



**Audit of the provision for  
speech, language and  
communication needs in  
London Borough of Hounslow**



**Report of findings  
January 2010**



This SENJIT report has been produced as  
part of a commission from the LB  
Hounslow team working on the Bercow  
Pathfinder project



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## Executive summary

This report summarises the framework and findings of an audit carried out by SENJIT, Institute of Education, University of London, as part of LB Hounslow's Bercow Pathfinder project on provision of services for children and young people with speech, language and communication needs (SLCN). The report also sets out some preliminary conclusions.

### Key points from school interviews

- Levels of SLCN are increasing
- The services and other forms of support are well thought of and appreciated
- Respondents feel that there is not enough support or training available for SLCN; levels of pupil need are increasing and changing, but this is not matched by increases in the necessary resources
- The interventions most valued are those that take place in schools, alongside teachers
- The earlier the intervention takes place, the more likely it is to be effective, so any lack of information about a child entering school, can delay meeting the child's needs
- There was limited evidence given of adaptations to the curriculum for pupils with SLCN, and of data driving practice in terms of speech, language and communication
- KS3 and 4 teachers have less experience of dealing with speech and language needs and behavioural problems can increase
- EAL, EBD and ASD issues can make speech, language and communication needs diagnosis more difficult, especially for class teachers

### Key points from all focus groups (professionals and parents)

- There are strong positive feelings about services, special units and centres
- There should be training for class teachers, SLTs and TAs to work together as a team and time available for regular meetings
- Pupils need to be well established at a proficient level of language and communication by Y3 when more abstract thought and independent work is expected. After this, little time and few services are available to help with SLCN
- SLTs working in education settings would like have more say in the timing, duration and prioritisation of collaborative working
- Some parents have concerns about the levels of understanding, knowledge and support that were available to them when seeking appropriate interventions for their child with SLCN
- There are some concerns about how the SLT service will plan for the possibly unpredictable and variable demands from schools if a cluster-commissioned model is introduced.

### Key points from research and national guidance relevant to the audit

- Hounslow's situation in terms of population is not unique: the Pathfinder should be able to draw on the experiences of other authorities with similarly diverse populations
- Cost-effective, systematic support for schools and services on using outcomes data on SLCN could be provided by dedicated SLT or EP time
- The Inclusion Development Programme and other recent work on initial teacher training and induction should lead towards setting schools' own professional development, supported by outside professionals, at the heart of the Pathfinder's strategic thinking
- There is a fair selection of soundly researched models within early years and primary schools and settings to draw on. The Camden Resource Bases, the SPARKLE programme for early years and the Language Link programme offer holistic and cross-institutional models for intervention. Similarly, Hounslow's own ECAT programme is highly regarded.
- Fewer studies are available for secondary provision but those available suggest that a small investment can make a substantial difference. The Pathfinder should also follow the

outcomes of the DCSF Achievement for All initiative, as it is likely to offer valuable ideas on effective working, including some on parental engagement.

### **Key points from the national experience relevant to Hounslow SLCN provision**

- National experience suggests it would benefit Hounslow services to review schools' and settings' understanding of the division of responsibilities for funding interventions for SLCN.
- School leaders should be supported in reviewing their provision to ensure that it offers a holistic model of universal, targeted and specialist intervention and developing their approaches to the assessment of outcomes for SLCN.
- Attention should be given to reviewing the deployment and impact of support staff working with pupils with SLCN and considering the balance of use of such resources with that of other professionals such as specialist teachers and speech and language therapists
- Work with Hounslow's school improvement partners should emphasise challenge and support for schools' work with SEND and particularly SLCN.
- The Borough should make more use of readily available resources for developing accountability and supporting provision development on SLCN, such as collated results of annual reviews of statements of SEN.

### **Conclusions**

In designing the next steps of its programme the Pathfinder team should give consideration to the key findings of this audit:

- Respondents were agreed that there is excellent provision for SLCN in some schools, settings and services in the LB Hounslow. They felt, however, that there was not enough of such provision.
- Respondents tended to emphasise the need for 'targeted' and 'specialist' support for SLCN. However, the Hounslow data, like that of many other authorities with diverse populations, suggests that an equivalent emphasis on 'universal' provision will be essential for coherent and consistent progress in raising outcomes for all children and young people with SLCN. Responses to this could include spreading information on whole-school or setting communication policies and practice as a route to institutions' self-development in this area.
- As in many other LAs, time for discussion of SLCN in Hounslow, whether by teacher, officer or parent groups, has been limited in comparison with that given to written literacy needs. This has led to some uncertainty about appropriate models of provision for SLCN. This could be remedied through extended professional development and modelled through Pathfinder initiatives involving SLTs and specialist teachers working in classrooms alongside teachers. It could also be productive to consider further developing outreach activities from the highly regarded specialist school and centre provision in the authority. For early years, extension of the ECAT initiative was widely supported by respondents.
- Overall, support for schools, authority officers and PCT staff in analysing data about outcomes for pupils with SLCN has been limited. Readily available data, used with some central support could allow school leaders and others to re-assure themselves that their provision offers value-for-money for pupils with SLCN.
- There is some uncertainty about roles and responsibilities for funding work with pupils with SEND, including those with SLCN. This may have led some school leaders' to hesitate about commissioning services, though this may also relate to doubt about the existence of central structures to support such a 'buy-back' system.

# Introduction

A team from SENJIT, Institute of Education, University of London, was commissioned to audit, as part of the Bercow Pathfinder project won by LB Hounslow, the local provision of services for children and young people with speech, language and communication needs.

In consultation with local authority and PCT colleagues the team devised and implemented an audit framework that would, in a short time in November and December 2009, yield findings that would be sufficiently detailed and representative to allow the project's steering group to devise appropriate strategic approaches to enhance the provision for SLCN across the authority.

This report summarises the framework and findings of the audit and sets out some preliminary conclusions.

## Structure of the report

The report has five sections. The first four explore different aspects of the findings and the fifth suggests some conclusions.

Section 1 explains how the audit was designed and implemented and discusses the findings for the school interviews and parent and professional group interviews in some detail.

Section 2 sets the report in a wider context and seeks to associate the findings with national reviews and research findings

Section 3 offers some practical suggestions for development of services based on the audit's findings

Section 4 considers contextual and resource issues within the framework of national developments

Section 5 suggests some conclusions that may be useful for the future development of the Pathfinder

The appendices comprise

1. a glossary of abbreviations used in the report
2. interview schedules
3. the codings used to analyse the findings set out against frequency of response and category of respondent.

# Section 1: Summary of interview findings

## Introduction: the audit framework and its implementation

### Schools

Selected schools across Hounslow were invited to participate in this audit. While the sample was not statistically representative, schools were chosen to ensure a geographical spread, a variety of intakes, a mix of mainstream and special schools, and schools with additionally resourced provision. Arrangements were made for the research team to visit the schools that had accepted the invitation and to interview staff who had agreed to take part. Those visited include a secondary school, several schools teaching Foundation, KS1 and / or KS2 pupils, a primary and secondary special schools and a variety of units for pupils with special educational needs. A total of 13 schools and units participated in the study.

### Group interviews

Three group interviews also took place: one group consisted of professionals working with children and young people and families, one of parents (mothers) and one of speech and language therapists (SLTs).

### Model of interview

Semi-structured interviews were used throughout. The semi-structured form allowed the asking of follow-up questions, for clarification or to pursue points of particular interest. Follow-up questions were left to the discretion of the interviewers.

### *The school interviews*

The interviewers followed a schedule of questions. While the questions were essentially the same for all groups, they were given a slightly different emphasis for managers such as SENCOs, head teachers and teachers in charge of units or class teachers and class-based support staff (teaching assistants and nursery nurses). The questions dealt with issues that had been identified by the steering committee as of particular interest for the Pathfinder Project, but the formulation of questions and their sequencing was the work of the Institute of Education (IoE) consultants and involved sharing drafts and taking note of comments from LBH/PCT colleagues. (The schedules are included as Appendix 1.)

Three IoE consultants and Jonathan Hill-Brown of the Borough's Scrutiny team, working in pairs, completed the interviews over a period of three weeks in November 2009, with one person asking the questions and the other making notes of the answers and any supplementary questions asked by the interviewer. The majority of interviews were also recorded on a digital voice recorder and these recordings were drawn on to 'fill out' the handwritten notes taken in the course of the interviews. All interviews were typed up by the consultants or administrative staff at the IoE.

A total of 27 interviews are reported in this account and they express the views of 35 school staff members (several interviews were carried out with the head teacher and SENCO together). 26 primary phase staff and 9 secondary age staff were interviewed.

The interview transcripts were scrutinised in detail to identify any points which were of relevance and importance for the purposes of the Pathfinder Project. Each instance was allocated a code and in this way, a 'coding frame' evolved, covering the whole range of points deemed significant by the researchers, with related points being grouped together in the frame under the broad headings derived from the interview schedules (see Appendix 3). Once all interviews were coded in this way, the codes were collated into a table.

The numbers recorded in the table refer to the number of times a particular response was recorded, *not* to the number of people who gave the response. So, any one interviewee may have mentioned the same point several times and each one was coded and included in the total. In this way, the frequency of any particular code stands as a type of measure of the importance or significance of the point represented by the code (e.g. there were **54** instances of code 2b), which represents the view that working with the speech therapists is valued, helpful and positive etc, whereas there was only **one** instance of code 3a) ix) which represents the view that if there is a shortage of SLTs, then teachers should be trained to take over their role.)

In order to explore any possible differences of opinion, perception and experience between the various types of participant, the data was sorted into the nine categories that head the columns in the table of data [from Primary head teachers (which include nursery, infant and junior schools) to support staff (TA and NNEB)]. One aspect of the sample, the fact that different numbers of each category of staff were interviewed, prevents the simple comparison of numbers across the columns. For instance, since seven joint interviews of SENCOs and primary head teachers took place, one would expect there to be more instances overall (424) in this category, when compared with the one joint interview of a secondary school head teacher and inclusion manager (74).

However, there remains the possibility of useful comparisons being made, particularly where any specific point is referred to repeatedly by one category of staff and never mentioned by another [e.g. codes 2 v) i) – xii) which deal with budget / finance issues: there are 10 instances for special school head teachers (2) and zero instances for teachers in charge of units (3)]

## 1.1 Findings of the school interviews

### Speech and language services

The evidence of opinions, perceptions and experiences of speech and language services in Hounslow derived from these interviews, leads to the following broad conclusions:

- The services and other forms of support are well thought of and appreciated (2b), (2dii), (2e), (2f), (2p), (3ai), (5biii) and (6fii)
- The widespread feeling is that there is not enough support available for SLCN, seen by some as the consequence of budget restraints causing staff shortages (2c),(2i),(2q),(2t),(2viii),(2viv),(2vx),(2xiii),(2xix),(2xxv),(2aa),(2ll)
- The interventions most valued are those that take place in schools, alongside teachers, who learn new skills, understanding and approaches which they can then employ when the speech and language therapist is not present (2b),(2e),(2f),(2g),(2s),(2ff)
- Training for teachers and TAs is valued, but more is needed (1m),(1n),(2vxii),(2wvii),(3ai – x),(4di),(4dv),(4dvi),(6fi),(6fii),(6h)
- The earlier the intervention takes place, the more likely it is to be effective, so any lack of information about a child entering school, can delay meeting the child's needs (1fi,ii,iii),(1k),(2xvi,vii,viii),(2yiv,ix),(4aiv),(4dxiii),(5c)
- As pupils get older, the provision for SLCN decreases, KS3 and 4 teachers have less experience of dealing with speech and language needs and behavioural problems can increase (1c),(1lii),(2c),(2v v),(2x x),(2ii),(4aiv),(6c),(6e),(6k),(6m)
- EAL, EBD and ASD issues can make speech, language and communication needs diagnosis more difficult, especially for class teachers (1a),(1div),(1fviii),(1j),(1n),(2j)
- Levels of pupil need are increasing and changing, but this is not matched by increases in the necessary resources (1a),(1div),(1i),(2v iii),(2v iv),(5h),(5i)

The generally positive view of the speech and language services and associated services, needs to be set alongside a relatively small number of critical responses, dealing with specific details, which mostly reflect the views of individual interviewees:

- Reports from professionals (including SLTs) are not always as useful for teachers as they could be (2a)
- The quality of speech and language therapists varies (2di,iv)
- Speech and language therapists need to have awareness of how schools work (2ki,ii)
- SLTs are not sufficiently monitored, praised and appreciated by the SLS (2l,m)
- Excessive report writing and other paperwork reduce time with pupils (2n,o)
- The PCT is failing in its responsibilities/not enough available (2x i,ii,iii)
- The statement rarely includes SLT/section 5 [of the statement] used to avoid expenditure (2X iv,v)
- Pupil entry and attachment to specialist units is an issue for some (2y iii,v,vii)
- There is a need, desire and potential for outreach / support / training / resources from specialist units to mainstream schools which is not being fully met (6b)

### 1. Pupils' speech language and communication needs

The largest number of responses in this category (31) was of a general nature, with comments on the wide range of needs, including some which referred to the generally low levels of speech and language. Another 14 responses specifically referred to those pupils who spoke only a few words, whilst 21 made mention of pupils with ASD, who were increasing in number in the school population. Autism was mentioned more frequently by the secondary, special and unit staff

combined (11 responses) than by the primary staff (10 responses), in spite of the much larger number of primary staff interviewed

Identification of pupils' SLCN was done in a variety of ways, with roughly equal numbers of references to nursery / EY Foundation profiles (17), SLT assessments (15) and the experience of teachers in making observations (15). However, some of the 15 accepted that it was easier to be sure about only some communication impairments and a further 9 responses admitted the limitations of teachers' qualification to identify needs. The largest number of responses (33) made the point that EBD and EAL can mask SLCN and there is a need to differentiate the causes of any delay or other difficulty. Some mentioned the use of mother tongue assessment as a means of separating causes, where staff had doubts.

Staff had relatively little to say about how they have adapted the curriculum for pupils with SLCN (total of 29 responses from the 249 in category 1). Five responses admitted the challenge of making such adaptations and expressed a need for guidance and a further 4 noted that the problem increases as the pupils get older. The most common adaptation (5) was to assign pupils to smaller groups – not really an adaptation of the curriculum at all, but a classroom organisational change. There is a serious issue revealed in the paucity or confusion of response to this question about curriculum adaptation. Identifying needs is but the first step. Teachers need the understanding, knowledge and skills to respond to the wide range of needs with appropriate curricular adaptation, such as level of content, pace, form and presentation of tasks, use of equipment etc.

## 2. Staff knowledge, awareness and perceptions of Hounslow's support services for SLCN (SLT, PCT, Education Psychology, Teaching Support within Early Intervention Teams)

This category had the largest number of responses (386) and ranged over the largest number of codes (from 2a to 2ll). This can be taken as an indication that staff have many things to say when given the kind of opportunity provided by the anonymous interviews. It also reveals the very individual, particular experiences which have contributed to their views (in the case of 35 responses, each was made by only one person and a further 21 were made only twice). However, the details are all valuable as 'windows' into the experience of LBH school staff and should not be discounted on the basis of frequency alone.

The response most often given (56), expresses, in various forms, the view that more SLT time, support, expertise and intervention are needed and most definitely wanted. This is a 'back-handed compliment' to the speech and language therapy service, as it reveals a high regard for the staff who work in it. Indeed, this is emphasised by the 54 responses which express satisfaction, pleasure and professional benefits which school staff derive from working with SLS staff. This is expanded in more detail by a further 27 responses which refer to the valuable ideas which SLTs can impart to school staff, described in a variety of very positive terms such as 'brilliant', 'extremely helpful' and 'really valued', followed by those (24) which refer specifically to the influence which SLTs have on school practice through training of teachers and TAs and the way they model lessons and / or provide 'lovely, precise ideas' and resources. All of these positive responses build up a picture of school staff acknowledging their need of specialist expertise in meeting the SLCN of their pupils and a huge willingness to learn from, cooperate with and build upon the work of SLS staff. There is the added attempt by some school staff to defend and 'fight the cause of' SLS staff, in the sense that they feel their work is not recognised and appreciated sufficiently by the SLS, partly because they are not regularly monitored (7). The shortage of SLTs is seen in part as due to lack of financial rewards (7) which contributes to difficulty in recruiting and retaining SLTs (7). This exacerbates problems of workload, multiple roles and bureaucracy, further reducing the highly appreciated in-school support which SLTs can provide, described as 'crucial' and 'excellent' (7).

