Talking About a Generation

CURRENT POLICY, EVIDENCE AND PRACTICE FOR SPEECH, LANGUAGE AND COMMUNICATION

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Foreword

A few words from The Communication Trust

As The Communication Trust reaches its tenth anniversary, we are delighted to have been able to work with an incredible team of experts, academics and practitioners to produce this crucially important report. Special thanks go to the authors Marie Gascoigne, from Better Communication CIC, and Jean Gross CBE, for ensuring this report captures the progress made and sets out clear, practical recommendations which we will now work tirelessly to put into practice.

The policy and practice landscape around speech, language and communication has shifted significantly. We commissioned this report - Talking About a Generation – to research, respond to and influence the changes taking place across education, health and related sectors. We have set out why communication matters in the 21st century, the scale of the problem and the staggering impact it has on children and young people's life chances. Despite the excellent work that has been done, too often speech, language and communication is not prioritised highly enough and we know that practice is hugely variable. The good news is that there is some excellent work out there and compelling evidence about the difference it can make - there is much that can be built upon to support children and young people more effectively across phases.

We want to see speech, language and communication at the heart of policy change and service design across a range of agendas including the home environment, early years settings, schools, further education and the youth justice system. This report acts as a route map for The Communication Trust, our consortium and the whole speech, language and communication sector – we look forward to working with you to make the recommendations a reality.

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DIRECTOR
The Communication Trust

> **'This report acts as a route map for The Communication Trust, our consortium and the whole speech, language and communication sector.'**

Executive summary

Talking About a Generation **explores the development of speech, language and communication skills in children and young people, and especially those who struggle to communicate.**

It reviews recent developments in policy and practice affecting these children and young people, examining the impact of speech, language and communication needs (SLCN) on health and wellbeing, educational progress and employability beyond school. It presents case studies from around the country that show solutions to some of the challenges identified. Finally, the report makes recommendations to government, local authorities, commissioners and providers of health services, schools and settings.

The report is structured around four key themes:

- The missing children: issues of identification and access to provision
- Social disadvantage and speech, language and communication: impact on social mobility
- Ready for school, good progress at school
- Beyond school: further education and employment

The missing children:
Issues of identification and access to provision

What we found

- There is a major mismatch between the known prevalence of SLCN and the numbers of children actually being identified and supported
- Failing to identify children has a profound impact on their life outcomes
- Tools and systems that allow for effective early identification are available but not used consistently

Recommendations

- Government should address inequalities in access to the Healthy Child Programme review of children's development at age two, and maintain communication and language as a prime area of assessment in any future baseline assessment on school entry
- Joint inspections by Ofsted and the Care Quality Commission should include a judgement on whether children and young people's SLCN are being effectively identified in the local area
- In developing their Education, Health and Care needs assessments, local areas should compare the incidence of SLCN in schools (SEN Pupil Level Annual School Census data or PLASC survey) with the research-based expected prevalence figures in this report, and develop plans to tackle under identification
- Schools should similarly compare the incidence of SLCN in their setting with the expected prevalence figures, and develop plans to tackle under-identification using the range of tools now available to them
- Those commissioning and providing speech and language therapy services must acknowledge the importance of training the wider workforce in the identification of children at risk of SLCN in order to make onward referral

Social disadvantage and speech, language and communication:
Impact on social mobility

What we found

- Children who experience persistent disadvantage are significantly less likely to develop the language needed for learning than those who never experience disadvantage
- Good language skills are crucial to social mobility
- It is entirely possible to break the link between language difficulties and disadvantage, with the right support at home, in early education and in school

Recommendations

- Government's review of the work of children's centres should include a focus on supporting the development of early language and communication skills in children under two
- Government should ensure that speech, language and communication skills are a key plank in government's new strategy for opportunity areas
- Government should develop a thematic focus for the annual Pupil Premium Awards, with work to develop speaking and listening skills in disadvantaged children and young people as the first theme
- Local Authorities and Clinical Commissioning Groups should jointly commission coherent community-wide strategies designed to tackle the language gap in children's early years, and differentiate commissioned provision for SLCN to take account of local patterns and pockets of disadvantage

Ready for school, good progress at school

What we found

- Good speech, language and communication skills are essential for doing well at school, but this is not being recognised or acted upon widely
- There is good evidence that language interventions directly improve school attainment
- There is a high degree of variability in the support provided for children with SLCN within the school system

Recommendations

- Government should include mandatory input on developing all children and young people's speech, language and communication skills in initial teacher training requirements
- Government should ask Ofsted to re-instate the teaching of communication skills in its framework for inspection
- In its continued evaluation of the implementation of the SEND reforms, government should monitor the extent to which local offers include a clear description of the provision schools should make for SLCN from their delegated budgets
- Government should reinforce the expectation on Clinical Commissioning Groups to jointly commission provision for children and young people with SLCN across the age range
- Local Area Inspections should specifically seek evidence of effective joint commissioning arrangements for therapy services including speech and language therapy
- Schools should use the opportunities for collaboration presented by new structures (such as multi-academy trusts) to develop consistent work on SLC across groups of schools and across the age range, and to commission enhanced services to meet their children's needs at universal and targeted levels

Beyond school:
further education and employment

What we found

- The demands of the workplace rely increasingly on good communication skills
- Without these skills young people are significantly less likely to be employed and more likely to experience mental health problems and enter the criminal justice system
- There are examples of effective 'beyond school' provision for young people with SLCN, but they are isolated and need to be built on

Recommendations

- Government should ensure that curriculum and accountability frameworks focus on oracy in secondary schools and FE to ensure functional skills preparation for employment
- Government should fund a programme to develop universal resources focused on the 16+ context
- Local areas should specifically and jointly commission for the 19-25 age range for those with SEND including SLCN
- Speech and language therapy services should actively take up opportunities to provide enhanced services to settings, schools and FE colleges, to Youth Offending Teams and to support those with SLCN using Access to Work funding to enter the workplace

Talking About a Generation **identifies the key areas that continue to impact on the life chances of children and young people growing up in a world where good speech, language and communication skills are increasingly vital for life.**

These young people need prompt, concerted action from national and local government, and from schools, colleges and employers, if they are to have the opportunities they deserve. This report has made recommendations for such action. The case for change is clear - we cannot afford to let down another generation.

Talking About a Generation:

The importance of speech, language and communication from early years to employment

This report is about the development of speech, language and communication skills for children and young people and especially those who struggle to communicate. *Talking About a Generation* comes three years after The Communication Trust's previous report *A Generation Adrift*[1]. Since then much has changed in the national frameworks that affect speech, language and communication needs (SLCN), and there have been significant developments in the evidence base.

Talking About a Generation examines these changes and presents an overview of current policy and practice. It examines the impact of work to develop speech, language and communication skills across the country, linking policy, evidence and practice. It considers the challenges faced by children, young people and their families where there are difficulties in acquiring and using these crucial skills. The report highlights the impact on these children and young people for learning, interacting and participating: at home, at school, in further education and into the work place.

The evidence about what works to best support children and young people with SLCN is increasing. The importance of getting the strategy and systems right, as well as the direct approaches with children, is also becoming clear. These areas are addressed in this report, including new analysis of Early Foundation Stage Profile (EYFSP) and Special Educational Needs and Disability (SEND) data. Case studies are used to illustrate key points throughout the document. Finally, the report sets out ambitions for improvement and makes recommendations for action by government, local authorities and their health partners, schools, and providers of support for children and young people with SLCN.

The report is structured around four key themes:

- **The missing children: issues of identification and access to provision**
- **Social disadvantage and speech, language and communication: impact on social mobility**
- **Ready for school, good progress at school**
- **Beyond school: further education and employment**

A word on definitions – who are we talking about?

We are talking about all children and young people who find it difficult to develop the speech, language and communication skills they need for life: for socialising, for learning, for well-being and good mental health and to increase opportunities for employment and participation.

There are many reasons why children and young people may struggle to develop these core skills and different parts of the education, health and social care systems identify these differently.

The term 'speech, language and communication need' or SLCN, has been used widely by speech and language therapists for over a decade as a collective term to describe all children and young people with needs in this area. Within this broad definition have been included children and young people who might have a specific description such as 'specific language impairment', speech sound difficulties, stammering, as well as those with skills that are delayed or part of a wider profile of special educational needs or disability (SEND). The term SLCN is also used to identify needs within different populations of children and young people where evidence of an association between social disadvantage and developing speech and language skills has been found. The response to meeting these needs has been a tiered approach with a universal offer, targeted and specialist interventions.

In education, the term SLCN is used to describe any child who needs educational provision to meet their speech and language needs that is 'additional to and different from' that made for all children and young people. This will include all relevant provision as part of the Local Offer in a given area as well as the support available when a child or young person is supported through School Support or with an Education, Health and Care Plan (EHCP). In this context, SLCN is a specific category of need within the SEND system.

In 2016, an international study, initiated in the UK but involving experts from all over the world, set in process a further shift in terminology, with the term 'developmental language disorder' being agreed as the best way of describing those speech, language and communication difficulties at the more significant end of the continuum[2]. This new definition replaces the term 'specific language impairment' and focuses on describing the profile needs of children who struggle significantly with speech, language and communication skills and less on ruling out possible factors that might have contributed to these needs such as difficulties with non-verbal ability, or lack of opportunity for developing language skills. These children and young people's needs can be met through a range of support, some within the SEND system and some through the SLCN support system or both.

It is important to understand that these two ways of describing children and their needs do not simply overlay. There are many more children and young people with SLCN as identified by speech and language therapists than will be recognised by the SEND system and there will be children and young people with Education, Health and Care Plans who would not be considered to have the most significant speech, language and communication needs.

Speech, language and communication skills for the 21st century

Language is our tool for thinking and learning. It is through communication that we build relationships and resolve conflicts.

Language and communication skills are vital to the economy. Employers are increasingly concerned about a disconnect between the skills of young people entering the workforce and the demands on them to demonstrate good communication and interaction skills[3]. It is estimated that current pupils within the education system will enter a job market where 65% of the job roles have yet to be invented but will increasingly rely on 'soft' skills including the ability to communicate effectively[4]. It is a high priority area.

And yet a recent State of Education survey[5] of more than 1,100 senior primary school staff found 80% of teachers were worried about children having poor social skills or speech and language problems on starting school. In another poll[6], 80% of teachers said they were spending extra time helping children learn basic communication skills. More than 75% voiced concerns that despite their best classroom efforts these children may never catch up. The same number said the problem was affecting their schools' results, and that poor language development is causing problems for classroom management.

The policy landscape

The policy landscape for speech, language and communication is complex and rapidly changing.

We have assessed this landscape as it impacts on the development of speech, language and communication for all children and young people, and for those who need additional help. Figure 2 on page 12 shows the relevant legislation, policy guidance and SLCN specific initiatives and how they relate to the four key themes of the report. We have identified factors in the policy landscape which are enabling for these children and young people and also some that are perhaps hindering progress. We will revisit these in each of the four sections of this report.

