

THE BALANCED SYSTEM™

UNIVERSAL

Universal interventions are by definition available to all.

- Interventions which support the population as a whole and the wider workforce in its fullest sense (website and other online resources would be good examples)
- Includes materials and resources available to the population as a whole through mainstream outlets such as GP surgeries, libraries, children's centres and schools
- Includes generic advice sessions for community groups such as ante-natal classes etc
- Includes training for the wider workforce as a whole to increase awareness and understanding of SLCN and appropriate actions if concerned
- Includes specific training and advice giving around early identification

TARGETED

Targeted interventions sit on a continuum and include those that require the direct involvement of a speech and language therapist and those that have been established with the help of a speech and language therapist initially but are now self-sustaining within settings or schools.

Targeted interventions in the early years might include,

- early language groups, phonological awareness, attention and listening etc
- programmes overseen by a SLT carried out by members of the wider workforce and/or parents and carers

Targeted interventions at school age might include,

- language groups, word finding, social skills, etc always in conjunction with a member of school staff
- programmes overseen by a SLT carried out by members of the wider workforce and/or parents and carers

Targeted interventions may be SLT led and /or maintained by designated school staff with the appropriate training. The decision as to the degree of direct SLT involvement will vary from context to context dependent on the skills and competences of the wider workforce in that instance, as well as the needs of the child and predicted rate of change.

Many schools and settings establish interventions at this level with the initial support of a SLT and then maintain these independently using them as a school based initial intervention prior to referral on. Consequently, not all interventions at the targeted level assume a referral and acceptance onto a SLT caseload and can be at the pre-referral stage.

A useful way of considering the distinction may be to use the sub-divisions lower-targeted (LT or T1) and upper-targeted (UT or T2) as follows:

- Lower-targeted interventions established with the support of a SLT but thereafter delivered independently by members of the wider workforce – can include children both pre-referral as well as post referral and assessment.
 - Children accessing lower-targeted level interventions would either move towards referral and upper-targeted and specialist level interventions or would return to universal level support
- Upper-targeted requiring on-going oversight from a SLT though level of direct involvement will vary. Children accessing upper-targeted interventions may move towards specialist level or back to lower-targeted and thence universal level



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SPECIALIST

Specialist interventions might be with individual children or groups of children – again always with the involvement of a member of setting or school staff and parents / carers who can ensure that the intervention is embedded into the child's wider experience.

Many specialist interventions may follow a similar format to targeted interventions but be differentiated by the specificity of the techniques deployed or the rate of change anticipated from the child necessitating a more highly skilled practitioner to be closely involved in order to monitor and adapt appropriately.

The specialist tier (S level) will be defined by the interventions needed and not primarily by the overall profile of need. Some children at S level will move back to upper-targeted etc after a period of intervention whilst others will remain at S level.

The underlying premise is that all children begin in the universal level and that targeted and specialist level interventions are brought into the child's overall package of care based on need at a given moment in time. Crucially, the level of intervention does not categorise the child and a given child or young person could be receiving several packages from different levels simultaneously.

For example, a child needing a specialist package for disordered speech sounds might also be part of a lower-targeted level group for attention and listening run entirely by school or nursery staff.