Though mention is made of budgets and finance, this is not in any way as important an issue as the general one set out above (only 23 responses compared with 254). Most deal with specific points particular to the interviewee, but several (5) make the point that the needs now exceed the capacity of the SLS and this is due in part to changes in the school population which has increased SLCN, though cuts are seen by some (3) as a further contributory factor. As might be expected, the vast majority of responses (20 of the 23) were from head teachers.

Commissioning of services directly and independently was an issue which produced very few responses (28) and there appeared to be some uncertainty and differences of opinion and experience. Five of the 12 sub-categories had only one person's response. Schools which had commissioned services reported hiring SLT, EP, community worker or social worker (10) and they commented on particular aspects of the experience: difficulty, expense and the need to get 'value for money'. Some still felt that they were not sufficiently informed to make such choices (4 responses), whilst one interviewee was confident that they had all the information they needed. Belonging to a cluster had allowed some respondents to participate in commissioning (7 responses). This suggests that pooling of financial resources is one, if not the only, way to be able to commission directly.

There were issues across Hounslow services which drew comments from some respondents (37 responses). Lack of provision, rather than quality, was the most common issue mentioned. The largest number of responses (8), made by staff in all three types of schools, referred to the EP service. Six commented negatively about the availability of EPs (combined with two positive comments on their quality) and there were two additional wholly positive responses. There were no negative comments about the quality of the EP service.

Entry to specialist units was an issue for a small number of interviewees (each of the 8 out of 15 responses was only made by one person) and the single point about the mechanism for entry was the most frequently mentioned (7). Opinions and experiences varied and so no clear picture emerges with regard to units, as most of the comments are descriptive rather than evaluative in nature.

The remaining general points in this category (29 responses) range over a number of different issues. The largest number (7), query the efficacy of SLT sessions with individual pupils, not from the point of view of quality, but duration. All these comments were from primary school staff. The second most common response (4) refers to Children's Centres in positive terms, with a call for an expansion in this provision. Again, all these responses were from primary school staff. The remaining comments were a mix of praise and criticism for various aspects of Hounslow services provided by LBH.

### 3. Current interventions for pupils' SLCN

The largest single issue in this category is that of training for teachers to improve their ability to intervene effectively (75 of the 236 responses). The first three responses add up to the bulk of these (59) and they reveal a genuine desire for, acknowledged need of and appreciation of training provision. This pool of unmet need is a very significant issue and the goodwill and willingness of school staff should be capitalised upon, in making interventions for pupils' SLCN more effective.

Staff listed 17 techniques employed in teaching pupils, from the most common three – objects of reference / visuals (19), cued articulation (17) and Makaton signing (16) – to a large number of less commonly named techniques such as hand tapping and making eye contact. It appears that staff have benefited from SLT advice, modelling, resources and training, which have enabled them to employ such a range of appropriate techniques. However, not all respondents claimed to use all techniques, so the need for new skills and expertise cannot be considered fully met.

#### 4. Effectiveness of interventions

Amongst the general views expressed (19), the most common was that interventions need to start earlier and are less effective as pupils get older (8). Only 5 responses attempted to give an evaluation and these ranged from 'pretty effective' to 'extremely effective'. The low number of such evaluations could be seen as a matter for concern, but the reasons so few people were confident in giving such feedback are not known; an area for further exploration. Primary school staff provided 16 of the 19 responses in this sub-category.

Interviewees gave far more responses (79) which identified the forms of evidence used to evaluate effectiveness; there is a curious mismatch here, as apparently a lot of evidence is collected, but the conclusions reached are not clear, or the evidence is not interpreted in that way. The bulk of these responses (51) refer to various aspects of tracking progress, by way of IEPs, targets and making notes of achievements. Class teachers, Head teachers, SENCOs and SLTs are all credited with making such evaluations of pupil progress and monitoring the effectiveness of interventions, but the bulk are done by school staff. Again, the 26 primary staff account for the majority of the responses about evidence (53), but the four special school staff contributed a far higher number per person (18 in total). This could be seen as a consequence of special school staff being more concerned with and / or able to carry out the evaluation of interventions, since the progress made by pupils with SEN can often be incremental and at a slow pace and learning programmes can be much more 'individualised' in the context of small classes.

The ways in which practice is informed through this process of evaluation, are seen largely in terms of school and individual targets, mapped onto IEPs, sometimes using the P scales or school-based fractions of those (26 of the 35 responses). These responses do not actually reveal how classroom *practice* is informed; they are at one remove, as they speak only of documentary outcomes.

By far the most common response, in this category of 'effectiveness' (96 of the 234), dealt with teaching assistants (TAs). This in itself is very significant, as it reveals an important aspect of school staff thinking, across all the school types represented in this study. Although most references to TAs were from primary school staff, it is the small number of special school staff who had the highest number per person (4 staff made 32 references), perhaps indicating their reliance on having such support staff working alongside them. Whilst most responses express positive views of the contribution made by TAs to effective interventions (58), there is a significant number of responses indicating that more training, leading to better understanding of SLCN, is needed by their TAs (15). Clearly some TAs are seen as capable of teaching pupils independently of the teachers and not all teachers have time to liaise regularly and at length about the interventions being carried out by the support staff. There are issues around such widespread and varied practice which should be further explored.

#### 5. Parents

The interactions which schools have with parents seem to vary in kind and frequency across the schools included in this sample. Primary schools report the highest number (117 of the 188), but the two special schools had an even higher rate of mention per person interviewed (44). These results are no surprise, as it is generally the case that the parents of younger pupils and those with SEN, are more often in contact with and collaborate with school staff, than parents of older children. The most frequently mentioned means of having contact with parents are reports, documentary information and home/school books (18), open evenings and other general in-school events (16) and courses, workshops and awareness raising sessions (16). Although there are 13 references to good relationships and lots of engagement, these have to be set alongside the 16 responses recording the lack of parental support and agreement and negative responses to what the education

system is attempting to do for their children. Some of these reactions are put down to cultural differences with regard to young children speaking and listening. When set in the context of the view that the nature of the school population in Hounslow is changing and SLCN are increasing, this perhaps indicates the need for some targeted provision.

## 6. Links with other schools

Only two responses reveal no links. A larger number (9) express the need, desire and perceived value of such links, especially from mainstream schools to units and special schools. The remaining responses identify particular forms of link which already exist between schools (51) and this can be seen as a positive aspect of how pupils and teachers are benefiting in terms of SLCN. It appears that there is potential for a more widespread and systematic development of inter-school cooperation and support. Such a development would be 'pushing at an open door' so far as the mainstream schools is concerned, but it obviously has financial and staffing implications for the units and special schools, whose staff have the expertise which is so clearly in short supply and highly valued.

The number of participants and the lack of statistical representation, mean that these findings must not be taken as a definitive description of the views of all staff in LBH schools. However, they are a true reflection of participants' responses to the questions put to them, given voluntarily and anonymously. We feel that they provide a valuable source of issues and statements for use in the next stage of the Pathfinder Project, in the form of questionnaires, further more focused interviews, or in focus group discussions.

### **Summary: key points**

- Levels of SLCN are increasing
- The services and other forms of support are well thought of and appreciated
- Respondents feel that there is not enough support or training available for SLCN; levels of pupil need are increasing and changing, but this is not matched by increases in the necessary resources
- The interventions most valued are those that take place in schools, alongside teachers
- The earlier the intervention takes place, the more likely it is to be effective, so any lack of information about a child entering school, can delay meeting the child's needs
- There was limited evidence given of adaptations to the curriculum for pupils with SLCN, and of data driving practice in terms of speech, language and communication
- KS3 and 4 teachers have less experience of dealing with speech and language needs and behavioural problems can increase
- EAL, EBD and ASD issues can make speech, language and communication needs diagnosis more difficult, especially for class teachers

## **1.2 Findings from the professionals', speech and language therapists' and parents' focus groups**

### **The focus group for professionals**

#### High demand

- there is huge need among children and young people in terms of speech, language and communication
- many children are not identified early
- some children are not provided for
- need more money and more people
- are there adequate services for children 1-3 years?

#### Partnership with schools

- education staff need to be equipped to identify SLCN
- NQTs are ill prepared; they don't have the confidence to identify SLCN
- there needs to be training for teachers and NQTs in SLCN
- there are not resources in schools to support the SLTs
- teachers are fully occupied with 30 children
- there needs to be commitment from the school management
- classroom teachers need support to interpret SLT reports

#### Cross-service partnerships

- CAMHS team require a speech and language therapist to join them to obtain a clear picture of children of the children on the autistic spectrum
- there needs to be better working between education and health
- it is hard to make the 'team' a reality
- Youth Offending Service report that when young people are not excluded there is less help available

### ***The professionals' recommendations***

- There should be mothers and children's groups to encourage toddler talk
- There should be more health visitors
- There should be a review of access to the excellent Children's Centres: are they catering for the less needy?
- We need more developments like The Hub, which has education, medical and social services - excellent
- It is vital that there is a dedicated SLT attached to the CAMH service
- There should be a specialist speech and language person in each school
- School clusters could commission SLT services
- There should be screening for language difficulties
- There should be more opportunities to educate parents' and teachers' groups
- ECAT work should cover more/all settings

### **From the focus group for speech and language therapists**

#### High demand and workload

- More ASD referrals are coming through and there are more 'PMLD survivors'
- There is a waiting list for commissioned work in schools

- There is inequality of provision across settings
- SLTs experience dissatisfaction with their jobs through high caseloads
- Not enough time is given for school visits: once a year is not enough

#### Partnership with schools

- The service we can offer depends on how active and engaged the school is
- The success of a programme from an SLT can depend on whether or not a TA is assigned to a pupil
- TA quality is variable
- There is no allocated administration time for SLTs' work in schools
- There should be time for SLTs to model activities for teachers and teaching assistants
- It is better if SLTs are a member of the school team
- School training by SLTs can be effective
- It is difficult to meet with parents when children are bussed in to school
- There is no time for liaison with teachers and TAs
- Schools are more likely to refer pupils with language and behaviour needs, rather than those with SLCN alone
- Some schools are judgemental about parents
- Teachers see language as literacy, not oral language

#### Cross-service partnerships

- SLTs need time to work with EPs and OTs
- There should be a child development team assessments, including EP, rather than individual assessments
- The information technology systems in use are not helpful
- SLTs cannot print anything in schools
- Early Bird and Portage have good feedback
- ECAT is making a difference
- There is now no 2 ½ year check from health visitors
- SLTs need more help with EAL and translation service

#### ***The speech and language therapists' recommendations***

- Make advice sheets available on line
- Allow greater opportunity to work with families at home
- SLTs could work more in schools
- Less formal opportunities for discussion, like coffee mornings, would be appreciated by parents
- Introduce a translation project eg for Somali children, for home language assessment, include BSL (British Sign Language)
- Services need to address cultural issues such as Somali understanding of autism
- It would be useful to produce SLT leaflets in other languages
- There is a need to evaluate all services SLT offer, a complete systems analysis
- Individual EPs who are keen to work with SLTs should be encouraged
- There is a need to produce ideas for schools – especially how to use devolved funding
- Steps should be taken to ensure that children's centres are taking the children they were designed for
- There is a need to work with families, eg those with a parent in prison
- Devise a project on how to work best with a TA
- Services should jointly review assessment of progress: pupils make progress in centres but their assessment is in mainstream without visual aids, etc., leading to underestimates of progress

## The parents' focus group

Five mothers attended the parent focus group. The ages of their children with SLCN ranged from 3 to 19 years (all were presently in preschool or primary settings except for two late teenage brothers). They attended mainstream and special schools and centres.

The discussion guide covered the following topics:

1. Parents' experiences and perceptions of their child's needs
2. Local services response to their child's speech, language and communication needs
3. Information and support for parents
4. Parents' involvement in influencing services.

The nature of the discussion in the parents' group was naturally more focussed on their own experiences with their child. Each mother was concerned to give her own account. On the whole these were individual experiences and were not set against the larger picture or interpreted with reference to service provision generally.

The mother with the children who were much older than those of the rest of the group would obviously have experienced some of the services as they existed some time ago.

It was apparent, even within this small group, that mothers had had very different experiences. The interviewees tended to relate these to the helpfulness or otherwise of the professionals they consulted, and the availability of acceptable educational placements.

For example, some mothers found that their initial concerns were not taken up by the GP or health visitor, while others obtained immediate referral to a paediatrician or SLT. It is not clear whether these responses were related to the obviousness of their child's needs, but lack of speech and language development on its own in a young child may not initiate concern from some professionals.

A mother whose child was physically disabled as well as having SLCN received a quick referral and an acceptable preschool placement. Several mothers reported their difficulty in obtaining some services, such as a hearing test. SLT was welcome and the child's progress was evident, but mostly mothers would have liked more for their child. One mother mentioned that the continuity of the therapist was welcome. Some mothers would have liked a clearer picture of future plans; not knowing what SLT would be offered or the likely progress of their child was a concern. Another mother received the Portage Service and found that 'fantastic'. Another reported a particularly distressing experience with a local authority officer (role unknown) who disagreed about the nature of the child's needs and therefore the appropriate educational placement.

Mothers' views of the ease or difficulty of obtaining educational placements for their children also differed substantially. One was unhappy that there was no place in her school of choice and appealed against this. A mother who carried out her own research felt that education excluded medical advice. The mothers would have liked more guidance and information about who or where to go to in order to find an appropriate placement. The mothers appeared to feel on their own in their search for support. They did not report using the internet, although one mother went to the library. One suggestion for help was that there should be a drop in centre with a mix of professionals. However, only one mother had heard of the Parent Partnership Service, and none had heard of Parents in Touch. The mother who had used the PPS did not find it useful.

But they seemed generally satisfied with the placements their children had taken up, by whatever route they had arrived there. For example, one mother was happy with a nursery place which

included specialist services; others mothers were content with the language unit or centre placements when they were finally offered. Mothers were often happy with progress of their child, especially if there was support from specialists (such as an SLT) or extra help from a teaching assistant. One mother felt her children were 'transformed' by attendance at a language unit.

The mothers appreciated it when the school and staff were helpful and the SLT shared information. Some staff were reported to not have a 'good attitude' and did not listen to parents. The group felt staff should be aware of the child's other needs besides SLCN, for example, for occupational therapy.

They felt that a parents' group would be helpful but that they might find it difficult to find time to attend.

Parents felt that the administration of the education service was distant, and that professionals should be more sympathetic to families with a child with SEN and disability. None of the mothers felt that they had influenced services in the LA.

The picture presented by the mothers' is very mixed, with some experiences being very good and others distressing. The emotional toll of caring for a child with SEN and/or disability does not always appear to be taken into consideration by professionals from education, medical and administration services. Knowing who to go to and where to find appropriate information and support are vital.

