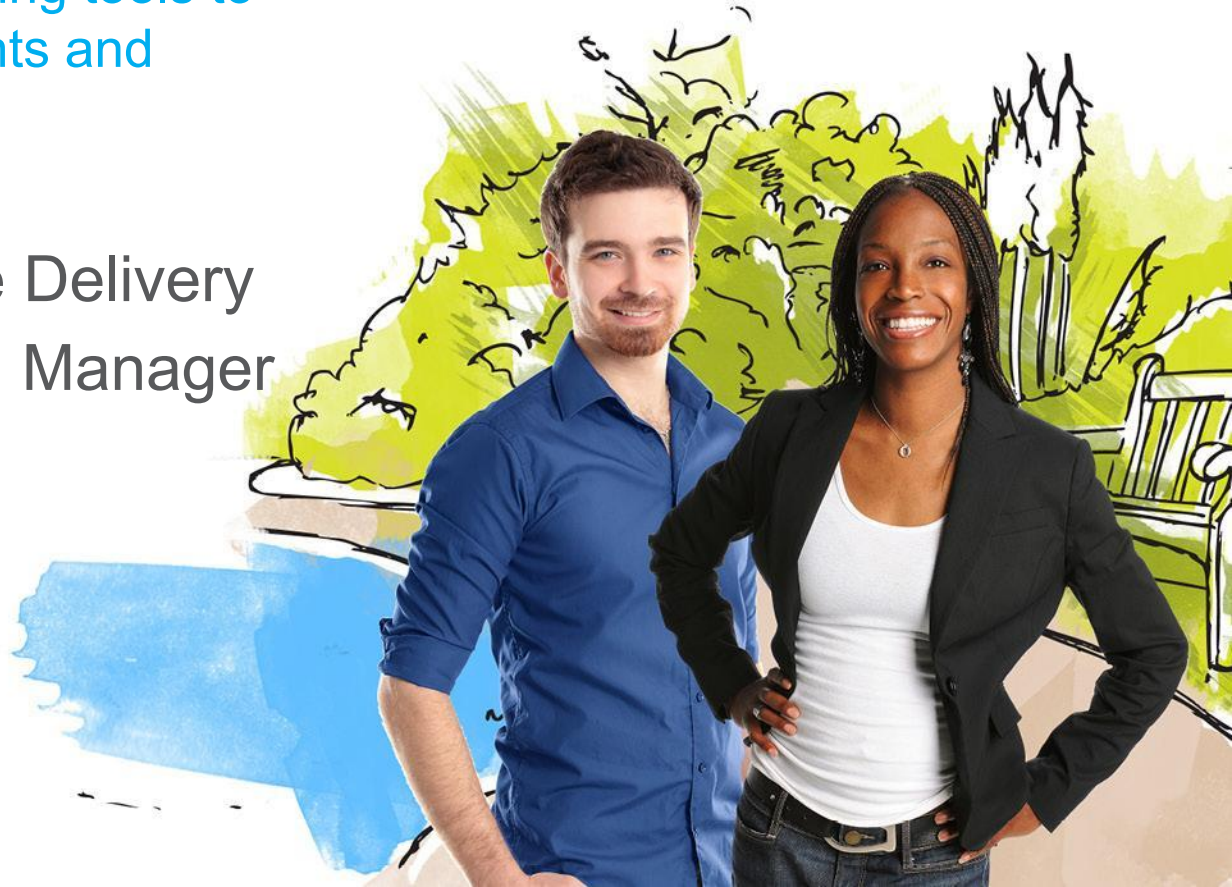




Integrated
Treatment Services
Client-centred Therapy

Assessment and baselining tools to
support ECH assessments and
planning

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What do we already know.....

The Bercow report identified

- 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.
- There is evidence identifying significant numbers of secondary school students with SLCN in areas of social deprivation. In a survey of around 200 pupils in one inner city secondary school, the number of students with SLCN was found to be 75%. (Sage, R 2004).

Why the need for screening for SLCN?

- The Code of practice and Bercow report both identify the need for early identification. The school's responsibility for this is outlined in the Code of practice (2014).
- The Communication Trust have identified five goals of early identification:
 1. Have a policy for identifying early SLCN for pupils.
 2. Look at the evidence on expected levels of SLCN's and compare this with your own data.
 3. Review your current systems for identifying pupil's SLCN's
 4. Check out any ways that your system can be improved to make sure pupils who may have SLCN in your school are identified.
 5. Make sure this then links into support and intervention.