Impact on life chances

Long term studies have found that early speech, language and communication difficulties predict a wide range of negative outcomes.

We know that good vocabulary at 16-24 months, predicts good reading accuracy and comprehension five years later[7]. Children who struggle with language at five are six times less likely to reach the expected standard in English at age 11 than children who have had good language skills at five, and ten times less likely to achieve the expected level in maths[8]. Children with poor vocabulary at age five are more than twice as likely to be unemployed at age 34 as children with good vocabulary (but similar non-verbal ability).

They are also one and a half times more likely to have mental health difficulties, even after taking account of a range of other factors that might have played a part (mother's educational level, overcrowding, low birth weight, parent a poor reader and so on).[9]

Figure 3 on page 14 shows the negative impact of poor early speech and language on life chances as a child grows up, along with examples of interventions that can help reduce this long-term impact.

THE MISSING CHILDREN:
IDENTIFICATION & ACCESS

HELPING
- Healthy Child Programme Two Year Review
- Early Years Foundation Stage Profile at age five
- Public Health transition to Local Authorities

HINDERING
- Issues with recruitment of health visitors
- Poor access in some areas to two year review
- No assessment of speech, language and communication after five within the curriculum

SOCIAL DISADVANTAGE & SLCN:
IMPACT ON SOCIAL MOBILITY

HELPING
- A Better Start: Big Lottery Fund projects
- Free early education for disadvantaged two year olds
- Pupil Premium and Early Years Pupil Premium

HINDERING
- Poor take up of free early education for two year olds
- Poorer quality early years provision in parts of the sector in disadvantaged areas
- Pupil Premium not always used effectively

READY FOR SCHOOL,
GOOD PROGRESS AT SCHOOL

HELPING
- SEND reforms focus on children & families, better classroom teaching and joint working across health and education and joint working/commissioning across health and education

HINDERING
- Implementation of SEND reforms against a background of austerity
- Lack of clear guidance on Clinical Commissioning Group accountability for SLCN

BEYOND SCHOOL:
FURTHER EDUCATION AND EMPLOYABILITY

HELPING
- Ofsted inspection framework for further education and skills makes some reference to communication skills

HINDERING
- SLC is not built into functional skills qualification & communication skills not a focus in FE
- Lack of funding for post-school provision

REPORT THEMES

LEGISLATIVE AND POLICY CONTEXT

- Early Years Curriculum: Communication and Language ELG 1-3
- Ofsted Inspection Framework 2015
- Better Communication Action Plan, 2008- 2010
- The Healthy Child Programme
- The National Year of Communication, 2011
- 2015 National Curriculum
- SEND Code of Practice 0-25, 2015
- NHS Five Year Forward View
- Education Act, 2011
- Bercow Review, 2008
- Early Years Foundation Stage Profile
- Education & Adoption Act, 2016
- Early Language Development Programme
- Joint Commissioning between LAs and CCGs of key provision
- Health Act, 2012
- Children & Families Act, 2014
- Every Child a Talker
- The Local Offer
- Free EYs places for disadvantaged two year olds
- Better Communication Research Programme, 2012
- Healthy Child Integrated Review
- A Better Start
- Ofsted/CQC Joint Inspections of Local Areas

IF I HAVE POOR COMMUNICATION AND LANGUAGE SKILLS WHEN I'M FIVE, THEN BY THE TIME I'M 11 I'M SIX TIMES LESS LIKELY TO DO WELL IN ENGLISH AND TEN TIMES LESS LIKELY TO DO WELL IN MATHS TESTS THAN MY MORE CHATTY FRIENDS.[14]

IF MY FAMILY IS SOCIALLY DISADVANTAGED I HAVE A HIGHER RISK OF NOT DEVELOPING GOOD SPEECH, LANGUAGE AND COMMUNICATION SKILLS.[10]

IF I HAVE A LIMITED VOCABULARY AT TWO, BY THE TIME I'M SIX I'M LIKELY TO BE DOING MUCH LESS WELL ACADEMICALLY AND SOCIALLY THAN OTHER CHILDREN. BY THE TIME I'M SEVEN I WILL BE READING MUCH LESS WELL THAN THEY ARE.[11]

IF I'M LATE TALKING AND COME FROM A HOME WITH NOT MUCH MONEY, I'M MUCH MORE LIKELY TO BE BEHIND MY FRIENDS IN READING AND WRITING AT FIVE THAN MY FRIENDS FROM BETTER-OFF FAMILIES WHO ARE ALSO LATE WITH THEIR LANGUAGE AT THREE.[12]

IF I HAVE POOR COMMUNICATION AND LANGUAGE SKILLS AT FIVE, BY THE END OF KEY STAGE 1, WHEN I'M SEVEN, I'M LIKELY TO ENJOY SCHOOL LESS.[13]

IF I HAVE A POOR VOCABULARY WHEN I'M FIVE, I'M MORE THAN TWICE AS LIKELY TO BE UNEMPLOYED IN MY THIRTIES AS A SIMILAR CHILD WITH A GOOD VOCABULARY. I'M ONE AND A HALF TIMES MORE LIKELY TO HAVE MENTAL HEALTH PROBLEMS.[15]

IF I STRUGGLE TO UNDERSTAND LANGUAGE WHEN I'M SIX, I MAY START TO BE REJECTED BY MY PEERS AND AS A RESULT SHOW BEHAVIOUR PROBLEMS WHEN I'M TEN.[16]

I'M A NEWBORN | **I'M 2** | **I'M 3** | **I'M 4** | **I'M 5** | **I'M 6**

MY PARENTS LEARNED FROM ANTENATAL CLASSES HOW IMPORTANT IT IS TO TALK, SING AND READ TO ME, RIGHT FROM THE START.

AT MY 2-YEAR CHECK A HEALTH VISITOR NOTICED I NEEDED SOME HELP WITH MY TALKING. MY MUM AND DAD COULD DROP IN AT A CHILDREN'S CENTRE TO GET ADVICE AND A REFERRAL FOR MORE DETAILED ASSESSMENT IF NEEDED.

WE GO TO SPEECH AND LANGUAGE THERAPY PARENT-CHILD INTERACTION SESSIONS WHERE MY PARENTS CAN GET LOTS OF IDEAS TO HELP MY TALKING AND LISTENING.

I GET A FREE PLACE AT A NURSERY WHERE STAFF HAVE HAD LOTS OF TRAINING AND KNOW HOW TO HELP ME.

I TAKE PART IN SPECIAL SMALL-GROUP SESSIONS IN MY NURSERY, TO HELP MY LISTENING AND TALKING. A CHILDREN'S CENTRE WORKER VISITS MY MUM AND DAD AT HOME TO SHOW THEM GOOD WAYS OF SHARING BOOKS WITH ME.

MY RECEPTION CLASS TEACHER KEEPS A RECORD OF MY PROGRESS IN IMPORTANT AREAS OF LEARNING INCLUDING COMMUNICATION AND LANGUAGE. THIS MEANS THAT THEY KNOW IF I NEED SOME EXTRA HELP.

I WORK WITH A SPECIALLY TRAINED TEACHING ASSISTANT ON A PROGRAMME SET UP AND SUPPORTED BY A SPEECH AND LANGUAGE THERAPIST.

IN CLASS I HAVE LOTS OF CHANCES TO LEARN NEW WORDS. MY TEACHER KNOWS ALL ABOUT TEACHING TALKING.

The missing children:
issues of identification and access to provision

Analysis for this report shows that whatever the definition of SLCN, there is evidence of under identification across health and education services. Children's needs are being missed, and the consequences for individuals and for society are profound.

HELPING

- Healthy Child Programme 2 Year Review
- Early Years Foundation Stage Profile at age 5
- Public Health transition to Local Authorities
- Schools directly commissioning training and specialist support for identification of pupils

HINDERING

- Issues with recruitment of health visitors
- Poor access in some areas to two year review
- No assessment of speech, language and communication after five within the curriculum
- Inconsistency of school commissioning and provision nationally

Research tells us that up to **50% OF CHILDREN STARTING SCHOOL IN THE MOST DISADVANTAGED AREAS WILL HAVE SPEECH, LANGUAGE AND COMMUNICATION NEEDS**[17] that should be recognised by schools and will benefit from targeted support in addition to good universal provision. Some of these children will go on to be identified with more significant and long-lasting SLCN. That's half of every reception class in the most disadvantaged areas.

Research tells us that **7.6% OF CHILDREN IN THE EARLY PRIMARY YEARS WILL HAVE A DEVELOPMENTAL LANGUAGE DISORDER NOT LINKED TO FACTORS SUCH AS GENERAL LEARNING DIFFICULTIES, CEREBRAL PALSY OR HEARING IMPAIRMENT.**[18]

THAT IS 2 CHILDREN IN EVERY CLASS OF THIRTY.

This means that developmental language disorder is far more common than other childhood conditions that are more familiar to the general public, such as autism and dyslexia.

Analysis of the SEND data tells us that **ONLY 2.6% OF CHILDREN ARE IDENTIFIED BY THE SEND SYSTEM** (School Support as well as for an Education, Health and Care Plan) as having SLCN as a primary need. In a review of thirty speech and language therapy caseloads, the average percentage of children known to speech and language therapy is just under **4% OF THEIR LOCAL POPULATION, OF WHICH APPROXIMATELY HALF ARE SCHOOL AGE.**[19]

Whatever the measure, research tells us that these children and young people are in our Early Years and school systems, and yet they are not being identified. Where are the missing children?

> '**Developmental language disorder is probably the most common childhood condition you have never heard of**'
>
> **NORBURY, 2016**

The most recent contribution to the prevalence evidence base comes from a population-based study in Surrey[20]. The SCALES study found that 7.6 % of children starting in mainstream reception classrooms (two children in every class of 30) have difficulties with speech, language and communication that impact on their ability to learn and which are not linked to factors such as general learning difficulties, cerebral palsy or hearing impairment[21].

This study took place in one of the least disadvantaged areas in England. However, there is evidence that in areas of disadvantage the prevalence of speech, language and communication needs is significantly greater. For example, a study of primary age children from one of the most socially deprived neighbourhoods in Scotland found that nearly 40% of children had delayed language development, with 10% having severe difficulties[22]. In a cluster of schools in a highly disadvantaged part of Manchester, 50% of the nursery sample had significant difficulties, scoring at a level where they would be deemed in need of extra support. This picture continued across the age range into secondary level where 50% of thirteen year olds were assessed as having severe language difficulties, meeting criteria for the then Statements of SEN[23].

How many children are currently being identified?

SLCN is the most reported category of SEND in primary schools at 28% of all children and young people reported by schools to have additional needs.