Some conclusions from the parents' focus group:

- Education, medical and administrative staff should be well informed about SLCN
- They should know how to deal sympathetically with families with a child with SLCN
- Mothers/parents/carers require assistance in finding acceptable educational placements
- Though they were by and large satisfied with the provision for their child, the mothers did not appear to be particularly aware of its details
- Information about the PPS and other helpful organisations, eg ICAN, Afasic, Mencap, Parents in Touch, should be given to parents as a matter of routine
- Parents did not seem clear about the different service providers; they would be likely to welcome a more joined-up approach
- Parents in this group did not see their relationship with the authority as that of partnership

### **Summary: key points from all focus groups**

- There are strong positive feelings about services, special units and centres
- There should be training for class teachers, SLTs and TAs to work together as a team and time available for regular meetings
- Pupils need to be well established at a proficient level of language and communication by Y3 when more abstract thought and independent work is expected. After this, little time and few services are available to help with SLCN
- SLTs working in education settings would like have more say in the timing, duration and prioritisation of collaborative working
- Some parents have concerns about the levels of understanding, knowledge and support that were available to them when seeking appropriate interventions for their child with SLCN
- There are some concerns about how the SLT service will plan for the possibly unpredictable and variable demands from schools if a cluster-commissioned model is introduced.

## **Section 2: Recent research on speech, language and communication needs set against findings from the Pathfinder audit: some implications for Hounslow**

### **Introduction**

This section aims to provide a view of how recent research and national guidance might be taken into account in planning future developments in for speech, language and communication needs in Hounslow following the Pathfinder audit.

Language and communication (SLC) provide the essential foundations for learning and for the development of literacy and numeracy and are essential for the development of social skills and emotional literacy. Dockrell and her colleagues outline the importance of oral language in a paper for ICAN. They state that language is 'an integral and interrelated aspect of the child's social and cognitive development'. Language skills are necessary in order to access the school curriculum, for the comprehension and expression of spoken language, for literacy and educational achievement and to interact with peers and adults (Dockrell, Sylva, Huxford and Roberts 2009).

#### **The national population**

Research by Locke, Ginsborg and Peers (2002) suggests that as many as 50% of children in socially disadvantaged areas may enter the education system with transient SLCN, while about 10% may have more persistent difficulties (Law et al 2000). The Millennium Cohort Study of 12,000 children (Hansen and Joshi 2007) found that many EAL learners (particularly those from the Bangladeshi and Pakistani community) at 3 years of age were severely delayed in expressive language. Although non-English speaking children were not included, it is not clear how much children's reactions to being assessed affected the results.

#### **The local population**

LB Hounslow has a high percentage of children with EAL<sup>1</sup> and children from a low SES white population and an increased number of children entering school in recent years. It is reported that more children are being identified with ASD and social communication difficulties. Many of the education staff interviewed for the audit mentioned the increasing numbers of children entering school with poor or very poor speech, language and communication skills. No increases in SLT resources were reported.

Many of the education interviewees, particularly from infant and nursery settings, mentioned the high level of children entering the education system with very little or no spoken language, both from the EAL population and from the indigenous white population.

### ***Summary of guidelines for best practice in the classroom***

Present government policy and practice guidelines for all pupils are based on Every Child Matters (DfES 2003), and for children with SEN and disabilities, Removing Barriers to Achievement (DfES 2004). Removing Barriers to Achievement stressed the benefits of early intervention and developing effective practice through education, health and social care working closely together.

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<sup>1</sup> Minority ethnic pupils formed 69% of the Hounslow school population recorded in the January 2009 school census.

Other publications relate more specifically to pupils with SCLN. For example, part of the Inclusion Development Programme (DCSF 2008a) aims to build capacity in schools to identify and support children with SCLN and to promote their inclusion through support to SENCOs and head teachers. The programme makes recommendations under the four sections for the Early Years Foundation Stage: a unique child, positive relationships, enabling environments and learning and development. For example, practitioners should be able to describe a child's level of speech, language and communication development and identify any issues that arise. The Inclusion Development Programme was not mentioned by interviewees. The SCLN materials have not been universally popular, but the programme as a whole represents an increasingly sophisticated approach to encouraging schools' own professional development on SEND.

A government programme that is already in place in Hounslow is Every Child a Talker (ECAT) (DCSF 2008b). This centrally funded initiative aims to increase practitioner knowledge and skills in supporting children's language and communication, with particular emphasis on working closely with parents. It aims to develop ways of working with children that will have a long-lasting impact. It does not yet cover all EY settings in the borough.

Staff in one school that had an ECAT early language lead practitioner (ELLP) appeared, as result, to be much more confident in their ability to cope with the significant language needs of their pupils. The ELLP was also undertaking a masters degree related to communication and the ECAT consultant support role. These factors allowed a flexible and child centred approach to the curriculum and organisation of the classroom. The respondents from the school were enthusiastic about their reorganisation of the classroom and teaching practices.

#### *Mapping progression in professional development*

The Speech, Language and Communication Framework (developed by the Communication Trust) gives detailed guidance on the expected levels of knowledge for practitioners (universal, enhanced, specialist, extension).

A recent article in the RCSLT Bulletin found a wide range of training delivered to school staff in Nottingham but 'it was ad hoc and inconsistent' (van Roekel 2010). Van Roekel suggested building on Bloom's learning taxonomy and mapped the skills required against this and the training packages available. They could then identify the most appropriate training packages.

## **Opportunities offered to Hounslow by information from current research**

### ***Summary of recent government policy and guidelines including the Bercow Review and the Lamb Inquiry***

The Bercow Report (2009a) describes the results of a national investigation into the success of provision for children and young people with SCLN.

The Bercow Report gathered its recommendations under five themes:

- Communication is crucial
- Early identification and intervention are essential
- A continuum of services designed around the family is needed
- Joint working is critical
- The current system is characterised by high variability and a lack of equity

The Report argues that communication is crucial, because it underpins the five outcomes identified in *Every Child Matters* ([www.ecm.gov.uk](http://www.ecm.gov.uk)): to be healthy, to stay safe, to enjoy and achieve, to make a positive contribution, and to achieve economic well-being.

The Bercow Report cited one example of good practice in successful early identification and intervention in an Action for Children project in Barrow-in-Furness (page 26 para 2.9). Though details are limited, it is clear that the team used a range of approaches to achieve specific, language-related learning outcomes. Outcomes recorded included increased confidence in parents, greater awareness of how they (parents) communicate, changes in children's communication and behaviour, and an increase in families' enjoyment of time together. In 2000 average word count of children of 2 years was 18 words, by 2007 they had increased this to 26 words.

#### *Research for the Bercow Review*

Lindsay et al (2008) investigated the SLCN services of six local authorities for the Bercow Review. Some interesting initiatives emerged.

Their case study authority 1 (CS1) (p 47) had a completely integrated SLT service across health and education. This resulted in the doubling in size of the SLT service: integration had required the detailed formalisation of inter-service protocols.

Authority 3 (CS3) (p 51) described a programme called Sparkle (p.101) that was well-established for early years and primary level SLCN support. This programme involved a multi-disciplinary team for early years of specialist teaching assistant, EP, occupational therapist and speech and language therapist. The team works in rotation in each nursery setting for two terms. They use demonstration, observation and joint working. The approach is designed to benefit all children including those with SLCN. They monitor their impact and have a university team to help with the evaluation. SPARKLE runs alongside a programme for children who need intensive help, who receive special input three times a week and an assessment. The authority also offers the Hanen programme for preschool children. This offers a play-based approach to language for children with SLCN.

#### Evaluation

The same study found that in monitoring the Children's Centre provision in CS1 (p 64) the authority collected data that focused on user satisfaction without evaluating effectiveness. Otherwise this LA used national curriculum assessments, individual education plans and annual reviews to evaluate progress. The secondary school used results from the Clinical Evaluation of Language Fundamentals (CELF) to monitor pupils' progress.

In CS3 (p 67) the special school used several approaches to monitoring pupils progress. They tracked pupil progress, set targets and used careful lesson planning plus value added scores and Every Child Matters targets.

Lindsay and his colleagues concluded that all six LAs and PCTs had staff (EPs and SLTs) qualified to undertake detailed research on outcomes; but this was rarely done. On the whole the LAs, although they collected data, did not evaluate outcomes which would help inform policy and practice. The team suggested that each local authority should specify time for an EP or SLT to look regularly at outcomes data for SLCN interventions.

The researchers noted that the British Stammering Association had carried out a survey of 67 PCTs for services to young dysfluent children (p 81). This enabled them to establish criteria that were considered necessary to provide a good standard of service for this client group.

In Law, Lindsay, Peacey et al (2000) an index of collaboration was used to investigate the degree of collaboration between health and education services. This tool might be useful to guide the development of co-ordination in Hounslow.

### *Lamb Inquiry: special educational needs and parental confidence*

The Lamb Inquiry (DCSF 2009b) was set up to investigate and advise on how to increase parental confidence in special educational assessment and provision. The report notes the degree of SEN identified in the school population: 20% of pupils in 2009. For children below the age of 7 the most common type of need was speech, language and communication, amounting to 42% of all pupils at School Action Plus.

The recommendations of the Lamb Inquiry included the following:

- A clearer focus on outcomes
- A stronger voice for parents
- A more strategic local approach
- A more accountable system

### Curriculum and assessment

The Inquiry noted that expectations were often low and that more attention had nationally been given to provision rather than attainment. The importance of social outcomes for pupils with SEND was mentioned in 44% of parents' responses to the Inquiry's web-based questionnaire. This has significance for the discussion of curriculum issues in relation to SLCN, an area that was rarely discussed by interviewees.

### Leadership

'Where strategic planning for SEN is effective there is strong leadership, a shared understanding of local needs based on detailed research and a clear strategy to develop in-house provision to meet this, including an effective inclusion strategy with local schools' (Lamb Inquiry 4.3).

As part of local strategy, it is important to be clear what a school should pay for from its delegated budget and what the local authority is responsible for funding. Delegated funding may diminish the LA's ability to monitor the progress of pupils with SEN and may reduce the range and quantity of specialist staff available to provide advice and support (4.20).

### Trial projects

Trial projects on increasing parental confidence in eight LAs suggested that significant improvements in target areas (information for parents, communication between the authority, schools and parents, provision, transition, team around the child and the use of key workers, decision-making) could be achieved for a relatively inexpensive outlay. The consultants report for Lamb sets out the key elements for such success.

### Achievement for all

These projects and the findings of Lamb have led to a major national investment in secondary school development on SEND known as Achievement for All. The scale of this (400 schools, ten local authorities) means that its findings will have wide significance: the emphasis the programme gives to parental engagement for this age group could be particularly valuable.

### Accountability

Lamb notes that 70% of permanent exclusions are of children with SEND. The tightest accountability should be ensured for children who are not making good progress or are not achieving good outcomes; we need the best data, best challenge through governors, school

improvement partners, elected members and school inspectors (5.2). The Inquiry recommends that local authority Scrutiny Committees support the effective monitoring of SEND services.

## Summary

The Inquiry produced detailed reports on many aspects of the issues involved: the Secretary of State accepted virtually all its recommendations. He proposes to legislate immediately on increased rights for parents in challenging perceived inaction after annual review of a statement and on a re-emphasis on Ofsted duties towards pupils with SEND. Many other concerns raised by the Inquiry, including a firm emphasis on the role of the school improvement partner in supporting and challenging schools' self-evaluation of their SEND provision, have been addressed without legislation.

## **Relevant research**

### *The importance of oracy for literacy, emotional well-being and mental health*

Language and communication skills are important for the development of literacy and educational attainment, for emotional and social well-being, and for behaviour. The Rose Report (2006) has documented the two essential processes underlying reading as word recognition and language comprehension (Rose 2006). The underlying linguistic process is essentially the same for oral and written language, one is accessed through hearing and one visually. Benner, Nelson and Epstein (2002) noted the relationship between social, emotional and behavioural difficulties and language impairments. Pupils who have difficulty in understanding or expressing themselves are more likely to experience SEBD, while pupils with SEBD are more likely to experience language deficits.

### *Intervention in early years*

Dockrell et al (2009) note that early years settings have evidence to draw on from a few soundly designed small-scale research programmes in the UK. Factors that are significant in promoting language and communication skills in early years settings are 1. practitioners' knowledge of oral language development and 2. their collaborative skills, including team planning and teaching. They quote Cordingley et al (2003, 2005) who concluded that sustained, collaborative continuing professional development is the most effective tool for changing teacher behaviours and for impact on learners. They describe the desirable components as:

- The use of external expertise linked to school-based activity
- Observation and reflection
- An emphasis on peer support
- Scope for teacher participants to identify their own continuing professional development focus
- Processes for sustaining the professional development over time to enable teachers to embed the practices in their own classroom settings (Cordingley et al 2005 p 13)

Three studies in early years oral language interventions (Bickford-Smith, Wijayailake and Woods 2005, Riley, Burrell and McCallum 2004, and Dockrell, Stuart and King 2006) provide some evidence of effectiveness. However, two of these (Bickford-Smith 2005 and Riley 2004) do not describe clearly what actually happened. Dockrell et al (2006) found evidence for the effectiveness of explicit language input: development of core vocabulary, ability to use language to predict and infer and the production of narratives. Story reading to children in a comparison group was less effective, but achieved better results than for the control group. Problems were identified in two studies with organisation of the programme (Dockrell 2006) and fidelity to the programme (Bickford-Smith 2005). Dockrell concludes that the time scales of interventions and their intensity must be considered; she adds that the ways in which practitioners implement the interventions require further scrutiny.

### Fidelity and intervention activities

Law (2006) suggested that intervention activities should be well-specified so that others can use and evaluate them. McCartney, Boyle, Bannatyne et al (2004) developed a research therapy manual of principles and activities which would enable research interventions to be structured. This allowed the provision of replicable therapy but still allowed for flexibility. The language therapy in the manual included the following main areas of intervention: comprehension monitoring, vocabulary development, grammar therapy and narrative therapy.

The researchers concluded that working through the manual had positive benefits for the sharing of knowledge, for team work and for collaborative therapy planning. The research project continued with a randomised controlled trial with 161 children aged 6-11 years (Boyle, McCartney et al 2009). Direct therapy was delivered by an SLT, and indirect by an SLT assistant under the direction of an SLT, individually or to a group. They found that all the intervention modes showed significant improvements in expressive language though not for receptive language. A non-intervention period showed that language impairments were unlikely to resolve spontaneously.

Several intervention projects are documented in Clegg and Ginsborg (2006). Pickstone (2006) reports on a Sure Start project which aimed to screen and survey the language attainment of preschool children in the area. She notes that screening requires a cut off point to define children at risk or not at risk. Direct testing identified a prevalence of 49.5% in this area. In some Sure Start areas, intervention is offered to all those in the lowest 50% of the local population, as identified by a form of screening for language levels. She suggests that hard-to-reach groups may have to have provision at a later stage. They must also allow for families who cannot engage need to have diverse interventions available.

### Early years and primary

Hobbs (2006) investigated Ann Locke's *Teaching Children Talking* which is designed for nursery and primary phase children. This programme aimed to provide teaching professionals with knowledge about children's speech and language development and to ascertain their views about its effectiveness. The quality of the interventions was variable and the measurement tool was the CELF which did not directly measure the intervention targets. However, Hobbs stated that the project raised the profile of speaking and listening in the foundation stage and enabled a partnership of schools to facilitate the speech and language development of children.

Farmer and Griffiths (2006) investigated the effectiveness of the *Talking Table* intervention. This uses a social constructionist model of language learning which emphasises the value of conversation between adult and child as a means of cognitive and language development. The project aimed to raise the profile of talking and listening in early years settings. There was concern that not all adults have the right skills to engage in naturalistic two way conversation. The *Talking Table* approach may be seen as a challenge to pedagogic strategies relying on teacher/adult control of behaviour. The participants expressed favourable experiences of the project, however the children's language skills were not assessed.

The main concept underlying the *Talking Table* programme was clarified by Siraj-Blatchford and Sylva (2004) from their research into pedagogy in English pre-schools. 'Sustained shared thinking' was identified as a necessary prerequisite for the most effective pedagogy. They defined this as the adult having an awareness of and responding to the child's understanding to a particular subject or activity, the child's understanding of what is to be learnt, and the active co-construction of an idea or skill. This supported the optimum developmental outcomes for the children.