Universal, targeted and specialist service provision



Every Child a Talker (ECAT)

- A national programme to train and support people who can work with children in early years speech and language development. The programme was designed to improve awareness and understanding of speech and language development, create an environment for language development and encourage the best practice in supporting under 5's development.
- Topics include:-
 - The feature of a communication friendly setting
 - Top tips for talking
 - Guidance on how to support children with English as an additional language
 - Ideas on activities and structures for supporting children's learning development.
 - Effective practice in securing parental engagement.

Evidence for ECAT (reference communication trust)

- ECAT provided monitoring forms for participating sites. The original plan to carry out a national evaluation was not completed. However, in 2010, the National Strategies published data on nearly 80,000 children who were monitored. This data indicated reductions in the numbers of children who are judged to be behind or at risk of falling behind on the various parameters of the monitoring form (listening and attention, receptive and expressive language and social skills). There was no control group of sites and the monitoring form was not nationally moderated.

- In the National Strategies report, one site (Peterborough) had compared ECAT and non-ECAT sites regarding the impact on home learning environment, hard to reach parents, parental involvement in learning and development, positive relationships and transitions. The ECAT sites were more likely to be performing better in these parameters.
- ECAT child monitoring 0-60 month checklist
- http://www.foundationyears.org.uk/wp-content/uploads/2011/10/ECAT_child_monitoring_tool1.pdf

WellComm

- An individual assessment, suitable for children aged 6 months to 6 years.
- Unique traffic light system to identify level of intervention required
 - **Red** – Consider referral to specialist service for further assessment /advice.
 - **Amber** – Extra support and intervention required
 - **Green** – No intervention currently required
- Big book of ideas, provides 150 activities designed to targeted the identified need of the child in the screening tool.

Evidence

- Found a **13% drop** in those screening red, a **12% drop** in those screening amber, and a **25% rise** in those screening green.
- We also managed to significantly close the gap for disadvantaged children whose language environment at home might not be as rich as it could be.
- At the start of the project, **66% of children on free school meals screened as red or amber, compared to 45% of those not FSM. On the second screening, just 25% of these children were red or amber, compared to 20% of those not on FSM.**
- Staff were re-issued a questionnaire, which showed that more than double now felt confident in identifying children with speech and language difficulties (from 46% to 94%). **Those who felt they had sufficient skill and knowledge to support these children had risen from 13% to an impressive 90%.**
- Other settings have expressed an interest in similar projects and the early years pupil premium funding will offer a good opportunity to get involved. WellComm is a cost efficient way of identifying children early and supporting their language needs, and it meets various Ofsted requirements.

Progression Tools Communication Trust

- The Progression Tools aim to support teaching staff to identify children who may be struggling to develop their speech, language and communication skills. They can also be used to track progression of these skills over time or following interventions.
- covers the ages of 3,4,5-6,7-8,9-10,11-12,13-14 and 16-18.
- Each progression tool contains a colour reference booklet, with instructions on how to use it.
- 2 sections, direct questions with the child followed with an observation,
- <http://www.thecommunicationtrust.org.uk/resources/resources/resources-for-practitioners/how-to-use-the-progression-tools-video/>

Speech Link

- **Infant and Junior Link**
 - include a language screening assessment and a whole range of supporting resources and advice are provided to address both classroom practice and small group work. The assessments are recommended for use as a universal screen in year R and the start of Key Stage 2
- **Secondary Link**
 - It equips schools with a standardised screening tool to identify pupil's understanding of language at Key Stage 3. Schools are supported to address the needs of pupils identified using the small group intervention, TALK FITNESS.

Next steps after screening for universal and targeted levels.

- The Communication Trust “What works” database.
- What Works is a moderated virtual library of evidenced interventions that aim to support children's speech, language and communication.
- Allows practitioners to search interventions by target group, age range, focus of intervention and who will be delivering the intervention.
- Evidence for intervention is rated as strong, moderate or indicative.
- Supports decision making for intervention packages.

Next step for Specialist level.

- Specialist level should:
 - Enhance knowledge and skills across the school.
 - Individual, specialist support for children.
 - Designed and managed by a Speech and Language Therapist
 - Could be delivered as 1:1 or group work.
- Check what the local trust offers.
- Commission SLT service within the school.

Thank you

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