FIGURE 4: PERCENTAGE (%) OF ALL CHILDREN AND YOUNG PEOPLE WITH SEND BY CATEGORY
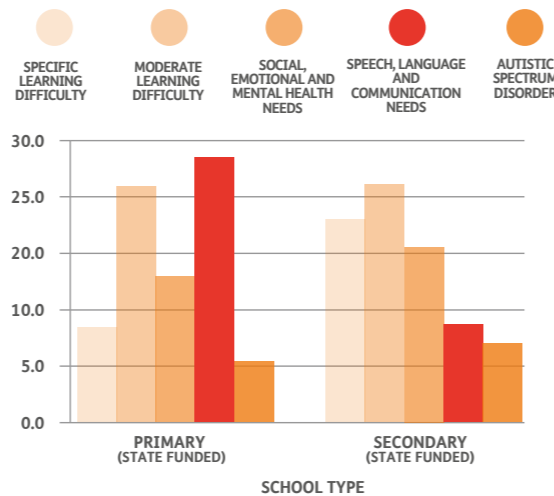
In 2016, 2.6% of all pupils in England were identified as having SLCN as their main special educational need, an increase on previous years.

Teachers need considerable training and support to identify SLCN accurately. In a study in Manchester teachers were found to be missing around half of children's SLCN. The researchers have termed this 'norm-shifting', where due to the large numbers with SLCN in their school or setting, practitioners come to consider as above average children whose communication skills are actually average in terms of national age related expectations[24].

Information taken from speech and language therapy services in 30 areas drawn from across the country, show that typically between 2.3% - 4.7% of the local child and young person population will have been referred to the speech and language therapy service[25]. These will include children and young people who have SLCN that are not directly related to SEN, such as stammering, and also pre-school children , so the numbers of school age children with SEND that are known to these specialist services are even lower.

Even when children are initially identified by the SEND system as having SLCN, they are often 're-categorised' by schools as they grow older. The Better Communication Research Programme found that of those children identified at School Action Plus with SLCN at Key Stage 2, 17% were re-categorised with another type of SEN (mostly moderate learning difficulty or specific learning difficulty) when they moved to secondary school, and 59% moved to a lower level of need by the end of Key Stage 3[26].

The long-term impact of under-identification and lack of support for speech, language and communication needs is significant. Research shows that high numbers of young people with mental health needs or behaviour difficulties have SLCN that have been missed earlier on in their lives[27, 28].

Under-identification is an issue for the justice system also. A study found that two thirds of young offenders have speech, language and communication difficulties, but in only 5% of cases were they identified before the offending began[29].

What's happening on the ground

Effective, timely identification of SLCN need not be difficult. A good range of online and paper based tools for systematic screening for SLCN of every age group from 6 months to secondary is now available from the voluntary sector and commercial organisations.

The health visitor check of development for every two-and-a-half-year-old is a key opportunity for identifying children who may need additional help, or whose families would value advice on developing early language and communication skills. However, in some parts of the country, as few as one in four children have had this crucial check with their health visitor[30].

Some areas are using tools to screen whole cohorts of children and young people, to decide which need referring for specialist assessment, which can be supported by the school's own systems and which are of no specific concern. But examples like this are not common, and a recent workforce survey found that 59% of respondents reported having little or no initial training in identifying (and supporting) children with SLCN[31].

There are key professionals within the wider workforce who must be able to identify children and young people at risk of SLCN in order to make appropriate referrals. The Health Visitor role is pivotal to early identification and specific training for Health Visitors is essential. Early years practitioners and teachers are also key to identification. Tools such as the Speech, Language and Communication Framework (SLCF)[32] are accessible and effective in helping individuals and teams assess their competences and access information about appropriate training. The Communication Trust Progression Tools provide accessible checklists based on developmental norms[33].

Alongside this the specialist speech and language therapist and specialist teacher workforce need to be appropriately funded to provide the necessary training and support to the wider workforce. Without this whole system approach, the cycle of under-identification is sure to continue.

What needs to happen

To reduce numbers of children whose SLCN are not identified:

- Government should address inequalities in access to the Healthy Child Programme review of children's progress at age two, and maintain communication and language as a prime area in any future baseline assessment on school entry

- Joint inspections by Ofsted and the Care Quality Commission should include a judgement on whether children and young people's SLCN are being effectively identified in the local area

- In developing their Education, Health and Care needs assessments, local areas should compare the incidence of SLCN in schools with the research-based expected prevalence figures in this report, and develop plans to tackle under identification

- Schools should compare the incidence of SLCN in their setting (SEN PLASC survey) with the research-based expected prevalence figures in this report, and develop plans to tackle under identification using the range of tools now available to them

- The importance of training for the wider workforce in the identification of children at risk of SLCN in order to make onward referral must be acknowledged by those commissioning and providing speech and language therapy services

Social disadvantage and speech, language and communication:

impact on social mobility

Three quarters of children who experience persistent poverty throughout their early years start school without the language skills they need for learning[34]

- 🗨 **A Better Start Lottery funded projects**
- 🗨 **Free early education for disadvantaged 2 year olds**
- 🗨 **Pupil Premium and Early Years Pupil Premium**

- 🗨 **Poor take up of free early education for 2 year olds**
- 🗨 **Poorer quality early years provision in parts of the sector in disadvantaged areas**
- 🗨 **Pupil Premium not always used effectively**

75%

35%

2X
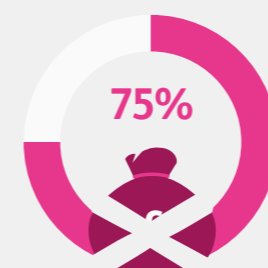
Language difficulties are a defining factor in disadvantage. By the age of five, **75% OF CHILDREN WHO EXPERIENCED POVERTY** persistently throughout the early years are below the average in language development, **COMPARED TO 35% WHO NEVER EXPERIENCED POVERTY**[35].

In school-aged children the likelihood of being identified as having SLCN is **2.3 TIMES GREATER** for children eligible for free school meals (FSM) and living in areas of disadvantage[36].

'When we look at studies of whole populations, we see a clear 'social gradient' for language, with children from the most disadvantaged groups having lower language skills than those in the least disadvantaged groups.... If we look at the longer-term impact of language delay, all studies appear to tell the same story – namely, that those from the most disadvantaged backgrounds are the least likely to catch up'

LAW ET AL, 2013

At the start of life

The disadvantage gap opens early. Studies of the UK cohort of children born at the millennium have found that at the age of three children in the lowest income group have language skills on average 17 months behind children in the highest income group. At age five, the gap is 19 months. The gap in language is very much larger than gaps in other cognitive skills, and larger than in other developed countries[37,38]. In addition, children from disadvantaged backgrounds who do well in vocabulary tests at age three are more likely to fall behind by the age of five than their wealthier classmates[39].

At the end of the Early Years Foundation Stage

Analysis of the Early Years Foundation Stage Profile (EYFSP) data for England shows some notable trends. The percentage of children reaching the expected level of development on all 17 Early Learning Goals (ELG) and disadvantage measured using the Income Deprivation Affecting Children Index (IDACI) were compared. Children in Local Authorities with the highest levels of disadvantage consistently do less well in all the areas of learning but the most significantly affected are Understanding, Speaking and Reading.

FIGURE 5: SHOWING THE RELATIONSHIP BETWEEN SOCIAL DISADVANTAGE AND LANGUAGE SCORES IN THE MILLENNIUM COHORT STUDY IN ENGLAND[40]
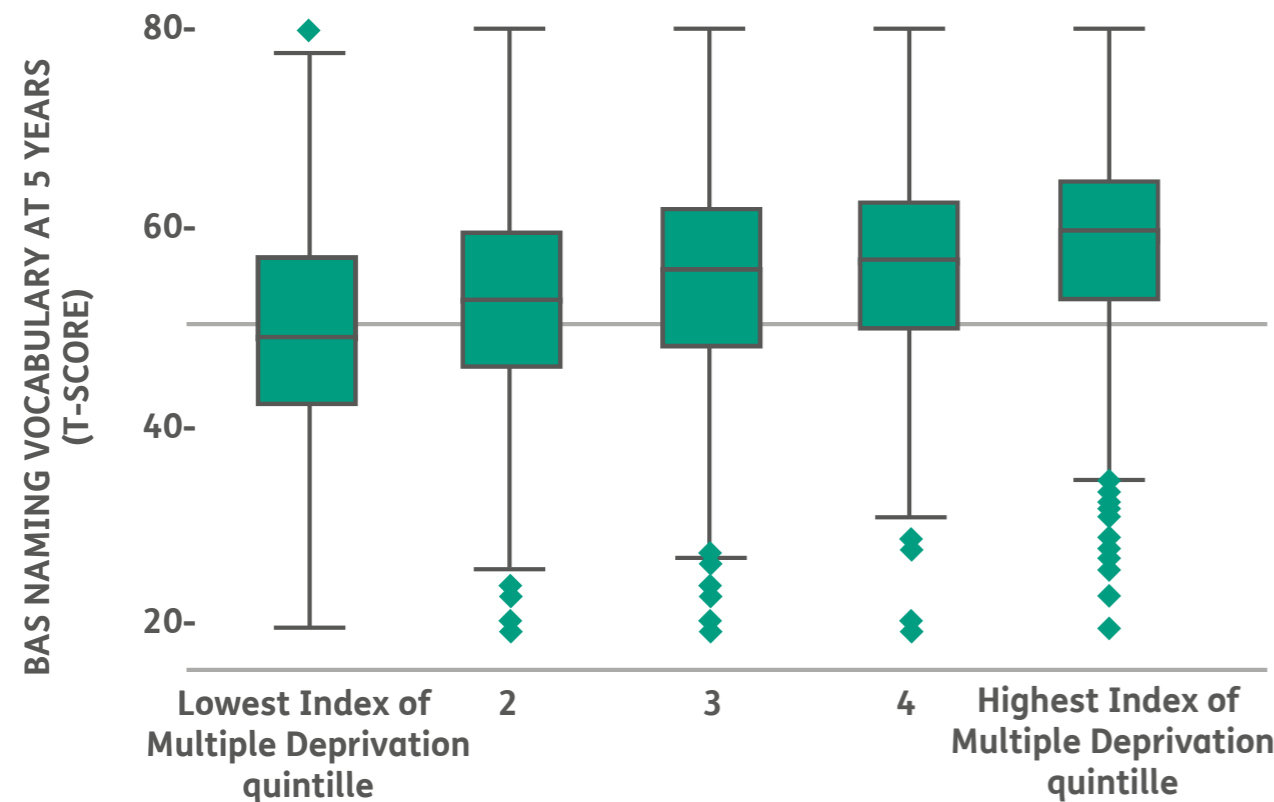
Figure 6, below, illustrates this direct relationship using the data for the three Communication and Language ELGs (1-3): the more disadvantaged (low IDACI) the lower the percentage of children achieving the expected level of development.