A programme which addressed the effects of oral language on literacy skills was developed by Crane et al (2008). Two groups of children, average age of 4.9 years, were given either a phonology

with reading or an oral language intervention. The group given phonology with reading improved more on literacy and phonological measures, while the oral language group improved more on vocabulary and grammatical skills. This study also found that the language intervention programmes could be successfully delivered by trained teaching assistants. They suggest that the oral language programme would be best delivered before school entry, and that children with continuing difficulties should receive both programmes.

Law and Sivyer (2003) addressed the issue of language difficulties and emotional and behavioural difficulties. They devised an intervention for children excluded or at risk of exclusion from school. The children made significant progress in the treatment group in the areas of language and social communication skills and self-esteem. The participants in this study had not previously been identified as having language difficulties, but they were all found to be one to two years below their age group.

Speechlink Multimedia Limited offer authorities, through their Language Link programme [www.speechlink.info/research.asp](http://www.speechlink.info/research.asp) a screening and intervention package for primary age pupils.

### Camden Language Resource Bases

The approach used by the Camden Language Resource Base Team involves targeting services within schools at a universal and specialist level. An audit is made of the whole school and individual classroom communication environments and teachers are asked to complete questionnaires rating their confidence in using a range of strategies to develop communication skills. Targets are then set using this information. SLTs work alongside teachers in the classroom to promote these strategies and ensure a standardised approach to the use of visual and signs throughout the school. This support is delivered alongside specialist individual and small group support for children with specific communications needs. A small-scale study (Cavin 2008) has indicated that this model may support the development of narrative skills in children across a range of abilities.

### Secondary phase

There are few detailed and researched examples of intervention at secondary level. Joffe (2006) and Stringer (2006) have both devised interventions. Stringer addressed the narrative and social skills of 12 boys aged 11 to 13 years. She found a significant improvement in expressive and receptive language with only a total of seven hours input. Improvement in behaviour was not demonstrated from assessments, but the researchers noted that the participants were more aware of their behaviour and its consequences. Joffe's intervention consisted of narrative and vocabulary enrichment with 54 children with language and communication impairments aged 10-15 years. Joffe expressed concern that these children were receiving little or no specialist support even though they had language difficulties. Improvements were found in a range of language measures, even after a short period of time.

ListenEAR<sup>2</sup>: Islington Speech and Language Therapy Service working with secondary schools  
A speech and language therapist (Rowe & Topping 2008) has been working with a group of Islington secondary schools (often for just one day a week in each) on many aspects of student learning. This work involves, for example, working with students on communication with others in and out of lessons and support with 'dispute mediation' sessions and with teachers' understanding of communication needs and lesson design. Each programme is a whole school initiative and only involves the SLT in visits for one or two days a week. Because the school SENCO and a member of the leadership team are closely involved in all aspects of the design and implementation the interventions have proved remarkably successful.

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<sup>2</sup> EAR= enjoy, achieve, respect

### *Teaching assistants*

A recent research project carried out for the DCSF (Blatchford, Bassett, Brown, Martin, Russell and Webster 2009) found that although teaching assistants had a positive effect on the teachers' workload, level of job satisfaction and levels of stress, the progress the pupils made in English and mathematics was negatively related to the amount of support they received. The authors found that teaching assistants were more concerned with the completion of tasks rather than learning and understanding. Teachers had not had the training to help them work with teaching assistants, nor was there time allocated to discuss planning or feedback.

### *Parental engagement*

Hounslow parents were most likely to be engaged with the nursery and primary school. Some schools reported encouraging parents to 'stay and play' in the nursery stage, and some offered one off or courses on literacy or maths, but not language and communication. Other schools reported only contacting parents on an individual basis when they felt it was necessary. Special provision, such as language units, where pupils were brought in buses every day, faced significant barriers to developing parental engagement on more than an individual basis. Difficulties with meeting parents in the special schools and centres were noted by the education staff and SLTs. The secondary school makes considerable efforts to contact parents for annual reviews, etc. and will visit the family at home if necessary.

The importance of home learning has recently been noted by Desforges and Abouchaar (2003) who state that: 'parental involvement in the form of 'at-home' interest and support is a major force in shaping pupils' educational outcomes' (p 22). Melhuish et al (2001) also found that the home learning environment was the variable with the strongest effect, after age, on a child's cognitive development.

Educating parents on the importance of oral language and the home learning environment is likely to contribute significantly to children's development and achievement. This well-established finding could be important in the Hounslow context: several parents in the audit focus group felt poorly informed about services and only one had heard of the Parent Partnership Service.

### **Summary: some key points**

Hounslow's situation in terms of population is not unique: the Pathfinder should be able to draw on the experiences of other authorities with similarly diverse populations

Cost-effective, systematic support for schools and services on using outcomes data on SLCN could be provided by dedicated SLT or EP time

The Inclusion Development Programme and other recent work on training for initial teacher training and induction should lead towards setting school's own professional development, supported by outside professionals, at the heart of the Pathfinder's strategic thinking

There is a fair selection of soundly researched models within early years and primary schools and settings to draw on. The Camden Resource Bases, the SPARKLE programme for early years and the Language Link programme offer holistic and cross-institutional models for intervention. Similarly, Hounslow's own ECAT programme is highly regarded.

Fewer studies are available for secondary provision but the three mentioned suggest that small investment can make a substantial difference. The Pathfinder should also follow the outcomes of the Achievement for All initiative, as it is likely to offer valuable ideas on effective working, including some on parental engagement.

## **Section 3: Opportunities for practical and inclusive developments in Hounslow's provision for speech, language and communication needs, based on the findings of the Pathfinder audit**

The following section links the findings from the semi-structured interviews with school staff and the parent and professional focus groups, with suggestions for practical opportunities to develop the service in the Hounslow for children and young people with speech, language and communication needs (SLCN). Suggestions for intervention were made by the manager of the mainstream Speech and Language Therapy Service, Nancy Goodchild, and some of these have been taken into consideration below.

### **Universal Services**

A number of staff interviewed, particularly head teachers, reported an increasing number of children entering their schools with impoverished language and communication skills. This is not only attributed to children learning English as an additional language, but also to the children of native English speakers and is reflective of findings of both the Bercow Review (2008) and Rose Report(2009).

This being the case, whole school approaches to the development of communication should therefore be at the core of practice. Opportunities could therefore be available to promote a service which could be commissioned to work collaboratively with the Senior Management Team (SMT) within a school or cluster of schools to develop universal services via a range of interventions which target the pertinent issues at a strategic level. The project could use of an SLT and/or specialist language teacher to:

- support schools in the auditing of their communication environment using the published ICAN format from *School Talk* or adapting this to use an 'in house' format. This audit covers policies and procedures, the environment, links with parents, the curriculum, resources and expertise and professional development of staff. Key standards are rated as basic, core or advanced and it forms part of a popular training package published by ICAN.
- support the responses to needs identified in the audit. This may include support to develop school wide whole class resources, promoting communication friendly areas, for example, taking into consideration acoustics, developing core Makaton signs to be used by staff and identifying staff training needs.
- support to evaluate the implementation of the action plan arising from the audit.

In addition, we also noted a paucity of responses regarding how the curriculum is adapted for children with SLCN. Class teachers and SENCOs noted that communication targets were sometimes difficult to incorporate into classroom practice, often only covered a short period of time and were not monitored frequently enough. They discussed the difficulty in identifying those with language processing problems and co-occurring SLCN in children with Emotional and Behavioural Difficulties (EBD). The large majority were positive about the suggestion that an SLT work alongside the class teacher to share skills and promote the use of strategies to support those with SLCN in the classroom.

Therefore, as part of the above project to develop schools who have enhanced skills to work with children with SLCN, further work at a universal level could target the professional development of class teachers. This model would involve a SLT or specialist teacher in the planning and delivery of specific lessons alongside the class teacher. The speech and language therapist and/or specialist teacher, as proposed by the SLT focus group, would model identified techniques within the

classroom in the context of a lesson. This would develop the environment for all and support would also be given to differentiate for those with SCLN at whole class and small group level.

To establish areas for development and ensure methods for evaluation of the project, the targeted class teachers would complete a self-rating scale regarding their confidence in using various strategies to support SCLN. Language and communication baselines would also be established for target children around their functional communication in the classroom. Confidence rating scales and communication checklists for target children would then be re-administered at the end of intervention to evaluate the effectiveness of this model of working. The SLT and/or specialist teacher could be shared by a cluster of schools allowing for the sharing of good practice, resources and expertise across schools.

We found there was a vagueness regarding the details around the interventions used and some confusion regarding what constituted an intervention to target language and communication skills, for example, phonic interventions were sometimes cited as specifically developing oral language skills. The previous chapter (page 23) has illustrated research findings on the importance of fidelity to intervention schedules if programmes are to succeed.

Some standardisation of evidence-based interventions such as Black Sheep Oral Narrative Interventions, The Helicopter Technique or Talking Partners would be useful as borough wide resources. These interventions can be used at whole class or in small groups in foundation stage and year one and have been previously researched and evaluated. Target interventions could be launched in two volunteer schools with training given in the use and evaluation of the interventions to teaching assistants and SENCOs. Sessions could be digitally recorded to provide a bank of training videos for an ongoing training programme run as part of the local workforce development training and supported by a web-based forum.

## **Foundation Stage Provision**

Teachers generally valued therapists' suggestions. But they were frustrated when younger children were given clinic appointments, were not taken to these and then, as a result, were discharged from speech and language therapy. Some reported that parents sometimes felt uncomfortable taking their child to a health centre and did not like the medical model of intervention. Many would value having this part of the SLT service available in school to improve collaborative working and attendance.

A screening tool developed by the SLT team could be used with nursery/reception pupils at one or two points in the academic year. After training this screen could be administered by school staff. Children who do not pass the screen could be referred to SLT at the same time in the school year and a school visit by an SLT assigned to assess these children with parents in attendance. Those who require a specialist service would be referred on to the appropriate teams and together with those with less specific or severe needs would attend communication groups run by key members of the nursery staff. Work with these groups would initially be modelled by an SLT or SLT students and replicated twice per week and re-evaluated after a term. By the end of the intervention the nursery should have a bank of plans and resources which could be used in the future with children, who did not pass the screen, thus empowering staff to have increasing independence and confidence in running small groups to target communication development. This approach is in line with the school self-development theme emphasised in the previous chapter.

## **Specialist Outreach Services**

Feedback from staff who have sent children for input to specialist provisions in the borough was very positive and this was echoed by the mainstream staff who work in these schools who mentioned the benefits of having expertise on site. They commented on the availability of shared resources and the benefits of incidental advice given by staff in these provisions.

We understand there is an outreach service provided by one of the specialist provisions and that this is a relatively new and developing service. As part of this service, opportunities are given for teaching assistants and teachers to make their own resources using symbol software as part of the outreach programme. Opportunities could arise for a project to promote the use of symbols in mainstream schools at a more strategic level. By combining the resources of the Hounslow Widgit Partnership<sup>3</sup> and the outreach team, resources and training could be provided for school clusters who could pool resources and share good practice via the LBH website. Resources could be drawn from the symbols inclusion project run by widgit.com. The project could be evaluated by using pre- and post observations of lessons in target schools to observe the use of visuals to support understanding, vocabulary learning and literacy.

Some staff mentioned the link between social emotional and behavioural difficulties (SEBD) and SLCN. They indicated the difficulties in identifying SLCN in this cohort and the importance of early diagnosis and intervention. Staff at a school for children with SEBD valued the role of the SLT in identifying and managing the communication needs of some of their pupils and stressed the continuing need for support with older children. A project which aimed to screen all pupils attending the pupil referral units in the borough could provide data regarding the incidence of SLCN in this population and comparisons could be made with other studies. The results could help to provide evidence to present to commissioners to highlight the need for a service to this population.

## **Surgeries for SENCOs on SLCN**

Interviewees contrasted the service to children with Autistic Spectrum Disorder (ASD) service with the service to children without a specific diagnosis. They felt that the support given to those children with ASD was more frequent and of excellent quality. Some teachers rated the accessibility of the staff on the ASD team as a strength. Email communication was highlighted as a positive method of obtaining answers to queries regarding management.

A project to explore the take-up of off-site SENCO surgeries run by an SLT could be evaluated using questionnaires given to the SENCOs before and after the input. SENCOs could have specific times to call with queries and be given a menu of possibilities to consult on. These could include the whole school implementation of strategies to promote SLCN, where to find training resources and problem solving around individual cases. This literature could be awareness-raising for some staff and contain suggestions of ways to optimise time spent in conversation with the SLT.

## **Parents**

Although schools mentioned a range of methods of engaging with parents including reports and workshops, none of these interventions specifically targeted SLCN. Class teachers in special schools indicated that parents tended not to prioritise communication skills when sleeping and behaviour were an issue. Perhaps communication issues could be tackled when linked to these issues which are of immediate relevance to parents. A project to run and evaluate a series of

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<sup>3</sup> A partnership of education and health professionals providing training and support in the use of symbol software to Hounslow practitioners interested in inclusive practice from early years settings through to secondary school level, including families [www.widgit.com/centres/london.htm](http://www.widgit.com/centres/london.htm)

workshops run by an SLT with an Educational Psychologist, covering communication skills and behaviour management could help to support parents to make the link and increase uptake of these types of workshops. This could be promoted through family support workers, social workers and Pupil Referral Units, as well as schools.

Parents who attended the parent forum were unclear of the existence and /or the role of the parent partnership in Hounslow and the parent support groups run by volunteers. Perhaps this information should be given out by all speech and language services, including those working in special schools or centres, as part of their standard introductory literature.

## **Secondary schools**

The secondary school staff discussed the need to need to improve links between the specialist onsite resource and mainstream secondary. They felt that the expertise of the staff the in the specialist provision could be used more widely by the mainstream staff and that opportunities should be given to support this.

The specialist SLT for the secondary provision has written and published a programme known as *Learning to Listen* and is beginning to pilot its use with mainstream pupils. Opportunities could be sought to evaluate its effectiveness in the target school and if it is effective, roll out this programme to other secondary schools by providing evidence of its impact on engagement in the classroom to commissioners.

SLCN are not directly addressed in secondary schools and staff report that identification and management are an ongoing issue. The ELKLAN training package could be used provide a structured programme of training sessions and its effectiveness evaluated. The programme covers a range of topics including vocabulary learning and memory strategies and is specifically targeted at teaching assistants and teachers working with young people aged 11-18 years with SLCN.

Previous studies (Bhagwandeem 2009, McLachlan and Elks 2007) have indicated positive responses from both those trained to deliver the training and those who have attended. This would involve the cost of training an SLT to deliver and run the course and would require a one day per week for a term to cover preparation and marking, evaluation of the project, as well as delivering the sessions. It would require a significant time commitment from school staff, that is, 10 sessions of 2 hours. Staff must also commit to completing assignments between sessions. The course leads to an accreditation from the open college network and relates well to the national need of children's services to develop its workforce training.

## **Promotion of the open referral system**

The professionals who attended the forum commented on their willingness to promote the use of the SLT service, particularly to vulnerable families and young offenders. Training could be provided to social workers around language and communication issues and support given to enable them use a communication screening tool, perhaps in the form of a parental questionnaire. Those children appropriate for referral could be supported to self refer and attend children centre groups to promote language and communication skills. Perhaps a key person could be identified on the social work team who could liaise with an identified SLT so that information regarding children's centre groups and advice could be shared.

## **Liaison across teams**

During the interviews some staff mentioned the Early Intervention Team<sup>4</sup> as providing useful support to their school or nursery. Some were confused as to whether there was a SLT as part of this team. We understand that there are in fact two part-time members of staff who provide a consultative service. They were also very positive regarding the support provided by the Every Child a Talker team. At the professional forum there appeared to be some overlap between the early years provisions covered by the Early Intervention Team and the Every Child A Talker Programme, yet no obvious links between the services. Perhaps formal links could be established to allow for a pooling of resources and expertise and checking for duplication of advice or training. This may allow for joint projects such as that discussed above covering nursery settings.