FIGURE 6: SHOWING THE RELATIONSHIP BETWEEN INCREASED DISADVANTAGE AND LOWER ACHIEVEMENT ON ELG 1-3
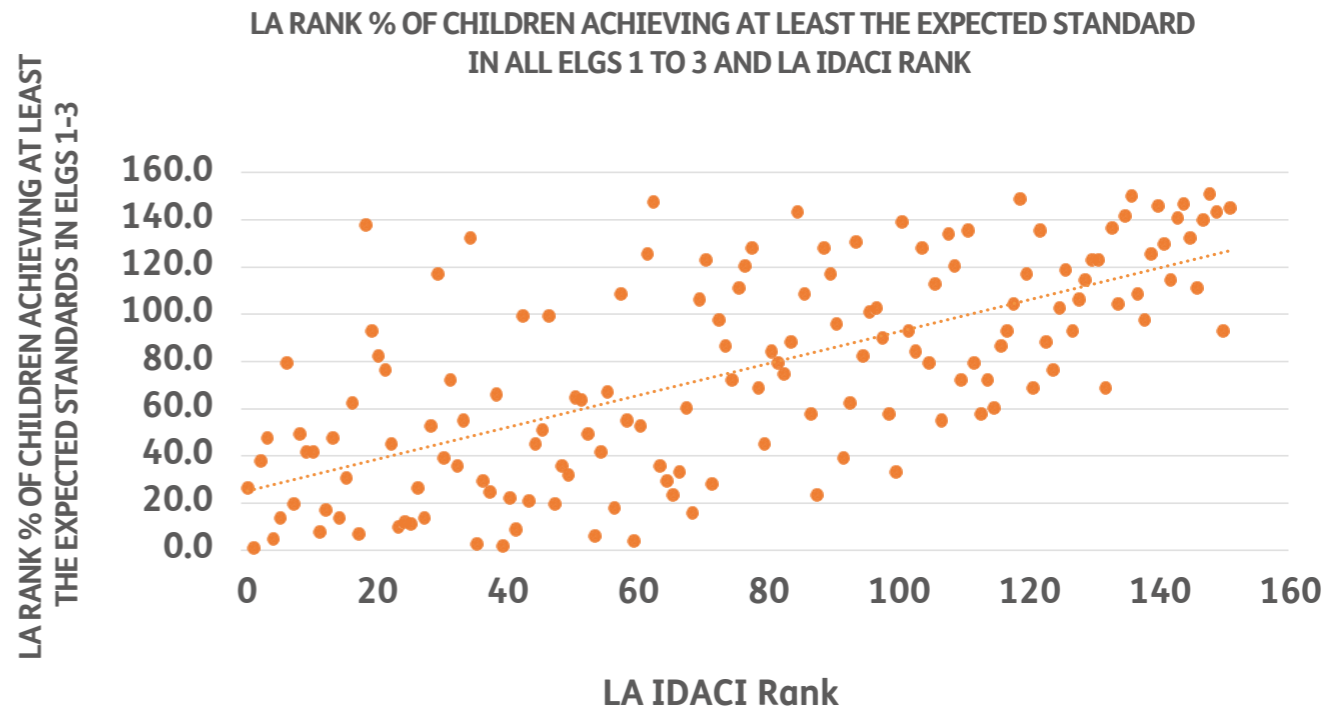
However, it is encouraging to see the improvements now taking place in some of these disadvantaged areas in England. Figure 7 below shows the ten local authorities with the greatest three-year improvement in the Communication and Language Area of Learning; seven of them are amongst the most disadvantaged.

FIGURE 7: SHOWING THE LAS IN ENGLAND WITH THE GREATEST IMPROVEMENT IN ELG 1-3 2014 – 2016

TOP 10 IMPROVING LA DISTRICTS ACHIEVING AT LEAST EXPECTED ACROSS ALL LEARNING GOALS IN COMMUNICATION AND LANGUAGE (ELG1 TO 3) BETWEEN 2014 AND 2016 SHOWN BY IDACI DEPRIVATION RANKING

- 10% (Bury)
- 20% (Hillingdon, Northumberland)
- 30% (Doncaster, Blackburn with Darwen, Halton)
- 40% (Nottingham, Leicester, Redcar and Cleveland, Newcastle upon Tyne)

IDACI 121 - 152   IDACI 91 - 121   IDACI 61 - 90   IDACI 31 - 60   IDACI 1 - 30

At school

Poorer children who are behind in language when young are also less likely than their peers to catch up in school. Children living in poverty who experience language delay at the age of three are significantly more likely to be behind in literacy at the age of 11 than children in better-off families who experience language delay[41].

It seems that what happens in schools can compound the effects of early disadvantage. Teachers serving in economically advantaged schools, for example, explain words more often and are more likely to explain sophisticated words than teachers in economically disadvantaged schools[42].

Good language skills are a crucial factor in social mobility. Disadvantaged young people – like those at School 21 in the case study – need to be confident communicators if they are to access top universities and good jobs.

There is evidence, however, that this type of approach to social mobility is uncommon. A recent survey of 900 teachers across the UK found that, when compared to teachers in independent schools, teachers in state schools were less likely to feel that it was 'very important' to develop skills in oracy, less likely to report that their school had debating clubs, and more likely to report major barriers to initiating talk-based activities in class[43].

CASE STUDY

School 21, an all-age free school serving a disadvantaged area of London, operates on the principle that developing oracy skills is vital if its students are to get on in life. The skills are taught in dedicated curriculum time of one hour a week, but students also use oracy techniques in the classroom, every day, in every lesson. Together with Cambridge University, the school have developed a framework: http://www.educ.cam.ac.uk/research/projects/oracytoolkit/oracyskillsframework/ to describe pupil progress. Using this framework, academics tracked a sample of Year 7 students at School 21, and found they made exceptional progress when compared to students from control schools not using the oracy curriculum. Staff are sure, too, that the oracy focus was fundamental to the school's recent 'outstanding' Ofsted grading.

'When I take our students on the debating circuit … they will largely be surrounded by children from independent [schools…]. I'm on a mission to make sure that children like ours in schools like ours have access to what is essentially the language of power.'

GEOFF BARTON, HEADTEACHER, KING EDWARD VI SCHOOL

What can we do?

Working with parents and families from the start

It is entirely possible to break the link between language difficulties and disadvantage. Research shows that the child's communication environment (the early ownership of books, trips to the library, attendance at pre-school, parents teaching a range of activities and the number of toys and books available) is a more important predictor of how a child's language will be at two and on school entry 'baseline' scores at four, than socio-economic background alone[44]. The right information and support for parents and families is therefore crucial in making sure all children have the best start in developing speech, language and communication skills.

Research in Scotland following a group of children from birth[45], has found that that early home learning activities improve vocabulary scores measured at age three, for all families regardless of home circumstance. This study also shows that language is most influenced by factors in the home environment as opposed to in pre-school education. This means that better pre-school provision is unlikely to be the only answer to narrowing the social disadvantage language gap.

> **'Any strategies for improving school readiness via the pre-school setting need to include, for more disadvantaged children, strategies which seek to influence the child's home environment and parenting experiences at the same time… to ensure that children's cognitive ability is maximised… such strategies should focus on the quality of the parent-child relationship and frequency of home learning activities'**
>
> GROWING UP IN SCOTLAND, 2011

Working with schools and settings

This is not to say that we cannot make a difference to disadvantage through provision in schools and pre-school settings. We can. For the example, evaluation of the pilot of government-funded provision for most disadvantaged two year olds found that attending a high-quality nursery made a significant difference to children's language skills[46]. We know too, that a high proportion of socially disadvantaged children can catch up with other children in language skills as a result of relatively brief small group interventions. Research into a group of Key Stage 1 children (ages five to seven) receiving one such intervention made on average 14-months progress on a test of vocabulary and language development after just ten weeks of twice weekly group help[47].

Working with commissioners of services

If the right provision is to be available to put in place evidence based support for children and families, commissioners from all parts of the public sector need to understand and act to ensure appropriate service provision. Schools and settings have the Pupil Premium to use to fund additional support and training to enable their staff to provide good universal and targeted support as well as enhancing the amount of support available from external specialists. Health commissioners (CCGs) and local authorities have a duty to commission jointly, using funding to increase impact and avoid duplication of effort. Most importantly they should be allocating resources, such as speech and language therapy, to follow need and not based on historical patterns of spending. There are a number of resources available to support effective commissioning for SLCN[48,49,50].

CASE STUDY

Marine Park Primary's nursery in South Tyneside serves one of the most disadvantaged areas of the country. Staff chose to spend a significant part of the Early Years Pupil Premium on supporting parent-child interaction in the home. They used the Making it REAL programme, in which staff are trained to make home visits to model interaction and book-sharing. Marine Park carried out two or three of these per child, involving a bilingual teaching assistant where English was not the language of the home. Data at children's entry to Reception has shown improvements in children's understanding of language, listening skills, social skills and vocabulary. **More information at http://www.real-online.group.shef.ac.uk/index.html**

There is evidence that community-wide strategies are particularly effective in narrowing the disadvantage gap.

Case studies from Nottinghamshire and Stoke on Trent illustrate effective community based work to improve speech, language and communication.

CASE STUDY

Nottinghamshire's 'Language for Life strategy' aims to ensure that developing children's communication is everyone's business, particularly in disadvantaged communities. The Council commission a team of speech and language therapists to manage a public health campaign with key messages for parents, to provide a continuum of professional development and support for early years practitioners and to support targeted interventions at home and in settings. The SLTs are based in Children's Centres and form part of an integrated team with Health Visitors, Family Nurse Partnership practitioners and children's centre staff.

Every early years setting is encouraged to identify a language lead who works towards a formal accreditation. This incorporates locally defined competencies as well as The Communication Trust's Level 3 award in Supporting Speech, Language and Communication.

For schools, the resourceful SLT team have recently developed a traded service which offers a 'Talking to Learn' whole-school development programme.
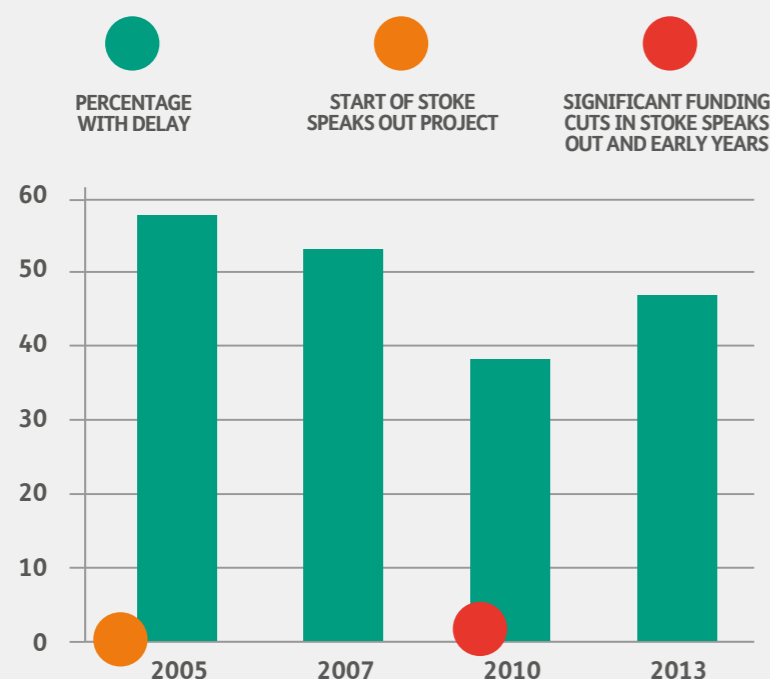
The impact of all this work has been significant. Overall Communication and Language Scores on the Early Years Foundation Stage Profile have risen to above national levels, with the gap between disadvantaged children and their peers beginning to close. In schools involved in Talking to Learn, almost all children receiving the Pupil Premium now have age appropriate language skills compared to less than half at the beginning of the year.

A report from the Education Endowment Foundation includes case studies illustrating joint commissioning in practice in five areas of relative social disadvantage[51]. These case studies highlight the need for a systematic approach to commissioning based on a robust needs analysis and then differentiated provision according to need, which may involve providing targeted interventions 'universally' in areas of significant need. They also identify enabling factors to achieving effective joint commissioning including local strategic champions for children and young people with SLCN.

What needs to happen

In order to reduce the disadvantage gap for speech, language and communication and improve social mobility

- Government's review of the work of children's centres should recommend a focus on developing early language and communication skills in children under two

- Government should ensure that speech, language and communication skills are a key plank in its new strategy for opportunity areas

- Government should develop a thematic focus for the annual Pupil Premium Awards, with work to develop speaking and listening skills in disadvantaged children and young people as the first theme

- Local Authorities and Clinical Commissioning Groups should jointly commission coherent community-wide strategies designed to tackle the language gap in children's early years, and differentiate commissioned provision for SLCN to take account of local patterns and pockets of disadvantage

FIGURE 8: FROM LAW ET AL, 2017 SHOWING THE COMMISSIONING RESPONSE TO NEEDS IN SOCIALLY DISADVANTAGED AREAS

ADJUSTING THE BALANCED SYSTEM® MODEL TO MEET NEED

STRENGTHEN TARGETED SUPPORT TO REDUCE DEMAND ON SPECIALIST

SPECIALIST

STRENGTHEN TARGETED SUPPORT MEET HIGHER NEED IN UNIVERSAL SERVICES

TARGETED

UNIVERSAL

LOWER NEED — 'AVERAGE' DISTRIBUTION — HIGH NEED

© M.T.Gascoigne, 2015
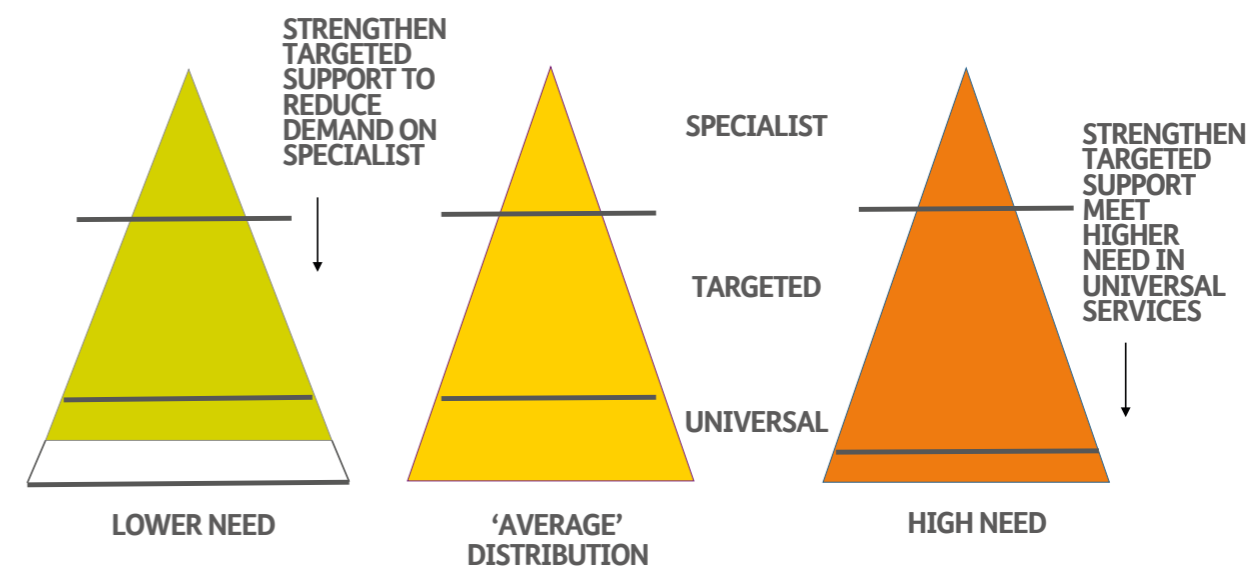
Ready for school, good progress at school

Early language is THE most important factor in influencing literacy levels at age 11

- SEND reforms focus on children & families, better classroom teaching and joint working/ commissioning across health and education
- Early Years curriculum, assessment and accountability frameworks make Communication & Language a prime area
- National Curriculum references spoken language
- Teacher training standards and core content refer to 'articulacy' and to SLCN
- New school structures promote innovation

- Implementation of SEND reforms against a background of austerity
- Lack of clear guidance on Clinical Commissioning Group accountability for SLCN
- Assessment of and accountability for Communication & Language limited to Early Years
- Speaking and listening is no longer discrete curriculum area with defined progression
- Initial teacher training lacks content on SLC
- Diversity of school structures challenges consistency of provision

'A common feature of the most successful schools in the survey was the attention they gave to developing speaking and listening'

REMOVING BARRIERS TO LITERACY, OFSTED, 2011

'Where inspectors saw links between oral language, reading and writing in lessons, standards at GCSE English Language were higher'

EXCELLENCE IN ENGLISH, OFSTED, 2011

'The prioritisation of speech, language and communication was the cornerstone of leaders' work with disadvantaged children, especially funded two-year-olds.'

TEACHING AND PLAY IN THE EARLY YEARS – A BALANCING ACT? OFSTED, 2015

Doing well at school is dependent on good spoken language skills. Ofsted have consistently noted the impact of work on language and communication in their national reports on high attainment and good learning.

How 'school ready' a child is at age four is strongly predicted by their vocabulary and ability to talk in short sentences at the age of two[52].

The most important predictor of reaching expected levels of English and maths at age seven is children's language skills at five. Similarly, early language emerges as the most important factor in influencing literacy levels at age eleven - more important than behaviour, peer relationships, emotional wellbeing, positive social interaction and attention[53].

At secondary level, vocabulary skills at 13 strongly predict GCSE results at 15 – in some subjects more strongly than socio-economic background[54].

Intervention to improve spoken language has been shown to make a difference to school readiness and school attainment. The Education Endowment Foundation found that pupils who participate in spoken language interventions make approximately five months' additional progress over a year[55].

One study, for example, found that nursery and Reception children who took part in an oral language intervention showed significantly better reading comprehension in Y1 than a control group[56]. In another, an intervention to boost oral language skills in ten year olds made more difference to reading comprehension than an intervention directly teaching reading comprehension skills[57].

In secondary pupils, a randomised controlled trial of a small-group speaking and listening intervention programme found a significant impact on reading comprehension[58]. And a three-year evaluation of ICAN's Secondary Talk whole school programme, which builds staff confidence in supporting language and communication in young people, found that students made more progress after schools had implemented the initiative, particularly in English[59].

There is also substantial evidence of impact on maths and science attainment of classroom programmes which involve pupils in discussing, arguing constructively and building on one another's ideas in small groups and as a class. Both CASE (Cognitive Acceleration in Science) and CAME (Cognitive Acceleration in Maths) as well as the 'Thinking Together' programme, have shown significant academic gains when compared to comparison groups not taking part[60,61].

The evidence described here demonstrates the benefit of a focus on spoken language skills as a key component of all learning and a key lever for raising attainment for all children and young people. The need to have excellent support for speech, language and communication skills in the educational system is even more crucial for children and young people with SLCN.

The SEND Code of Practice 0-25, arising from the Children and Families Act, 2014, recognises the importance of supporting SLCN as a specific area of SEN. The Code recognises need for joint commissioning across the health and local authority systems to ensure adequate support from a skilled wider workforce supported by specialists.

What can we do?

Working jointly across health and local authorities

Joint commissioning between health commissioners and Local Authorities is key to ensuring that support is in place for children with SLCN and other needs. To achieve 'school readiness' for children who might not otherwise get the necessary support, there needs to be a community based team of professionals working together. This means making sure that, as well as good early years provision, there are the right health professionals in place as part of locality teams including Health Visitors and Speech and Language Therapists. Public Health England have provided important guidance on this for local areas and supported recent work on cost benefit analysis of early language intervention[62].

Joint commissioning of provision to support children and young people through the school years is challenging but there are excellent examples across the country where a strategic approach is working. These include Buckinghamshire, Kent and Peterborough & Cambridgeshire who have carefully analysed the needs of their local population and developed joint specifications for speech and language therapy services and other specialist provision using the Balanced System® model[63]. As part of this work they can calculate what schools might need to commission in addition to the core provision.

Commissioning for those needing Alternative and Augmentative Communication (AAC) is another example of effective practice. There is a recognition that a multi-agency approach is required as well as links between national, regional and local services.

CASE STUDY

Joint commissioning to meet need

- Kent County Council (KCC) and 7 CCGs have worked together to conduct a needs assessment and develop an integrated specification for supporting children and young people with SLCN in Kent.

- KCC has led the process on behalf of the joint commissioners and the strategy is overseen by the Health and Wellbeing Board

- The joint inspection framework has been seen as a key driver for the process

- Multiple providers of speech and language therapy will work collaboratively to a single joint specification along with specialist teachers and resourced provisions for SLCN

- KCC has funded 60 schools (10%) to undertake an accreditation using the same model as the county wide specification so that a core body of schools are working to the same principles as the specialists commissioned through the joint specification

- The Balanced System® Scheme for Schools helps schools to identify their gaps in support for SLC and to decide how best to use any extra commissioning to improve outcomes for children and young people

CASE STUDY

'Augmentative and Alternative Communication' (AAC): an NHS commissioning success story

Some children and young people need hi-tech voice-output communication aids that enable them to 'speak'. Identifying the right type of aid requires specialised assessment. Those closest to these children and young people – at home and at school, at college or in the workplace – will also need training and support to get the best from the aid.

Historically, local disputes about whether education or health should fund the assessment, aids and support blocked provision for many children. This issue was resolved by the Department of Health's decision to include hi-tech AAC in the list of specialised health services which would be commissioned directly by NHS England at regional level in future. New funding was identified for eleven specialised centres across England.