### **Summary: some key points**

- There is a clear case for systematic development of universal patterns of SLCN provision across Hounslow.
- At the foundation stage, a screening programme and associated levels of intervention could benefit quality self-development in settings
- Particularly in the primary phase, it could be valuable to build on current good practice with leadership teams on issues such as curriculum, screening, fidelity to evidence-based models of intervention and teacher development.
- In the secondary phase ongoing local development work can be trialled and evaluated; secondary school staff knowledge can be developed through a programme like ELKLAN
- Alongside these approaches, overall knowledge of SLCN can be raised among parents and professionals by approaches such as SLT/EP run parent groups, surgeries for SENCOs and making increased use of the acknowledged strengths of the borough's special schools and centres, for outreach work and in such initiatives as the Hounslow Widgit project.
- Other professionals, such as social workers, can contribute to promotion of the SLCN services
- Specific support on SEBD issues as they relate to SLCN, for example on screening and SLCN in pupil referral units, could be valuable.

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<sup>4</sup> There also seemed to be some confusion over the nomenclatures of the Early Intervention Team and the early years team.

## **Section 4: The national picture and its implications for children and young people with SLCN in Hounslow**

### **Delegation of funding for SEN**

#### **Funding for pupils with SEN without statements**

Many authorities have been delegating (with government approval) funding for pupils with SEN but without statements for over ten years. This funding has not been ring-fenced, though the income stream (ie. the money going into each school) is distinguished in the authority's annual Section 52 statement.

In LB Hounslow's Section 52 statements this money appears under column 4 *Total additional pupil-led funding*. The figures set out are based on what amounts to a 'community disadvantage' model as they are calculated on the size of a school's free school meals population. Every approach to delegation has its disadvantages for pupils with SEN, but this one is generally regarded as more defensible than most others.

Under such a system, schools, in comparatively wealthy areas, may receive little or no additional funding. This does not mean that 'they have no money for SEN without statements'. The expectation is that the age-weighted pupil funding (Column 3 of Hounslow section 52 statements) will be sufficient to support such work appropriately: some schools and authorities in setting out SEN budgets have put the proportion held for SEN at 5% to 10% of their age weighted pupil funding.

But there were concerns at the time of the drafting of the revised SEN Code of Practice (DfES 2001) that the money was not being spent appropriately by schools. As a result, the back pages of the Code include Statutory Instrument (2001) 2218. An authority is to provide: "An explanation of that element of special provision for children with special educational needs (but without statements) which the local education authority expect normally to be met by the authority from funds which it holds centrally."

The guidance that Hounslow has available, though not, as far as we are aware, published on the website, would seem likely to meet the demands of the SI.

#### **Funding for pupils with SEN and statements**

An extension of delegation was triggered by two studies by Anne Pinney (DfES 2003b). In the studies she found that the process of statutory assessment, which can lead to a statement of SEN, was cumbersome, expensive and often failed to provide significant new knowledge about the pupil's needs or led to the right provision. She concluded that there were four strands to reducing reliance on statements:

"Data from the LEA survey and the case studies indicated that there are 4 key strands to LEA strategies to reduce reliance on statements:

- developing a clear strategic approach, engaging all partners
- realigning resources and responsibilities
- capacity-building in schools; and
- monitoring progress and providing assurance to parents.

This exploratory research confirms the benefits highlighted in previous research of reducing reliance on statements and raises a number of issues which require careful consideration in implementing such approaches, such as the importance of improving information to parents. From this research a number of policy implications emerged:

Local Authorities should:

- develop a clear strategic approach, in partnership with local schools and parents and underpinned by clear rationale about the benefits sought; and
- help schools to develop a graduated response, mapping out the provision they make across the full range of pupil needs and sharing this information with parents; and
- recognise the anxiety that reducing statements may cause for some parents, taking a flexible approach to responding to their concerns and ensure that they have access to support from the parent partnership service where appropriate.”

(DfES 2004)

The Department therefore began to encourage authorities, working to the recommendations set out above, to begin delegating ‘statement’ money to schools so that more flexible use and, hence, more cost effective use of funding could be achieved.

LB Hounslow Head of Access and Inclusion was reflecting this thinking when she pointed out in a letter about Hounslow’s devolution proposals in November 2005:

“The proposals are designed to allow schools a greater freedom to plan for the needs of all their SEN students. It is expected that schools will shift from the position where students are given individual support, to one where the needs of groups, rather than individuals, are met through provision of a group IEP and collective support on a planned basis. However, this does not mean that individual need will not be met; indeed one of the primary aims of the proposals is to enable schools to meet the needs of a greater number of pupils earlier in the SEN process.”

Hounslow completed a substantial development initiative with its schools over 2005-6 when it moved to delegating substantial sums from the funds from the statement budget.

The defence of the statement

But many parents’ groups still favour the statement for its statutory ring-fencing of resources: it ties funds explicitly to the needs of their children. They are not alone, as the Bercow Report explained:

“3.31 Concern was expressed [to the Bercow Review team] about delegated funding to schools and the fact that, as this is not ring fenced, schools are able to spend it on any number of things unrelated to SEN. The Government is committed to the policy of delegating funding to schools to provide services to meet the SEN of children and young people. It argues that passing resources directly to schools bypasses bureaucracy and allows them to address more quickly the individual needs of pupils. In short, on this argument, delegated funding spurs early intervention to the benefit of pupils who urgently need help. The counter-argument is that to delegate funds without ring fencing them runs the risk that those funds will be siphoned off, perhaps on a utilitarian motivation, to pay for the mass of pupils without SEN. The risk that funds might be diverted is compounded as delegation is not accompanied by oversight or monitoring by the local authority. As a result, there appears to be a deficit of accountability.”

Bercow noted the investigation of the situation by the Education and Skills Committee of the House of Commons.

“3.32 In 2006, the then Education and Skills Select Committee shared the concern about what might be called ‘unconditional delegation’ and recommended that the policy should not be extended until other necessary conditions and improved school expenditure had been established. Specifically, it called for a clearer national framework linked to minimum standards, a broad range of suitable provision, and a workforce able to identify and meet the needs of children and young people with SEN. In the absence of such conditions, the Committee was concerned that further delegation of funding was ‘a high risk approach particularly in light of evidence from Ofsted that some delegated funding to schools is not being spent on SEN’. Delegated funding can yield benefits in practice, but there are legitimate concerns about how it is operating. How such a policy can provide local flexibility, safeguard the interests of children and young people with SLCN, including those with low incidence needs, and be subject to proper accountability, will be a continuing challenge.”

We are now six years on from Pinney’s researches and have substantial research and practice available to us from the last few years. We can, perhaps suggest ways in which that “continuing challenge” can be addressed. For example it is now clear that if governors, head-teachers and school leaders, such as SENCOs, are to use delegated funding they have been given appropriately, they must

1. be clear about the roles and responsibilities of themselves and partners (including both LA and health services in the case of SLCN) in making appropriate provision
2. have appropriate models of policy and practice in SLCN provision, including an understanding of how such provision should be integrated into schools’ other mainstream and special working
3. have appropriate tools for tracking and assessment for SLCN so as to ensure that appropriate outcomes are being achieved, and if they are not being achieved, to make appropriate changes in provision.

## **1. Clarity about roles and responsibilities of the partners**

Several issues have come together to cause confusion. For example, it is often not realised that

“If the provision of SLT is deemed to be educational [as it typically is] and included in part 3 of a child's statement, the LA is ultimately responsible for securing the provision. The NHS is not under a statutory duty to provide SLT even if specified in a statement.”<sup>5</sup>

So if the local health service does not or cannot for any reason make the provision for SLCN set out within a statement the local authority must itself provide it.

The Bercow Report, after some discussion of the issues involved, concluded that this, in the last resort, was the appropriate division of responsibility for pupils with statements for SLCN, but that .....

“3.30 In truth, speech, language and communication services necessarily involve education and health providers alike. The challenge of joint working arises precisely because they are both legitimate and necessary participants on the field of children’s services. For this reason, therefore, it is sensible to focus not on single agency control, but on effective joint commissioning in the interests of children and young people. Both local authorities and Primary Care Trusts must commit to such commissioning. Both must devote resources to it. Both must work to identify outcomes and

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<sup>5</sup> [www.teachernet.gov.uk/management/atoz/s/speechandlanguagetherapy/](http://www.teachernet.gov.uk/management/atoz/s/speechandlanguagetherapy/) visited 6.1.10

the means to deliver them.”

Unfortunately, as John Bercow also noted, “On our visits around the country, we saw pockets of excellent practice in commissioning. However, our strong impression is that, despite Government guidance, coherent commissioning strategies for children and young people using a joint commissioning framework and consistent plans are the exception, not the rule, a judgement supported by our commissioned research of six case study areas.”

It must be acknowledged that the current division of responsibility has sometimes led, at school and setting level, to a particular form of resourcing blight: the cash-strapped PCT holds off making more than historic provision for SLCN, while the local authority, which has delegated large sums of money to schools, itself holds off making any decisions about additional funding while waiting for the PCT to provide.

But, of course, in areas of high levels of delegation of funding of statement money, schools working with pupils with substantial needs are simply not prepared to wait for this sort of impasse to be resolved. They have money to spend and so they spend it. This is where the attitudes, knowledge and professional development of school leaders come into play.

## **2. The need for appropriate models of policy and practice in SLCN provision**

National training for head-teachers in SEN and disabilities has been somewhat neglected. There is no guarantee that school leaders will understand the principles and practice of inclusive practice on this area in detail and the National College for Leadership of Schools and Children’s Services has only begun to remedy this deficit in the last few months. Some evidence of the national picture can be drawn from a recent Ofsted publication on the preparation of new teachers for working with pupils with SEN and/or disabilities.

This pointed out:

“.....there was a heavy reliance on school placement to provide most of the training. This worked well in schools where the overall provision for pupils with learning difficulties and/or disabilities was good but less well where it was satisfactory or inadequate. Even the best providers could not compensate for weaker input from schools during initial teacher education and induction.” (Ofsted 2008)

The classic result of the sort of situation described, over the past few years, has been a drift towards employing teaching assistants to support pupils with SEN, including, of course, pupils with SLCN. There has never been any evidence to suggest that the employment of large numbers of teaching assistants makes much difference to the progress of pupils with SEN. Ofsted has been warning about this since at least 2006 (Ofsted 2006) and the DCSF research carried out by Peter Blatchford and his team (Blatchford et al 2009) set out the evidence explicitly: all other factors being accounted for, the longer the time for which a pupil with SEN has a teaching assistant the less progress they make. This is thought to be because the TA, in effect, becomes the child’s teacher and the child is taken away from the dialogue between the teacher and the rest of the class: the teacher can become disempowered and deskilled and the pupil often receives subject instruction from the adult who knows least about the subject.

There are benefits to employing teaching assistants: they are additional adults in the class, which by itself may help with teacher morale and disciplinary issues. As Blatchford and his colleagues found, they have ‘a positive effect on the teachers’ workload, level of job satisfaction and levels of stress.’ Parents feel their child is benefiting from one-to-one attention. The IoE/University of Warwick report on the questionnaire responses of 2000 parents to the Lamb Inquiry noted

“Many parents saw the provision of one-to-one or small group support as vitally important although few stated how they believed this helped their children. Parents did not always link the presence of support to its quality or content.”

Ofsted teams are alerted to the importance of these findings. The message for schools and authorities in Hounslow must be that, to be effective, TAs must be deployed as part of the whole school inclusive curriculum offer and, above all, must work under the direction of teachers on well-defined and carefully evaluated activities. The team found evidence of effective use of teaching assistants in the Hounslow schools visited.

We are however concerned that some school leaders interviewed still seem uncertain about the idea of commissioning professionals, such as speech and language therapists and specialist teachers. Jean Gross, the recently appointed Communication Champion, made clear in her first contact with the press in her new role that she saw the shift to greater use of such professionals by all schools an important driver for better outcomes for pupils. Our interviews also showed however some concern about the centre (LA/PCT) ability to maintain a pool of stable and high quality staff within a largely commissioned system.

Finally, we were interested to find that the interviewees, by and large, had few reflections on curriculum adaptations for pupils with SLCN. This will be an important area for support in the continuing development of the Pathfinder. The finding might be seen as suggesting that a ‘medical’ model of SEND and SLCN still has considerable traction among our respondents: that is, they saw SLCN as largely a matter of identification, treatment and review. Bercow and many others have made clear that universal provision, developing the academic and learning environment, which must include curriculum, is as important as providing more targeted and individual support. The scale of SLCN reported across Hounslow schools precludes any idea that targeted and individual support can on their own make much headway: whole-school environmental approaches, such as those in place in some of the schools visited, will be needed.

#### *Schools need appropriate tools for tracking and assessment for SLCN*

Schools all over the country, including those we visited, have made great strides over recent years in developing tracking systems, particularly for core areas of the curriculum, such as English and mathematics. We are most grateful to the head-teachers who have kindly agreed to allow us access to the detailed tracking systems they use in Speaking and Listening and will be following up on discussions with them over the next month or so.

We know, however, that effective tracking across school communities on progress on language and communication is never as easy as, for example, administering short written tests of one kind or another. A SENJIT team assessing communication progress against P scales in an infant school some years ago found it essential to monitor pupils in a range of class and playground situations because of the range of levels of performance in different environments.

This is all closely tied to the issue of the monitoring of progress against the ECM outcomes: speech, language and communication issues, as the Bercow Report notes, are directly embedded in those outcomes. There are real opportunities for inter-professional support on curriculum and assessment here and we suggest that the authority’s officers and the EPS explore the possibilities of some of the resources on offer, such the Children’s Mental Health & Psychological Wellbeing Portfolio, ([www.childrensmentalhealth.co.uk](http://www.childrensmentalhealth.co.uk)) as part of the follow-up to this audit.

Tracking is part of the accountability system now in place for all schools. The Lamb Inquiry Final Report made clear that, if parents are to have confidence in the SEN system, all aspects must work together to support school self-evaluation systems in delivering the best for all pupils. The Audit Commission has produced a self-audit tool (The SEN/AEN Value for Money Resource Pack:

[www.sen-aen.audit-commission.gov.uk](http://www.sen-aen.audit-commission.gov.uk)) with which schools can check value for money systems for SEN; the TDA is about to publish a brief self-audit and support resource to help schools to train new teachers in SEND.

Two findings that could make a significant difference to the development of SLC practice across Hounslow emerged from the Lamb Inquiry (also see section 2 above).

First, the School Improvement Partner's (SIP's) role in developing policy and practice on SEND has been re-emphasised. National Strategies are providing additional professional development on this issue and all SIPs must, from now on, report annually to governing bodies on progress on SEND. The Borough may wish to enhance the expertise of its SIPs in relation to SLCN over the following months.

Second, the Inquiry found a lack of follow-up on the results of annual reviews of statements in many LAs. The Secretary of State is to legislate to give parents the right to appeal to SENDIST if unhappy about LA actions following reviews. The steering committee may wish to suggest that the borough's SEN team, working with school leaders, EPS and Scrutiny colleagues, should look over recent annual reviews of statements of pupils with SLCN (presumably the group with the most severe and complex needs in this area) and decide on the collective messages to be drawn from them.

## **Summary: some key points**

National experience suggests it would benefit Hounslow services to review schools' and settings' understanding of the division of responsibilities for funding interventions for SLCN.

School leaders should be supported in reviewing their provision to ensure that it offers a holistic model of universal, targeted and specialist intervention and developing their approaches to the assessment of outcomes for SLCN.

Attention should be given to reviewing the deployment and impact of support staff working with pupils with SLCN and considering the balance of use of such resources with that of other professionals such as specialist teachers and speech and language therapists

Work with Hounslow's school improvement partners should emphasise challenge and support for schools' work with SEND and particularly SLCN.

The Borough should make more use of readily available resources for developing accountability and supporting provision development on SLCN, such as collated results of annual reviews of statements of SEN.