The number of children and young people receiving communication aids and support has tripled since the new arrangements have been in place. Annually, around 700 children and young people are being assessed and supported, with training also provided to local AAC services. What has proved most helpful has been the imagination shown by NHS England in commissioning multi-agency teams that bridge health and education, and which work closely with local staff. The specialised services are held to account not just for the number of face to face contacts or aids provided, but also for the skills they are able to develop in the wider workforce.

Unfortunately, the good practice in these examples is not universal. A recent survey by the Royal College of Speech and Language Therapists suggests that less than half of areas are currently implementing joint commissioning[64]. In some areas, CCGs are interpreting the SEND Code of Practice 0-25 as a driver to refocus commissioning of speech and language therapy on just the most specialist provision or just pre-school children. For those at secondary age who need specific help with speech, language and communication the evidence suggests that only one in ten children with SLCN have access to a speech and language therapist[65]. There are significant risks to workforce development and delivery of targeted support in schools and settings which has become the accepted best practice over the past decade. To be effective, this relies on a strong local speech and language therapy service to provide schools with advice, training and specialist expertise as necessary.

These concerns are supported by a recent survey in which just one in ten head teachers believed that new joint working arrangements between schools and outside services are working well[66]. The Communication Trust conducted a survey of members and supporters which indicated

- ongoing challenges around joint working between health and education services locally
- increases in the threshold for EHC plans
- lack of practitioner skills in effectively supporting children and young people with SLCN
- a weakness in Local Offers in relation to support for children and young people without EHCPs and children under two, and very variable support for specific needs such as hearing impairment or stammering[67]

A recent report commissioned by the Secretary of State for Education raises concerns about the implementation of the SEND reforms against a background of austerity[68].

Despite these issues, the new joint Ofsted/CQC Inspection Framework[69] is a positive development which is providing a key reason for health organisations and local authorities to ensure they work together effectively.

The framework asks three key questions around identification, assessment and impact. Many of the reports emerging from the first inspections have mentioned access to speech and language and other therapy services specifically. What is clear is that the accountability and inspection levers need to be consistently applied to the complex systems supporting children and young people with SLCN.

Working jointly with schools

Another positive development is in schools' commissioning of speech and language therapy support. There is increasing awareness that this can help schools meet their responsibility under the SEND reforms to ensure high quality classroom teaching for children with SLCN. Alongside this there is a real focus on using evidence-based interventions, supported by The Communication Trust's 'What Works' initiative[70]. However, despite excellent examples the national picture remains variable.

CASE STUDY

In **Hackney**, there has been a 400% increase in the size of the speech and language therapy service in the years between 2003 and 2016 following a review and radical service redesign[71]. The redesigned service is valued because it is easy to access through drop-ins and in-school consultation, works in settings and schools rather than clinics, and is integrated with other services supporting schools. Crucially there is a transparent allocation of core resource to schools and settings and an enhanced offer for schools to commission. Approximately 40% of the service is now funded by school commissions and 98% of schools in Hackney commission enhanced services over and above the core funding from the Local Authority and CCG.

CASE STUDY

Three years ago, **The Leys Primary and Nursery School** in Hertfordshire became involved in Talk of the Town, a whole-school programme which involves a speech and language therapist in training and coaching school staff. For the first two years, an SLT from the local NHS service spent one day a week in school, funded by the project. Now, the school themselves pay for one day of support per fortnight.

Other schools in the area also pay for SLT time, but what is different at The Leys is the focus on training rather than direct work with children. It is this, the school feel, that has made the most difference, plus having an expert on hand to help staff put ideas from training into practice. The impact has been noticeable, with results on national literacy and maths assessments generally at or above national averages despite considerable levels of deprivation.

The Leys' advice for other schools thinking of commissioning SLT time is simple - they should focus on training, have in place a clear senior language lead in the school to support change, and build in systems to ensure sustainability. In the case of The Leys, this has meant building key elements of Talk of the Town training into induction programmes for new staff, refreshing ideas regularly, continuing to identify a senior leader as language lead, and employing a teaching assistant with specialist skills in speech and language.

Working on training and development

Workforce development is key to quality. Findings from The Communication Trust's workforce development survey highlight the need for both consistent initial training and ongoing continued professional The Communication Trust workforce development survey highlights the need for both consistent initial training and ongoing professional development around speech, language and development around speech, language and communication skills generally and SLCN specifically[72]. Figure 9, below shows this need clearly; the disparity in the current workforce development picture across the age range is particularly striking.

FIGURE 9: OVERVIEW OF SLCN CPD ACROSS THE SECTORS
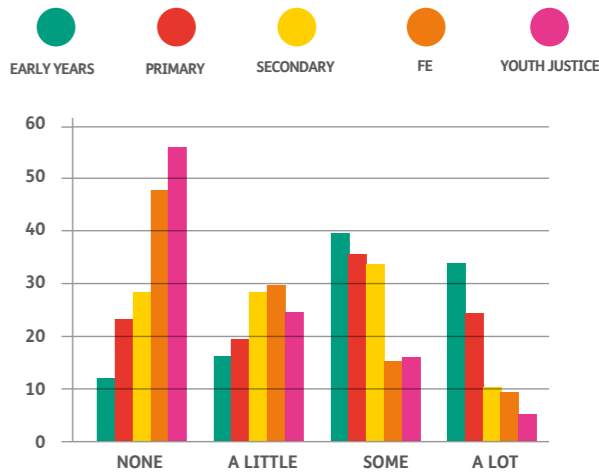
Respondents across the age range cited lack of budget, lack of relevant opportunities and lack of staff capacity as barriers to professional development. There is a clear mismatch here between take-up of professional development and the number of high-quality training programmes available nationally, many of them in the formats preferred by those surveyed – face to face day training, formal accredited training that leads to a qualification, and mentoring/coaching/observation opportunities with specialist colleagues.

Communication Champions

In Blackpool, every early years setting identifies at least one practitioner to take on the role of Communication Champion. They support colleagues in developing skills, ensure that their setting helps parents understand how best to help their child's language development, and ensure that children with SLC are identified early. The champions are trained by SLTs from a social enterprise commissioned by the local authority and meet regularly in cluster networks. Communication Champions can work towards a Level 3 or Level 4 accreditation of their own skills, and support their setting towards ICAN's Early Talk Accreditation.

The Champions model has been developing over a period of five years, and during this time Blackpool has succeeded in narrowing the gap between its Early Years Foundation Stage Profile results in communication and language and those of less disadvantaged areas, so that now results are almost at the national average.

A similar initiative is now operating in primary schools in Hammersmith and Fulham, where the Council have been working with the local NHS Trust to improve children's communication skills in 13 primary schools. Each of the schools taking part chose a member of staff to be Communication Leader and another to be a Communication Champion. This ensured that speech and language would be at the centre of the school's work and part of its school development plan. The Communication Champion received intensive training on a ten-week accredited course delivered by speech and language therapists, so that they can help children directly and train staff to do the same. The therapists followed up the training with a series of mentoring sessions at the schools, to help staff create an environment where all children can improve their communication skills.

Such programmes have been shown to have substantial impact. The evaluation of the DfE-funded Early Language Development Programme (ELDP) found that children made significant gains on standardised language measures where staff had received ELDP training within only a short time-period of approximately eight weeks[73].
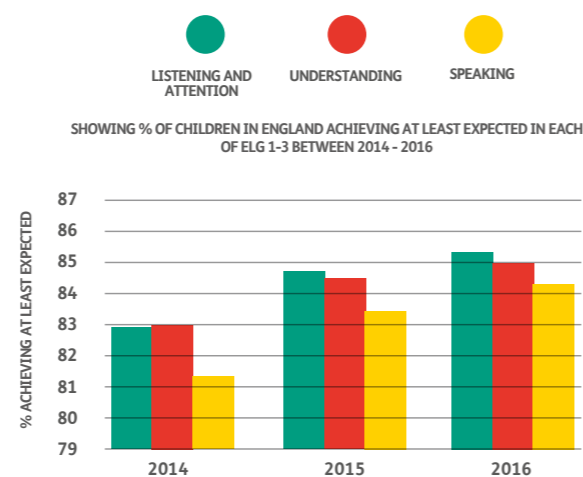
Particularly effective are forms of training where a member of staff in a setting or school acts as a resource and coach for others[74].

What are the outcomes?

Training and provision are only successful if they improve outcomes for children and young people. We have analysed the available data on some of these outcomes: first development in the early years, then attainment and progress at school. These are of course not the only measures of impact of national and local provision for children with SLCN but they do provide a tangible set of data at a population level. In many cases data on other important outcomes such as mental health, wellbeing and independence are simply not available.

In the **early years** (at the end of the Foundation Stage, when children are five) the proportion of all children achieving at least the expected standard in communication and language has risen over the last three years. However, this positive trend masks the evidence earlier in this report of much lower proportions of children reaching this level in disadvantaged areas.

FIGURE 10: EARLY YEARS FOUNDATION STAGE PROFILE 2014 - 2016

LISTENING AND ATTENTION | UNDERSTANDING | SPEAKING

SHOWING % OF CHILDREN IN ENGLAND ACHIEVING AT LEAST EXPECTED IN EACH OF ELG 1-3 BETWEEN 2014 - 2016
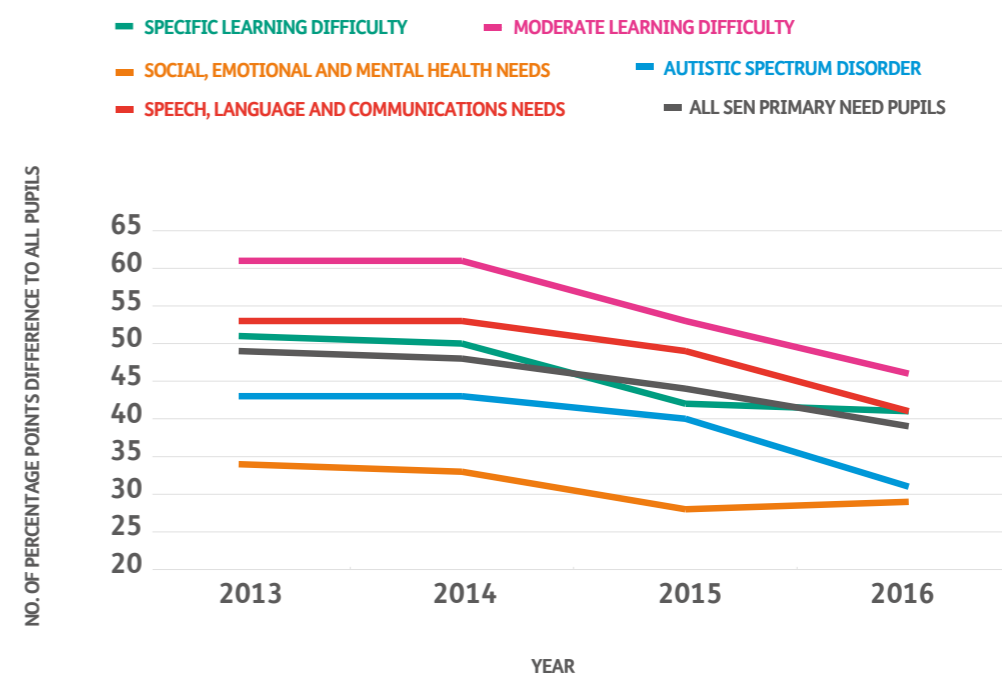
When we look at **primary school attainment** and specifically at children with identified SLCN in the SEND system, we see figures that give cause for concern. In 2016 just 12% of pupils with SLCN as their main need achieved at least the expected standard in Reading, Writing and Mathematics at the end of their primary school years, compared to 53% of all pupils, a gap of 41 points. The 2016 attainment gap between children with SLCN and all children is largest for Writing (49%) and smallest for Maths (38%). On a more positive note, the overall gap has narrowed over the four years between 2013 and 2016, and narrowed more noticeably for this group of children than for children with special needs in general.

FIGURE 11: KS2 DATA 2013 - 2016[1]

[1] from Table 9a called 'Levels of attainment at KS2 by pupil characteristic in SFR47/2015: National Curriculum assessments at KS2 2015 (final) and Table N8 called ' Attainment of pupils at the end of key stage 2 by pupil characteristics Year: 2016 (revised)

GAP BETWEEN ALL PUPILS AND THOSE WITH IDENTIFIED CHARACTERISTICS ACHIEVING LEVEL 4 OR ABOVE (REVISED TO THOSE REACHING THE EXPECTED STANDARD IN 2016) IN KS2 READING, WRITING AND MATHEMATICS EACH YEAR FROM 2013 TO 2016

SPECIFIC LEARNING DIFFICULTY | MODERATE LEARNING DIFFICULTY
SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS | AUTISTIC SPECTRUM DISORDER
SPEECH, LANGUAGE AND COMMUNICATIONS NEEDS | ALL SEN PRIMARY NEED PUPILS

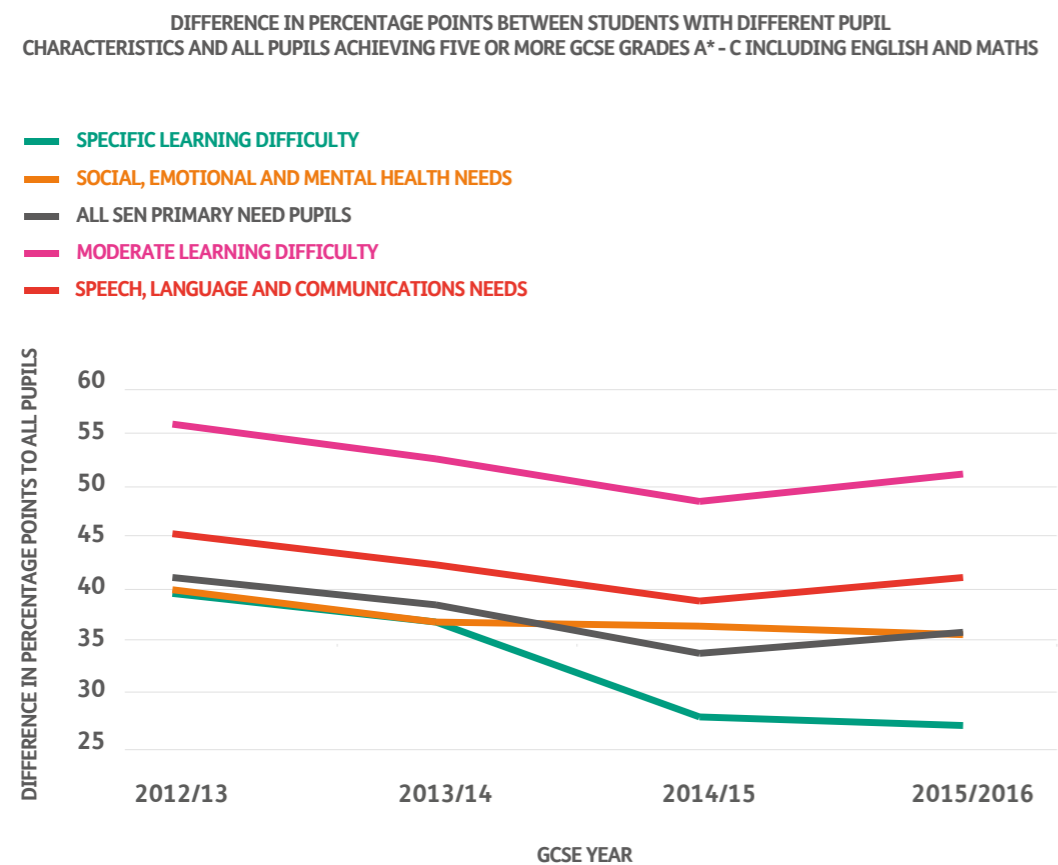NO. OF PERCENTAGE POINTS DIFFERENCE TO ALL PUPILS

YEAR

Primary school progress data, on the percentage of children making nationally expected progress between the ages of seven and 11, show that children with SLCN fare poorly. Both the 2015 and 2016 cohorts of 11 year olds started Key Stage 2 at a lower point than their peers without SEN in a combined measure of Reading, Writing and Maths. They then made less progress than these other children in the next four years, so falling further behind.

Reading presents a particular concern. The gap between the progress of those with SLCN in Reading and the progress of all pupils is larger than for children with SEN in general. In the 2015 cohort only children with autistic spectrum disorder and physical impairment made poorer progress.

In the 2016 cohort children with SLCN made poorer progress in Reading than children with all other types of SEN. This pattern is not mirrored in Writing or Maths. The poor progress may suggest that children with SLCN are not getting anywhere near the help they need with reading in Key Stage 2, that there are particular issues for them in accessing the reading test at 11, or both.

The chances of children with SLCN catching up with their peers academically do not increase as they get older. In **secondary school attainment** 19.8% of pupils with SLCN achieved five or more GCSE grades A*-C including English and mathematics in 2016, compared to 63% of all pupils, a gap of 43.2 points. The SLCN gap is larger than that for all pupils with SEN. It narrowed a little over the three years to 2015, but widened again in 2016 (see figure 12 below).

FIGURE 12: GCSE ANALYSIS 2013 – 2016[2]

[2] from Table CH1 from SFR03/2017 GCSE and equivalent entries and achievement of pupils at the end of KS4 by pupil characteristics found at https://www.gov.uk/government/statistics/revised-gcse-and-equivalent-results-in-england-2015-to-2016

DIFFERENCE IN PERCENTAGE POINTS BETWEEN STUDENTS WITH DIFFERENT PUPIL CHARACTERISTICS AND ALL PUPILS ACHIEVING FIVE OR MORE GCSE GRADES A* – C INCLUDING ENGLISH AND MATHS

- SPECIFIC LEARNING DIFFICULTY
- SOCIAL, EMOTIONAL AND MENTAL HEALTH NEEDS
- ALL SEN PRIMARY NEED PUPILS
- MODERATE LEARNING DIFFICULTY
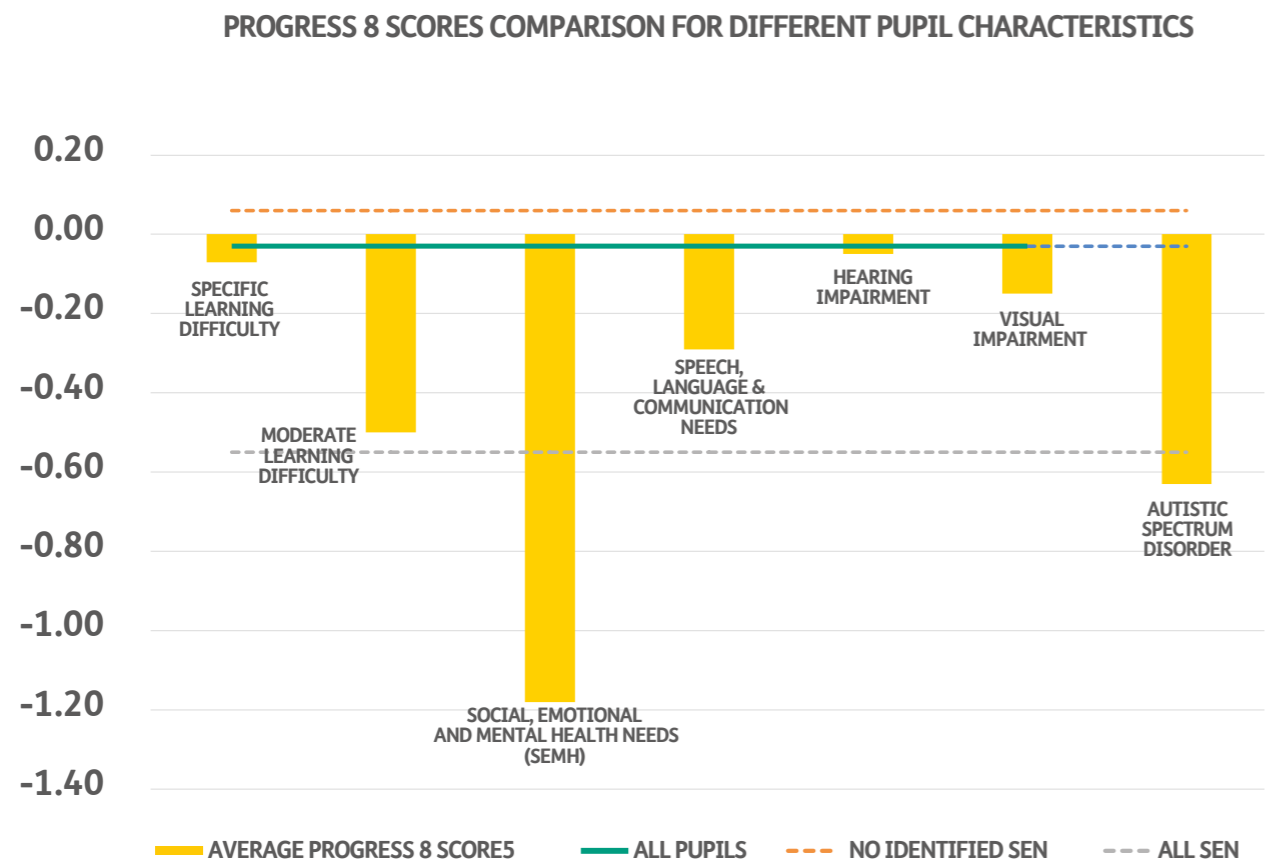- SPEECH, LANGUAGE AND COMMUNICATIONS NEEDS

In 2015, the percentage of secondary pupils with SLCN making the expected **progress** in English between the ages of 11 and 16 was slightly higher than the average for all pupils with SEN (although lower than that for pupils with sensory or physical impairment or specific learning difficulties). Maths was more of an issue for pupils with SLCN; the percentage making the expected progress was a little lower than the average for pupils with SEN as a whole (see figure 13 below).