## Section 5: Conclusions

In designing the next steps of its programme the Pathfinder team should give consideration to the key findings of this audit:

Respondents were agreed that there is excellent provision for SLCN in some schools, settings and services in the LB Hounslow. They felt, however, that there was not enough of such provision.

Respondents tended to emphasise the need for 'targeted' and 'specialist' support for SLCN. However, the Hounslow data, like that of many other authorities with diverse populations, suggests that an equivalent emphasis on 'universal' provision will be essential for coherent and consistent progress in raising outcomes for all children and young people with SLCN. Responses to this could include spreading information on whole-school or setting communication policies and practice as a route to institutions' self-development in this area.

As in many other LAs, time for discussion of SLCN in Hounslow, whether by teacher, officer or parent groups, has been limited in comparison with that given to written literacy needs. This has led to some uncertainty about appropriate models of provision for SLCN. This could be remedied through extended professional development and modelled through Pathfinder initiatives involving SLTs and specialist teachers working in classrooms alongside teachers. It could also be productive to consider further developing outreach activities from the highly regarded specialist school and centre provision in the authority. For early years, extension of the ECAT initiative was widely supported by respondents.

Overall, support for schools, authority officers and PCT staff in analysing data about outcomes for pupils with SLCN has been limited. Readily available data, used with some central support could allow school leaders and others to re-assure themselves that their provision offers value-for-money for pupils with SLCN.

There is some uncertainty about roles and responsibilities for funding work with SEN pupils, including those with SLCN. This may have led some school leaders' to hesitate about commissioning services, though this may also relate to doubt about the existence of central structures to support such a 'buy-back' system.

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## Appendix 1 Acronyms used in this report

|                     |   |
|---------------------|---|
| ASD                 | Autistic Spectrum Disorder  |
| CAMHS               | Child and Adolescent Mental Health Service  |
| CELF                | Clinical Evaluation of Language Fundamentals: a commonly used assessment  |
| CPD                 | Continuing Professional Development   |
| CT                  | Classroom teacher   |
| CYP                 | Children and young people   |
| DCSF                | Dept for Children, Schools and Families   |
| DfES                | Dept for Education and Skills (forerunner to the Dept for Children, Schools and Families)   |
| EAL                 | English as an Additional Language   |
| EBD (see also SEBD) | Emotional and Behavioural Disorders   |
| ECAT                | Every Child a Talker – programme to practitioner knowledge and skills in supporting children’s language and communication, with particular emphasis on working closely with parents.  |
| ECM                 | Every Child Matters (holistic approach to children and young people’s development across all those working with children and young people, arising out of changes following the death of Victoria Climbié)  |
| ELKLAN              | Training firm established in 1999 by two speech and language therapists which delivers training packages to help others to promote and support the communication skills of all children especially those with speech, language and communication needs. |
| ELLP                | Early language lead practitioner  |
| EP                  | Educational Psychologist  |
| EPS                 | Educational Psychology Service  |
| EY                  | Early years (phase from 0-5 in a child’s life)  |
| HV                  | Health visitor  |
| iCAN                | Name for the Communication Trust – a charity promoting the issue of speech and language for children  |
| IDP                 | Inclusion Development Programme   |
| IEP                 | Individual Education Plan. Pupils at School Action and School Action Plus (and those with statements) are likely to have an IEP, which sets out: the  |

|                     |   |
|---------------------|---|
|                     | short-term targets set for or by the child; the teaching strategies to be used; the provision to be put in place; when the plan is to be reviewed; success and/or exit criteria; outcomes (to be recorded when the IEP is reviewed).                            |
| IoE                 | Institute of Education (University of London)   |
| LA                  | Local authority   |
| LBH                 | London Borough of Hounslow  |
| NNEB                | Refers to a nursery nurse. Acronym derived from NNEB diploma in nursery nursing indicates the holder undertook a full time 2-year course covering the ages of 0-7.  |
| NQT                 | Newly qualified teacher   |
| OT                  | Occupational therapist  |
| PCT                 | Primary Care Trust (used in the report as short hand for services offered by the NHS provider arm in Hounslow)  |
| PMLD                | Profound and multiple learning difficulty   |
| RCSLT               | Royal College of Speech and Language Therapists   |
| SEBD (see also EBD) | Social Emotional and Behavioural Disorders  |
| SEN                 | Special Educational Needs   |
| SEND                | Special Educational Needs and Disabilities  |
| SENCO               | SEN Co-ordinator. Staff member in a school with responsibility for co-ordinating SEN work. (Sometimes the headteacher in a smaller school e.g. primary)   |
| SENJIT              | Special Educational Needs Joint Initiative for Training. (Unit based at Institute of Education, University of London)   |
| SES                 | Socio-economic status   |
| SIP                 | School Improvement Partner. Every local authority (LA) is required to deploy a SIP to every school it maintains for an average of five days per year for each school. SIPs carry out the LA's statutory duties to challenge, support and monitor their schools. |
| SLCN                | Speech, language and communication needs  |
| SLS                 | Speech and language therapy service (now part of Hounslow Community   |

|         |   |
|---------|---|
|         | Healthcare)                                 |
| SLT     | Speech and language therapist               |
| TA      | Teaching Assistant                          |
| TDA     | Training and Development Agency for Schools |
| YOS/YOT | Youth Offending Service/Team                |

## Appendix 2: Interview Schedule

### Hounslow Speech and Language Pathfinder Project Discussion Guide for Headteachers and SENCOs

#### 1. Perceptions of SLC Needs

- a. What are your perceptions of the speech, language and communication **skills** of the children in your school?
- b. How do you identify the children in your school with speech, language and communication **needs**?
- c. How good do you think your staff are in being able to identify speech, language and communication **needs**?

#### 2. School's Knowledge, Awareness and Perceptions of Hounslow's support services for SLCN (SLT, PCT, Education Psychology, Teaching Support within Early Intervention Teams)

- a. What do you think the SLT and other services do well?
- b. What do they need to do to improve?
- c. If you were (or are) directly commissioning Speech and Language Therapy, what information would you like to have available to help you make your decisions?

#### 3. Current Interventions

- a. Describe the measures within your school used to support speech, language and communication for all pupils with identified need.
- b. How do you adapt the curriculum to minimise or remove barriers for children with SCLN? (eg Early Years Foundation Stage, play, ECAT).
- c. How do you monitor and support classroom teachers' everyday practice?
- d. What interventions are you and/or SLTs currently using with children with severe SLCN?
- e. Tell me about any involvement you have had in collaboration/sharing resources for pupils with SLCN with other schools.
- f. How do you target funding for pupils with SLCN who do not have statements?
- g. Tell me how TAs are used to support pupils with SLCN.
- h. What would really help your staff increase their confidence and understanding of children with SLCN? EG what training?

#### **4. Perceptions/measures of effectiveness of interventions**

- a. What do you feel about the effectiveness of the measures you use to support children with SLCN?
- b. What evidence do you have to support this?
- c. How does this inform practice, e.g., IEPs, annual reviews?
- d. How effective does school feel it is in obtaining the SLT service?

#### **5. Parents**

- a. What mechanisms do you use to engage parents?
- b. How effective are they?
- c. How well do you think the school and the SLT service meet the needs of parents/carers?

**Hounslow Pathfinder Project  
Discussion Guide for Classroom Teachers**

**1. Perceptions of Need: SLCN**

- a. What are your perceptions of the speech, language and communication **skills** of the children in your class?
- b. How good do you think you are in being able to identify speech, language and communication **needs**?
- c. What would help you to better identify SLCN in your class?

**2. Teachers' Knowledge, Awareness and Perceptions of Hounslow's SLT and other services**

- a. What do you think the SLT and other services do well?
- b. What do they need to do to improve?

**3. Current Interventions and their Effectiveness**

- a. How do you adapt the curriculum to remove barriers for children with SLCN? (eg Early Years Foundation Stage, play, ECAT)
- b. What interventions do you use to address speech, language and communication difficulties amongst your pupils?
- c. Are these interventions effective?
- d. What evidence do you have to support this?
- e. How does this inform practice, e.g., IEPs, annual reviews?
- f. If you have TA's in your classroom, how are they used to support children with SLCN? How could this be improved?
- g. What training have you and/or TAs already undertaken? What training or support would you find useful?

**4. Parent engagement**

- a. How do you think engagement with parents of children with SLCN is working, or could be improved?

**Hounslow Pathfinder Project**  
**Discussion guide for parents' focus group**

**1. Parents' experiences and perceptions about their child's needs**

- a. What particular support and input has been provided for your child with speech language and communication needs?
- b. Has anything which you think important not been provided for your child?
- c. What are the good features about local provision and services?
- d. What ideally would you like for your child?

Topic prompts:

Has your child made progress since identification of their SLCN?

How do the services help parents and their children?

How has identification influenced your views of what your child needs?

**2. Local services response to child's speech, language and communication needs**

- a. What is good about the school/education service?
- b. What is not so good about the school/education service?
- c. What is good about the health/SLT service?
- d. What is not so good about the health/SLT service?

Topic prompts:

Do education and health contribute and work together?

Have you been offered choices of provision for your child?

Are health and education staff appropriately skilled and knowledgeable?

Have you ever accessed private SLT?

Can you access support with relative ease? EG ease of obtaining a statutory assessment (statementing process)?

**3. Information and support for parents**

- a. What kinds of information have been made available to parents?
- b. How helpful have these been?
- c. Is verbal or written information more useful?
- d. Have you used the Hounslow or other websites?

Topic prompts:

Has it been easy to access: teachers at the school, the SLT service, parent support groups, Parent Partnership Service, voluntary agencies?

**4. Parents' involvement in influencing services**

- a. Do parents influence what services are provided in this area?

Topic prompts:

Do local commissioners consult parents?

Have the LA changed a service as a result of parents' consultation or pressure?

**Hounslow Pathfinder Project  
Discussion Guide for Professionals' Focus Group**

- 1. What are your perceptions of the speech, language and communication needs of children and young people in Hounslow?**
  - a. What are your perceptions of levels of SLCN needs: universal, targeted, specialist?

Topic prompt: broad categories of children and young people: English as an additional language, disadvantaged, primary SLCN, secondary SLCN

- 2. What are your views about provision for children and young people with SLCN in Hounslow with different levels of need?**
  - a. Education/school services
  - b. SLT service: meeting needs; working with other services
  - c. Health
  - d. Other services

Topic prompts:

Do services work together for the benefit of children and young people?

What services are effective?

- 3. What could be done to improve services to children and young people with SLCN?**
  - a. what changes could be made in how services including SLT work together in schools/other settings?
- 4. What could be done throughout Hounslow to improve communication skills?**
- 5. What kind of projects would you be keen to see included in the Pathfinder research programme?**

## Hounslow Pathfinder Project

### Discussion Guide for Speech and Language Therapists' Focus Group

1. **What are your views about the provision and outcomes for children and young people with SLCN in Hounslow with different levels of need (universal, targeted and specialist)?**
  - a. Education
  - b. Health
  - c. SLT
  - d. Other

Topic prompt:

Effectiveness of 6 week blocks, reviews, TA groups?

2. **How well integrated is the SLT service with other services which support children and young people with SLCN?**

Topic prompt:

How effective is communication with class teachers, TAs, other professionals?

3. **How could this be improved?**

Topic prompts:

Training implications for SLTs?

Use of funding by schools, settings, LA and PCT?

4. **What are your views on how parents of children with SLCNs are supported by different services, eg, education, EPS, SLT services**

Topic prompts:

Accessible information, early diagnosis, sharing of goals?

5. **What projects would you like to see included in the pathfinder research?**

## Appendix 3: Pathfinder Project: Table of data from London Borough of Hounslow school staff interviews

|  | Primary HT | Primary HT + SENCO | Primary CT | Primary SENCO | Sp Sch HT | Sp Sch CT | Secondary HT/inc Man | T in Charge | TA / NNEB | Total no. of responses |
|--|------------|--------------------|------------|---------------|-----------|-----------|----------------------|-------------|-----------|------------------------|
| No. of interviews  | 2          | 7                  | 6          | 2             | 2         | 2         | 1                    | 3           | 2         | 27                     |
| Response code  |            |                    |            |               |           |           |                      |             |           |                        |
| <b>1 Pupils' SLC needs</b>   |            |                    |            |               |           |           |                      |             |           |                        |
| a) autistic pupils / increasing numbers  | 1          | 5                  | 3          | 0             | 3         | 5         | 2                    | 1           | 1         | 21                     |
| b) communication is most important need  | 0          | 1                  | 0          | 2             | 0         | 3         | 1                    | 0           | 0         | 7                      |
| c) behaviour is affected by SLC needs / can be misdiagnosed / affects social skills  | 2          | 0                  | 2          | 0             | 0         | 1         | 1                    | 1           | 0         | 7                      |
| d) pupils' needs are at different levels:  | 0          | 5                  | 2          | 0             | 1         | 2         | 0                    | 2           | 2         | 14                     |
| i) speak few words   |            |                    |            |               |           |           |                      |             |           |                        |
| ii) some sentences / phrases   | 0          | 2                  | 1          | 0             | 0         | 1         | 0                    | 1           | 1         | 6                      |
| iii) echolalic   | 0          | 0                  | 0          | 0             | 0         | 2         | 0                    | 0           | 0         | 2                      |
| iv) general statement / generally low levels   | 1          | 11                 | 7          | 3             | 2         | 1         | 0                    | 3           | 3         | 31                     |
| e) teachers' / other professionals' different opinions of pupils' needs  | 0          | 0                  | 0          | 0             | 1         | 0         | 0                    | 0           | 0         | 1                      |
| f) How needs are identified  |            |                    |            |               |           |           |                      |             |           |                        |
| i) use statements of SEN / not enough detail for SLCN  | 0          | 1                  | 0          | 0             | 2         | 0         | 0                    | 0           | 0         | 3                      |
| ii) Nursery assessments / EY Foundation Profile  | 1          | 9                  | 2          | 2             | 2         | 0         | 0                    | 0           | 1         | 17                     |
| iii) Speech and Language Therapist assessments / not available always  | 2          | 3                  | 3          | 1             | 3         | 0         | 0                    | 2           | 1         | 15                     |
| iv) Teacher / SLT joint assessments  | 1          | 0                  | 0          | 1             | 1         | 1         | 0                    | 1           | 1         | 6                      |
| v) previous school information / primary to secondary  | 0          | 0                  | 0          | 0             | 1         | 0         | 2                    | 0           | 0         | 3                      |
| vi) home and school visits   | 1          | 1                  | 0          | 0             | 1         | 0         | 0                    | 0           | 0         | 3                      |
| vii) trained TAs identify needs  | 0          | 2                  | 1          | 1             | 0         | 0         | 0                    | 0           | 0         | 4                      |
| viii) experience / some impediments are easy to identify observations  | 1          | 6                  | 6          | 1             | 0         | 0         | 0                    | 1           | 0         | 15                     |
| ix) SENCO and head teacher   | 2          | 0                  | 0          | 1             | 0         | 0         | 1                    | 0           | 0         | 4                      |
| x) tracking  | 1          | 1                  | 0          | 0             | 0         | 0         | 0                    | 0           | 0         | 2                      |
| xi) parents  | 0          | 2                  | 0          | 0             | 0         | 0         | 0                    | 0           | 1         | 3                      |
| xii) ECAT monitoring system  | 0          | 3                  | 1          | 0             | 0         | 0         | 0                    | 0           | 0         | 4                      |
| xiii) in-school community worker   | 0          | 2                  | 0          | 0             | 0         | 0         | 0                    | 0           | 0         | 2                      |
| xiv) -   | -          | -                  | -          | -             | -         | -         | -                    | -           | -         | -                      |
| g) consistency in behaviour management very important  | 0          | 0                  | 0          | 0             | 0         | 2         | 0                    | 0           | 0         | 2                      |
| h) physical environment needs to be clutter free / avoid distraction   | 0          | 0                  | 0          | 0             | 0         | 1         | 0                    | 0           | 0         | 1                      |
| i) school population changing over time  | 1          | 5                  | 1          | 1             | 2         | 1         | 1                    | 0           | 1         | 13                     |
| j) EBD can mask SLCN – hard to tell / EAL – need to differentiate / easy to misidentify / maybe global delay / mother tongue assessment used | 1          | 17                 | 9          | 2             | 1         | 1         | 1                    | 0           | 1         | 33                     |
| k) interventions intended to avoid the need for an SEN statement later   | 0          | 0                  | 0          | 0             | 0         | 0         | 0                    | 1           | 0         | 1                      |
| l) adaptation of curriculum for pupils with SLCN   |            |                    |            |               |           |           |                      |             |           |                        |
| i) pupils not accessing the curriculum / how to remove barriers?   | 0          | 2                  | 0          | 0             | 0         | 1         | 1                    | 0           | 1         | 5                      |
| ii) curriculum access worse for older pupils / harder to adapt curriculum / speaking and listening squeezed out                              | 1          | 1                  | 2          | 0             | 0         | 0         | 0                    | 0           | 0         | 4                      |
| iii) differentiation is improving / takes time to implement  | 2          | 1                  | 0          | 0             | 0         | 0         | 0                    | 0           | 0         | 3                      |
| iv) -  | -          | -                  | -          | -             | -         | -         | -                    | -           | -         | -                      |
| v) use smaller groups / nurture groups   | 0          | 3                  | 0          | 0             | 0         | 0         | 2                    | 0           | 0         | 5                      |

|   |           |           |           |           |           |           |           |           |           |            |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| m) ITT not covering speech and language development<br>– NQTs not prepared / GTP better | 1         | 0         | 0         | 0         | 0         | 0         | 2         | 0         | 0         | <b>3</b>   |
| n) not qualified to identify needs / difficult for teachers to<br>pick up               | 0         | 6         | 1         | 0         | 0         | 0         | 2         | 0         | 0         | <b>9</b>   |
| Totals for 1:   | <b>19</b> | <b>89</b> | <b>41</b> | <b>15</b> | <b>20</b> | <b>22</b> | <b>16</b> | <b>13</b> | <b>14</b> | <b>249</b> |
|   |           |           |           |           |           |           |           |           |           |            |



|   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|
| r) SLT should have option to be full-time in schools  | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 |
| s) two SLTs in school – worked very well – different roles  | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 |
| t) SLTs change post too often – no stable working relationships / hard to recruit / poorly paid   | 0 | 5 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 7 |
| u) speech therapy assistants  | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| v) Budget / financing issues  |   |   |   |   |   |   |   |   |   |   |
| i) SLT in nursery paid for by LBH   | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| ii) school had to pay for monitoring visits   | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| iii) service managers expect same level of service in spite of cuts / Bercow outcomes need extra funding  | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 2 |
| iv) need exceeds capacity / more ms school visits now but not enough / changes in population increase needs but not funding to match            | 2 | 0 | 0 | 1 | 2 | 0 | 0 | 0 | 0 | 5 |
| v) EBD provision is losing out  | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| vi) special schools can't access EIT  | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| vii) budget issues cause long delay in resolving individual cases   | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| viii) LBH paying for OT for all ASD pupils  | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| ix) only general school budget to support non-statemented pupils with SEN   | 1 | 2 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 4 |
| x) service has been cut   | 0 | 1 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 3 |
| xi) school spending is targeted as set by provision map   | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| xii) free courses from LBH through buy-back   | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| w) Commissioning services directly / independently  |   |   |   |   |   |   |   |   |   |   |
| i) HT wants to use LBH services / supports the model  | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 2 |
| ii) -   | - | - | - | - | - | - | - | - | - | - |
| iii) experience of commissioning social worker very difficult   | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| iv) cluster buys SLT / EP because no LBH services to buy back / very useful   | 1 | 2 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 5 |
| v) we have all the data in-school for commissioned services to use  | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| vi) menu of options from independent services / availability of SLTs / costs / not enough information at present                                | 1 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4 |
| vii) cluster pays unit for outreach training  | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| viii) if we did commission we would hire SLT  | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| ix) hired SLT / EP – expensive and must be value for money / hire community worker  | 0 | 7 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 8 |
| x) can commission SLT through TSS   | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| xi) statement funding paid for SLT / effective  | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| xii) can only make referral if SLT commissioned   | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| x) Issues across services   |   |   |   |   |   |   |   |   |   |   |
| i) Don't like the way the services are forced to work   | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 2 |
| ii) PCT is failing in its responsibilities / needs to be forced / not worked  | 1 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 4 |
| iii) PCT needs to sort out SLT provision – not enough available   | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| iv) Section 5 used to avoid expenditure   | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| v) Statements not suitable for special schools – only mainstream pupils / not a useful process / SLT rarely on statements / part of general SEN | 0 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 3 |
| vi) Early Intervention Team needs a SALT member   | 0 | 3 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 4 |
| vii) Children's Centre needs a SALT   | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 |
| viii) No / limited number of Health Visitors – lack of early intervention/ no identification of problems before schooling starts                | 0 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 3 |
| ix) EPS – too few visits / non-statemented pupils not   | 2 | 2 | 2 | 0 | 0 | 1 | 1 | 0 | 0 | 8 |

|  |           |            |           |           |           |           |           |           |          |            |
|--|-----------|------------|-----------|-----------|-----------|-----------|-----------|-----------|----------|------------|
| seen / not useful for SLCN / supports Autistic child – very accessible                     |           |            |           |           |           |           |           |           |          |            |
| x) Behaviour Educational Support team winding down but EIT not operational yet             | 1         | 0          | 0         | 0         | 0         | 0         | 0         | 0         | 0        | 1          |
| xi) not sure all HT can obtain SLT services  | 1         | 0          | 0         | 0         | 0         | 0         | 0         | 0         | 0        | 1          |
| xii) good links / communication with outside services e.g. EP, OT                          | 0         | 0          | 0         | 0         | 0         | 1         | 0         | 1         | 0        | 2          |
| xiii) good support from units  | 0         | 1          | 0         | 0         | 0         | 0         | 0         | 1         | 0        | 2          |
| xiv) referral system needs simplifying, shorter forms                                      | 0         | 0          | 0         | 0         | 0         | 0         | 0         | 1         | 0        | 1          |
| xv) more of everything   | 0         | 1          | 0         | 0         | 0         | 0         | 1         | 0         | 0        | 2          |
| xvi) more collaboration between agencies needed  | 0         | 0          | 0         | 0         | 0         | 0         | 1         | 0         | 0        | 1          |
| y) Entry to units  |           |            |           |           |           |           |           |           |          |            |
| i) based on strict criteria / statements / SLCN must be primary need / via doctor referral | 0         | 3          | 0         | 0         | 0         | 0         | 3         | 1         | 0        | 7          |
| ii) SLS included in panel making decisions   | 0         | 0          | 0         | 0         | 0         | 0         | 0         | 1         | 0        | 1          |
| iii) referral documents vary in completeness   | 0         | 0          | 0         | 0         | 0         | 0         | 0         | 1         | 0        | 1          |
| iv) placement delayed by lack of SALT report   | 0         | 0          | 0         | 1         | 0         | 0         | 0         | 0         | 0        | 1          |
| v) protracted process to get statement   | 0         | 1          | 0         | 0         | 0         | 0         | 0         | 0         | 0        | 1          |
| vi) from all over LBH  | -         | -          | -         | -         | -         | -         | -         | -         | -        | -          |
| vii) pupils sometimes left in unit inappropriately   | 1         | 0          | 0         | 0         | 0         | 0         | 0         | 0         | 0        | 1          |
| viii) all schools should have special centres  | 0         | 1          | 0         | 0         | 0         | 0         | 0         | 0         | 0        | 1          |
| ix) impact of time in unit varies – sometimes hard to know                                 | 0         | 0          | 1         | 0         | 0         | 0         | 0         | 0         | 0        | 1          |
| x) very good progress  | 0         | 0          | 0         | 0         | 0         | 0         | 1         | 0         | 0        | 1          |
| z) SLT do group, paired and one to one withdrawal sessions                                 | 0         | 1          | 0         | 0         | 0         | 0         | 0         | 1         | 0        | 2          |
| aa) Children's Centre and schools – an LBH project for SLC / needs expanding               | 3         | 0          | 0         | 1         | 0         | 0         | 0         | 0         | 0        | 4          |
| bb) Teacher for Every Child a Reader – a good resource / fantastic / ECAT very good        | 0         | 2          | 1         | 0         | 0         | 0         | 0         | 0         | 0        | 3          |
| cc) booklet on SLCN would be useful  | 0         | 1          | 1         | 0         | 0         | 0         | 0         | 0         | 0        | 2          |
| dd) -  | -         | -          | -         | -         | -         | -         | -         | -         | -        | -          |
| ee) -  | -         | -          | -         | -         | -         | -         | -         | -         | -        | -          |
| ff) small number of sessions for referred pupils – enough? / sessions end at 7 years       | 0         | 5          | 2         | 0         | 0         | 0         | 0         | 0         | 0        | 7          |
| gg) have EP attached to school   | 0         | 0          | 0         | 0         | 0         | 0         | 1         | 1         | 0        | 2          |
| hh) Team Around the Child is important   | 0         | 1          | 0         | 0         | 0         | 0         | 0         | 1         | 0        | 2          |
| ii) KS2 not given all SLT data from KS1 / less SLT for KS2 pupils                          | 0         | 3          | 0         | 0         | 0         | 0         | 0         | 0         | 0        | 3          |
| jj) SLCN not seen as an education issue – it is health / need to raise profile in schools  | 0         | 1          | 0         | 0         | 0         | 0         | 1         | 0         | 0        | 2          |
| kk) S and L Centre – no TiC – hard to fill the post  | 0         | 0          | 0         | 0         | 0         | 0         | 1         | 0         | 0        | 1          |
| ll) CAMHS – very positive but not enough   | 0         | 0          | 0         | 0         | 0         | 0         | 1         | 0         | 0        | 1          |
| Totals for 2:  | <b>23</b> | <b>127</b> | <b>55</b> | <b>23</b> | <b>41</b> | <b>61</b> | <b>17</b> | <b>36</b> | <b>3</b> | <b>386</b> |

| <b>3. Current interventions</b>  |          |           |           |          |           |           |           |           |          |            |
|--|----------|-----------|-----------|----------|-----------|-----------|-----------|-----------|----------|------------|
| a) Training  |          |           |           |          |           |           |           |           |          |            |
| i) developing teachers' skills / had good training courses / key worker training / SLT from HEC trains / training always advantageous / training from ICAN | 1        | 12        | 8         | 0        | 6         | 11        | 2         | 1         | 0        | <b>41</b>  |
| ii) teachers need refresher courses / guidance re courses  | 0        | 2         | 3         | 0        | 1         | 2         | 1         | 2         | 0        | <b>11</b>  |
| iii) learning new things - exciting / need basic SL training   | 0        | 2         | 1         | 0        | 1         | 1         | 2         | 0         | 0        | <b>7</b>   |
| iv) more ad hoc  | 0        | 0         | 0         | 0        | 1         | 0         | 0         | 0         | 0        | <b>1</b>   |
| v) ITT not sufficient so teachers need CPD   | 1        | 2         | 1         | 0        | 0         | 0         | 0         | 0         | 0        | <b>4</b>   |
| vi) CPD disrupts pupils  | 1        | 0         | 0         | 0        | 0         | 0         | 0         | 0         | 0        | <b>1</b>   |
| vii) teachers have no 'spare' time to use on-line training materials / not as useful as SLT in class, school   | 1        | 0         | 2         | 0        | 0         | 0         | 0         | 0         | 0        | <b>3</b>   |
| viii) it won't work / not seen as beneficial / teachers are fed up with so many initiatives / need to give up always wanting training                      | 0        | 1         | 0         | 0        | 0         | 0         | 0         | 0         | 0        | <b>1</b>   |
| ix) if not enough SLTs, train teachers   | 0        | 1         | 0         | 0        | 0         | 0         | 0         | 0         | 0        | <b>1</b>   |
| x) mainstream school is centre for training teachers from other schools  | 0        | 0         | 0         | 0        | 0         | 0         | 1         | 0         | 0        | <b>1</b>   |
| b) total communication environment / enriching language  | 0        | 0         | 1         | 0        | 1         | 0         | 1         | 1         | 0        | <b>4</b>   |
| c) Variety of techniques to assist learning  |          |           |           |          |           |           |           |           |          |            |
| i) Makaton   | 0        | 3         | 3         | 0        | 3         | 5         | 0         | 1         | 1        | <b>16</b>  |
| ii) PECS   | 0        | 1         | 1         | 0        | 2         | 3         | 0         | 0         | 1        | <b>8</b>   |
| iii) hand tapping  | 0        | 0         | 0         | 0        | 0         | 2         | 0         | 0         | 0        | <b>2</b>   |
| iv) games  | 0        | 0         | 2         | 0        | 0         | 2         | 0         | 0         | 1        | <b>5</b>   |
| v) group social communication skills lessons / weekly communication groups / model sentences   | 0        | 3         | 4         | 0        | 1         | 2         | 2         | 1         | 1        | <b>14</b>  |
| vi) objects of reference / visuals / picture cues  | 0        | 5         | 6         | 3        | 0         | 2         | 0         | 2         | 1        | <b>19</b>  |
| vii) cued articulation   | 0        | 6         | 6         | 0        | 3         | 2         | 0         | 1         | 1        | <b>17</b>  |
| viii) phonics / rhymes / CLLD project  | 2        | 2         | 1         | 0        | 0         | 0         | 0         | 0         | 0        | <b>5</b>   |
| ix) adapt / simplify our use of language / broken down   | 0        | 2         | 7         | 0        | 0         | 2         | 0         | 3         | 0        | <b>14</b>  |
| x) puppets, role play / play corner  | 0        | 3         | 5         | 0        | 0         | 0         | 1         | 1         | 1        | <b>11</b>  |
| xi) talk partners / paired work  | 0        | 3         | 1         | 0        | 0         | 0         | 1         | 0         | 0        | <b>5</b>   |
| xii) circle time   | 0        | 3         | 1         | 0        | 0         | 0         | 0         | 0         | 0        | <b>4</b>   |
| xiii) symbol software – print  | 0        | 0         | 1         | 0        | 0         | 0         | 0         | 1         | 0        | <b>2</b>   |
| xiv) make eye contact  | 0        | 0         | 1         | 0        | 0         | 0         | 0         | 0         | 0        | <b>1</b>   |
| xv) emphasis on life skills / social skills  | 0        | 1         | 0         | 0        | 0         | 0         | 0         | 1         | 0        | <b>2</b>   |
| xvi) story time  | 0        | 2         | 0         | 0        | 0         | 0         | 0         | 1         | 0        | <b>3</b>   |
| xvii) ECAT   | 0        | 2         | 3         | 0        | 0         | 0         | 0         | 0         | 0        | <b>5</b>   |
| d) make predictions for each pupil for communication – plot progress   | 0        | 0         | 0         | 0        | 0         | 1         | 0         | 0         | 0        | <b>1</b>   |
| e) teach communication skills in broader context / move sideways / whole school S and L project  | 0        | 1         | 1         | 0        | 0         | 2         | 1         | 1         | 0        | <b>6</b>   |
| f) withdrawal sessions / TAs take one-to-one and groups / inclusion not always possible  | 2        | 3         | 4         | 1        | 0         | 1         | 1         | 0         | 0        | <b>12</b>  |
| g) strategies to check comprehension / checking for clarification  | 0        | 2         | 0         | 1        | 0         | 0         | 0         | 0         | 0        | <b>3</b>   |
| h) scheme for staff to 'share good moments'  | 0        | 0         | 0         | 1        | 0         | 0         | 0         | 0         | 0        | <b>1</b>   |
| i) reverse integration   | 0        | 1         | 1         | 0        | 0         | 0         | 0         | 1         | 2        | <b>5</b>   |
| <b>Totals for 3:</b>   | <b>8</b> | <b>62</b> | <b>63</b> | <b>6</b> | <b>19</b> | <b>38</b> | <b>13</b> | <b>18</b> | <b>9</b> | <b>236</b> |

| <b>4. Effectiveness of interventions</b>   |          |           |           |           |           |           |          |           |           |            |
|--|----------|-----------|-----------|-----------|-----------|-----------|----------|-----------|-----------|------------|
| a) various views   |          |           |           |           |           |           |          |           |           |            |
| i) general comments  | 0        | 1         | 2         | 0         | 0         | 0         | 0        | 0         | 1         | <b>4</b>   |
| ii) extremely / very effective   | 0        | 1         | 0         | 0         | 1         | 1         | 0        | 0         | 0         | <b>3</b>   |
| iii) pretty effective / good progress  | 0        | 1         | 0         | 0         | 0         | 1         | 0        | 0         | 0         | <b>2</b>   |
| iv) less effective as pupils get older / needs to start earlier  | 0        | 4         | 3         | 0         | 0         | 1         | 0        | 0         | 0         | <b>8</b>   |
| v) pupils with SEN match their peers   | 1        | 0         | 0         | 0         | 0         | 0         | 0        | 0         | 0         | <b>1</b>   |
| vi) on agenda to improve speaking and listening evaluation   | 0        | 0         | 1         | 0         | 0         | 0         | 0        | 0         | 0         | <b>1</b>   |
| b) various forms of evidence   |          |           |           |           |           |           |          |           |           |            |
| i) individual folders with notes on progress / achievement / tracking / termly IEP measures  | 1        | 15        | 6         | 1         | 2         | 5         | 2        | 1         | 2         | <b>35</b>  |
| ii) targets / speaking and listening not tracked individually – part of literacy levels  | 1        | 3         | 3         | 1         | 4         | 3         | 0        | 1         | 0         | <b>16</b>  |
| iii) observations / record of progress kept in social communication skills   | 0        | 2         | 2         | 0         | 1         | 1         | 0        | 0         | 0         | <b>6</b>   |
| iv) parental feedback  | 0        | 1         | 0         | 0         | 0         | 0         | 0        | 0         | 0         | <b>1</b>   |
| v) case studies  | 0        | 0         | 0         | 0         | 1         | 0         | 0        | 0         | 0         | <b>1</b>   |
| vi) SLT assessments / monitoring progress of interventions   | 0        | 0         | 1         | 0         | 0         | 1         | 0        | 1         | 0         | <b>3</b>   |
| vii) SENCO / HT checks effectiveness of strategies / plans / observations / monitoring   | 1        | 7         | 0         | 1         | 0         | 0         | 1        | 0         | 1         | <b>11</b>  |
| viii) speaking and listening data / tracked targets in IEPs  | 0        | 2         | 1         | 2         | 0         | 0         | 1        | 0         | 0         | <b>6</b>   |
| c) ways in which practice is informed  |          |           |           |           |           |           |          |           |           |            |
| i) general influence   | 0        | 1         | 0         | 0         | 0         | 0         | 1        | 1         | 0         | <b>3</b>   |
| ii) work done links with IEPs / annual reviews   | 1        | 3         | 3         | 1         | 1         | 3         | 0        | 0         | 1         | <b>13</b>  |
| iii) changes made to teaching / planning on basis of data collected  | 1        | 2         | 2         | 0         | 0         | 1         | 0        | 0         | 0         | <b>6</b>   |
| iv) school targets are mapped on to P scales (too broad)   | 0        | 1         | 0         | 1         | 2         | 6         | 0        | 3         | 0         | <b>13</b>  |
| d) Teaching Assistants   |          |           |           |           |           |           |          |           |           |            |
| i) some are geared up / trained / able to take groups and one to one / advise teachers / work independently / NNEB – trained, best ever / monitored by CT, SENCO | 3        | 15        | 8         | 3         | 12        | 9         | 2        | 3         | 3         | <b>58</b>  |
| ii) need more TAs  | 0        | 0         | 0         | 0         | 0         | 1         | 0        | 0         | 0         | <b>1</b>   |
| iii) packs prepared by teacher given to TAs  | 0        | 0         | 0         | 0         | 0         | 1         | 0        | 0         | 0         | <b>1</b>   |
| iv) teachers meet TAs each week – give targets / plans   | 0        | 0         | 0         | 0         | 0         | 1         | 0        | 0         | 1         | <b>2</b>   |
| v) TAs need more training – deeper understanding of language and speech  | 0        | 4         | 3         | 2         | 0         | 1         | 2        | 1         | 2         | <b>15</b>  |
| vi) TAs share training outcomes – formally / informally / TAs impressed with training  | 0        | 2         | 0         | 0         | 0         | 2         | 0        | 1         | 1         | <b>6</b>   |
| vii) teacher and TA time together:   | 0        | 0         | 0         | 0         | 0         | 3         | 0        | 0         | 2         | <b>5</b>   |
| 1. not enough time for teachers and TAs to meet / rushed   |          |           |           |           |           |           |          |           |           |            |
| 2. plenty of time to discuss   | 0        | 0         | 1         | 0         | 0         | 0         | 0        | 0         | 0         | <b>1</b>   |
| viii) what to pay trained TAs?   | 0        | 0         | 0         | 0         | 1         | 0         | 0        | 1         | 0         | <b>2</b>   |
| ix) -  | -        | -         | -         | -         | -         | -         | -        | -         | -         | -          |
| x) parents meet the TA not the teacher   | 0        | 0         | 0         | 0         | 0         | 0         | 0        | 0         | 1         | <b>1</b>   |
| xi) TA interventions 'slightly effective'  | 0        | 0         | 1         | 0         | 0         | 0         | 0        | 0         | 0         | <b>1</b>   |
| xii) -   | -        | -         | -         | -         | -         | -         | -        | -         | -         | -          |
| xiii) TAs mostly in KS1 / reduces need to interventions further up school  | 0        | 1         | 1         | 0         | 0         | 0         | 0        | 1         | 0         | <b>3</b>   |
| e) need more time per pupil  | 0        | 0         | 0         | 0         | 0         | 1         | 0        | 0         | 0         | <b>1</b>   |
| f) Ofsted failed to deal with assessment adequately  | 0        | 0         | 0         | 0         | 2         | 1         | 0        | 0         | 0         | <b>3</b>   |
| g) how best to deploy TAs? – in class and / or withdrawal  | 0        | 0         | 1         | 0         | 0         | 0         | 0        | 0         | 0         | <b>1</b>   |
| <b>Totals for 4:</b>   | <b>9</b> | <b>66</b> | <b>39</b> | <b>12</b> | <b>27</b> | <b>43</b> | <b>9</b> | <b>14</b> | <b>15</b> | <b>234</b> |

| <b>5. Parents</b>  |          |           |           |          |           |           |          |           |          |            |
|--|----------|-----------|-----------|----------|-----------|-----------|----------|-----------|----------|------------|
| a) very tough for them / schools can support them / many are isolated across LBH / family ethos / need to be parent friendly                         | 0        | 2         | 1         | 0        | 0         | 2         | 0        | 2         | 0        | <b>7</b>   |
| b) various ways of supporting them:  | 0        | 0         | 0         | 1        | 0         | 1         | 0        | 0         | 0        | <b>2</b>   |
| i) send symbols home   |          |           |           |          |           |           |          |           |          |            |
| ii) coffee mornings / share / relax / get bigger picture   | 0        | 1         | 1         | 0        | 0         | 2         | 0        | 0         | 0        | <b>4</b>   |
| iii) SLT, OT, community worker, language support teacher and others available to meet them   | 0        | 4         | 0         | 0        | 1         | 2         | 0        | 1         | 1        | <b>9</b>   |
| iv) develop the 'team' approach  | 0        | 0         | 0         | 0        | 0         | 1         | 0        | 0         | 0        | <b>1</b>   |
| v) courses / awareness raising / workshops   | 1        | 6         | 3         | 2        | 0         | 1         | 1        | 0         | 2        | <b>16</b>  |
| vi) sleep clinics  | 0        | 0         | 0         | 0        | 1         | 1         | 0        | 0         | 0        | <b>2</b>   |
| vii) open evenings / forums / discussions / open days / concerts, sports days, assemblies  | 1        | 3         | 3         | 1        | 3         | 2         | 0        | 3         | 0        | <b>16</b>  |
| viii) booklets / information / DVDs / more needed / home – school books / reports  | 0        | 3         | 5         | 0        | 1         | 2         | 0        | 6         | 1        | <b>18</b>  |
| ix) videos   | 0        | 1         | 0         | 0        | 0         | 1         | 0        | 0         | 0        | <b>2</b>   |
| x) provide transport to meetings   | 0        | 1         | 0         | 0        | 0         | 1         | 0        | 0         | 0        | <b>2</b>   |
| xi) link them with organisations   | 0        | 0         | 0         | 0        | 0         | 1         | 0        | 0         | 0        | <b>1</b>   |
| xii) home visits   | 1        | 3         | 2         | 0        | 1         | 0         | 1        | 0         | 0        | <b>8</b>   |
| xiii) summer schools   | 0        | 1         | 0         | 0        | 0         | 0         | 0        | 0         | 0        | <b>1</b>   |
| xiv) phone calls   | 0        | 0         | 0         | 0        | 0         | 1         | 0        | 0         | 0        | <b>1</b>   |
| xv) HEC group for parents of pupils with ASD   | 0        | 0         | 0         | 0        | 0         | 0         | 0        | 1         | 0        | <b>1</b>   |
| xvi) Children's Centres – English classes for parents  | 0        | 0         | 0         | 0        | 0         | 0         | 0        | 0         | 0        | <b>1</b>   |
| c) lot of engagement / good relationships / making progress / reasonable / very important especially in Nursery / Early Years                        | 3        | 3         | 2         | 1        | 0         | 1         | 2        | 0         | 1        | <b>13</b>  |
| d) parents in classrooms:  | 0        | 0         | 0         | 0        | 0         | 1         | 0        | 0         | 0        | <b>1</b>   |
| i) parents do not come into class to observe – disruptive  |          |           |           |          |           |           |          |           |          |            |
| ii) parents do come to observe   | 0        | 0         | 1         | 0        | 0         | 0         | 0        | 1         | 0        | <b>2</b>   |
| e) no time to video lessons to send home   | 0        | 0         | 0         | 0        | 0         | 1         | 0        | 0         | 0        | <b>1</b>   |
| f) some see statements as 'the end' / don't understand school, SLT, reality of 1:1 therapy / hard to explain   | 0        | 0         | 0         | 0        | 5         | 0         | 0        | 0         | 0        | <b>5</b>   |
| g) share targets and reviews with parents / formal meetings / IEP reviews  | 0        | 4         | 3         | 0        | 2         | 1         | 1        | 2         | 1        | <b>14</b>  |
| h) not all parents are supportive / disagreements / cultural differences re S and L / reject medical model   | 0        | 9         | 4         | 0        | 1         | 1         | 1        | 0         | 0        | <b>16</b>  |
| i) population more diverse / more problems / less understanding  | 0        | 5         | 0         | 0        | 2         | 0         | 0        | 0         | 0        | <b>7</b>   |
| j) not as effective as it could be / can't meet all needs  | 1        | 2         | 0         | 1        | 0         | 0         | 1        | 1         | 0        | <b>6</b>   |
| k) many parents don't come when invited / KS1 parents less responsive  | 0        | 1         | 1         | 0        | 2         | 2         | 0        | 1         | 0        | <b>7</b>   |
| l) some keep appointments and follow suggestions / partnership / supportive  | 0        | 5         | 4         | 1        | 0         | 0         | 1        | 0         | 0        | <b>11</b>  |
| m) referrals pointless if parents do not keep appointments / if miss appointment go to end of list / school chases parents about missed appointments | 1        | 6         | 2         | 1        | 0         | 0         | 0        | 0         | 0        | <b>10</b>  |
| n) parents obliged to take part in Early Birds Programme (ASD) / EBP very good   | 0        | 0         | 0         | 1        | 0         | 0         | 0        | 1         | 0        | <b>2</b>   |
| o) community room  | 0        | 0         | 1         | 0        | 0         | 0         | 0        | 0         | 0        | <b>1</b>   |
| <b>Totals for 5:</b>   | <b>8</b> | <b>60</b> | <b>33</b> | <b>9</b> | <b>19</b> | <b>25</b> | <b>8</b> | <b>19</b> | <b>7</b> | <b>188</b> |

| <b>6. Links with other schools</b>  |           |            |            |           |            |            |           |            |           |             |
|---|-----------|------------|------------|-----------|------------|------------|-----------|------------|-----------|-------------|
| a) none   | 0         | 1          | 0          | 0         | 0          | 1          | 0         | 0          | 0         | <b>2</b>    |
| b) potential / desire to support mainstream teachers / share expertise / outreach / m.s. schools want links / unit staff link out of goodwill | 0         | 2          | 0          | 0         | 0          | 2          | 5         | 0          | 0         | <b>9</b>    |
| c) mainstream teachers do not know what to do   | 0         | 0          | 0          | 0         | 0          | 1          | 0         | 0          | 0         | <b>1</b>    |
| d) visiting other schools – good for picking up ideas   | 0         | 1          | 0          | 0         | 1          | 2          | 0         | 0          | 0         | <b>4</b>    |
| e) 'rescued' some pupils from mainstream schools – not appropriate place for them   | 0         | 0          | 0          | 0         | 0          | 1          | 0         | 0          | 0         | <b>1</b>    |
| f) Yes we have links:   |           |            |            |           |            |            |           |            |           |             |
| i) joint staff courses  | 0         | 0          | 0          | 1         | 1          | 0          | 1         | 0          | 0         | <b>3</b>    |
| ii) outreach visits to mainstream schools / ms staff visit us to observe teaching / model lessons / sessions with pupils                      | 1         | 8          | 3          | 0         | 1          | 0          | 2         | 3          | 0         | <b>18</b>   |
| iii) links with individual staff in some schools / e-mails  | 0         | 3          | 1          | 2         | 0          | 0          | 0         | 0          | 0         | <b>6</b>    |
| iv) pupil visits  | 1         | 1          | 0          | 0         | 0          | 0          | 1         | 2          | 0         | <b>5</b>    |
| g) staff attend ASD network meetings / S and L network meetings / HT area meetings  | 0         | 1          | 0          | 0         | 1          | 0          | 0         | 0          | 2         | <b>4</b>    |
| h) offer training to TAs / workshops to produce materials   | 0         | 1          | 1          | 0         | 0          | 0          | 0         | 2          | 0         | <b>4</b>    |
| i) resource lending library / Children's Centre toy library   | 0         | 2          | 1          | 1         | 0          | 0          | 0         | 1          | 0         | <b>5</b>    |
| j) pass on pupil SLCN targets to mainstream schools   | 0         | 0          | 0          | 0         | 0          | 0          | 0         | 1          | 0         | <b>1</b>    |
| k) some pupils integrated for some subjects (mainstream and unit)   | 0         | 0          | 2          | 0         | 0          | 0          | 1         | 1          | 0         | <b>4</b>    |
| l) -  | -         | -          | -          | -         | -          | -          | -         | -          | -         | -           |
| m) secondary staff visit primary schools  | 0         | 0          | 0          | 0         | 0          | 0          | 1         | 0          | 0         | <b>1</b>    |
| <b>Totals for 6:</b>  | <b>2</b>  | <b>20</b>  | <b>8</b>   | <b>4</b>  | <b>4</b>   | <b>7</b>   | <b>11</b> | <b>10</b>  | <b>2</b>  | <b>68</b>   |
| <b>Totals 1 - 6 for each set of interviewees:</b>   | <b>69</b> | <b>424</b> | <b>239</b> | <b>69</b> | <b>130</b> | <b>196</b> | <b>74</b> | <b>110</b> | <b>50</b> | <b>1361</b> |