FIGURE 13: COMPARISON OF EXPECTED PROGRESS IN ENGLISH AND MATHEMATICS BY PUPIL CHARACTERISTIC[3]

[3] Graph Reference: from Table CH1from SFR01/2016 GCSE and equivalent entries and achievement of pupils at the end of KS4 by pupil characteristics 'found at https://www.gov.uk/government/statistics/revised-gcse-and-equivalent-results-in-england-2014-to-2015

COMPARISON OF EXPECTED PROGRESS FOR SECONDARY CHILDREN IN ENGLISH AND MATHEMATICS BY PUPIL CHARACTERISTICS

- PROGRESS IN ENGLISH
- PROGRESS IN MATHEMATICS
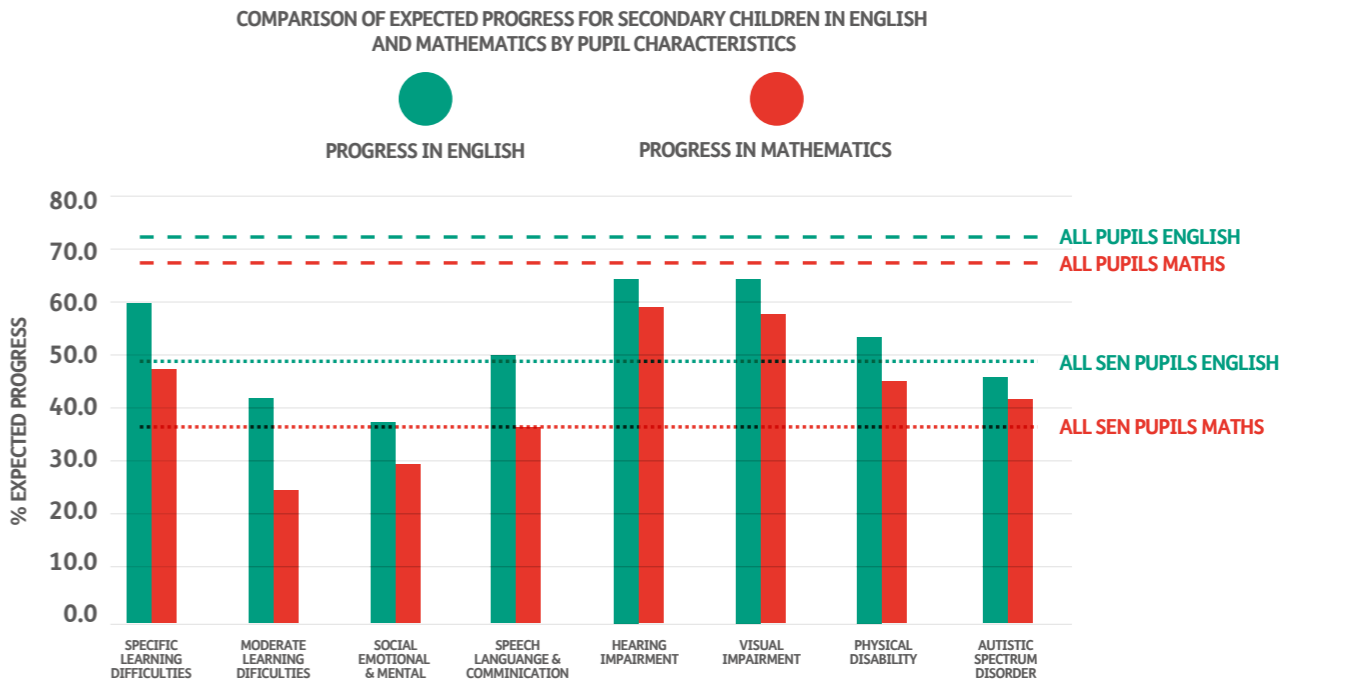
In 2016, using the new 'Progress 8' measure which looks at progress across a range of school subjects during the secondary school years, pupils with SLCN are again doing somewhat better than the average for all pupils with SEN. They do less well, however, than pupils with sensory impairments or specific learning difficulties and very much less well than pupils with no special educational needs. As the graph below shows, pupils with social, emotional and mental health needs make particularly poor progress between the ages of 11 and 16. In the light of evidence presented elsewhere in this report, it may well be that some of these pupils, and many of those with moderate learning difficulties, have 'hidden' SLCN.

FIGURE 14: PROGRESS 8 SCORES FOR DIFFERENT PUPIL CHARACTERISTICS

PROGRESS 8 SCORES COMPARISON FOR DIFFERENT PUPIL CHARACTERISTICS

What needs to happen?

In order to ensure a more consistent improvement in school readiness, attainment and progress in school

- Government should include mandatory input on developing all children and young people's speech, language and communication skills in initial teacher training requirements

- Government should ask Ofsted to re-instate the teaching of communication skills in its framework for inspection

- In its continued evaluation of the implementation of the SEND reforms, government should monitor the extent to which local offers include a clear description of the provision schools should make for SLCN from their delegated budgets

- Government should reinforce the expectation on Clinical Commissioning Groups to jointly commission provision for children and young people with SLCN across the age range

- Local Area inspections should specifically seek evidence of effective joint commissioning arrangements for therapy services including speech and language therapy

- Schools should use the opportunities for collaboration presented by new structures (such as multi-academy trusts) to develop consistent work on SLC across groups of schools and across the age range, and to commission enhanced services to meet their children's needs at universal and targeted levels.

Beyond school:
further education and employment

88% of employers rank spoken communication as the top entry level skill they need in the workforce, but only 27% of teachers see it as contributing a great deal to pupils' employability[75,76].

- Ofsted inspection framework for further education and skills makes some reference to communication skills
- SEND reforms emphasise transition to adulthood

- SLC is not built into functional skills qualification & communication skills not a focus in FE
- Lack of funding for post-school provision
- SLTs rarely commissioned for 18-25 year olds
- Lack of clarity regarding best commissioning options OR most suitable provision

Children who have poor vocabulary in their early years have lower qualifications and **LESS CHANCE OF BEING IN EMPLOYMENT AT AGE 34[77].** A study of unemployed young men found that 88% of the sample had some level of language difficulty[78].

A 2015 British Chambers of Commerce Business and Education Survey found that communication was the top entry-level skill required by employers[79]. **GOOD COMMUNICATION SKILLS WERE RATED AS THE MOST VALUED (88%)** compared with literacy (69%), numeracy (64%), computer skills (56%) and teamwork (53%).

The 2016 CBI/Pearson Education and Skills survey found that around **HALF OF BUSINESSES WERE NOT SATISFIED WITH SCHOOL LEAVERS' SKILLS IN COMMUNICATION.** Even for graduates, 23% of employers reported dissatisfaction with communication skills, compared to 14% for literacy and 9% for numeracy[80]

'Businesses see it as a priority for schools to help pupils develop the effective communication skills that are so essential in personal and working life.'

2016, CBI/PEARSON

Teachers, and young people themselves, are not always aware of what employers need. Recent polling found that only just over a quarter of teachers see spoken language skills as contributing 'a great deal' to pupils' employability. In another survey, only one in five of 18-24 year olds saw lack of communication skills as a barrier to employment[81].

A recent small-scale survey by I CAN of 40 employers identified specific communication skills that were valued – including employees being able to check when confused, and alter their style of talking for different audiences. Over two thirds of employers surveyed reported not getting these skills in their recruits[82].

FIGURE 15: SKILLS FOR WORK, SKILLS FOR LIFE, ICAN TALK 8

SOFT SKILLS EMPLOYERS WANT	UNDERPINNED BY EFFECTIVE COMMUNICATION SKILLS WHICH HELP YOU TO...
Being a team player	Listen effectively to the views of others; express opinions; initiate and maintain relationships
Accepting responsibility	Give and receive criticism constructively; reflect on how you will approach a task
Resolving conflict	Change the style of how you talk so that you diffuse rather than inflame a situation
Influencing	Use persuasive language; for example if you want someone to buy what you're selling or change their behaviour
Working independently	Recognise when you don't understand and ask for clarification
Creativity	Explain a new idea to a manager or colleague

All this adds up to a strong case for prioritising support for communication skills in post-school education and training, and for good support for learners with SLCN as they make the transition from school to adult life and work.

Working with commissioners

Commissioning of provision for the 19-25 age range with SEND and for support in Further Education is particularly challenging. There is a funding issue in that commissioners are not able to identify additional resource to meet their new responsibilities resulting from the SEND reforms. In local authorities SEND budgets are under pressure and in Clinical Commissioning Groups these young adults often represent new demand as their needs are not currently being met. Perhaps more concerning is the lack of a clear way forward in terms of the support that is needed. Expertise with this group does not sit readily in either an extension of children and young people's services or in adult services. Meanwhile there are increasing numbers of young adults becoming eligible for provision that is lacking.

The Royal College of Speech and Language Therapists survey of members about the implementation of the SEND reforms reported significant issues with the commissioning of provision for the extended age range, with 43% reporting no commissioned service at all. The RCSLT report makes a number of recommendations in this respect, including the need to provide clarity regarding which local agencies are responsible for the commissioning of provision for the 19-25 year range and calling for the Ofsted and CQC joint area inspections to specifically consider this issue[83].

Working with further education (FE)

Evidence suggests that support for speech, language and communication in FE colleges is limited. Teachers in FE are more likely than colleagues in primary and secondary schools to say that supporting spoken language through general strategies such as scaffolding, modelling, setting expectations, and giving feedback on what pupils say is 'not applicable' to them. Training in SLC is rare for FE staff, with over three quarters of staff reporting that they have had little or no post-qualification training for SLC and two thirds little or none for SLCN[84].

These factors considered alongside the lack of specialist support available in local areas to train and advise on enhancements to the learning environment, and support individual students, means that the opportunities for a young person with SLCN in FE to meet their potential and prepare for employment are limited.

Nevertheless, there are examples of individual FE colleges that are being pro-active in developing provision for language and communication in general, and for students with SLCN in particular as illustrated in the case study on page 48.

Working with Youth Offending

The high prevalence of SLCN amongst young offenders first identified ten years ago has led to a gradual recognition of the importance and value of ensuring that speech, language and communication skills are both identified and supported through the work of youth offending teams and in secure provisions. Resources have been developed by The Communication Trust[85] and the RCSLT[86] to help those working within Youth Offending teams to better understand and identify those young people with SLCN.

However, despite examples of excellent practice to identify and support young people with SLCN within the Youth Justice system, illustrated in the case study on page 49 and work elsewhere in the country such as Leeds and North Yorkshire, there is no evidence of a systematic approach to the commissioning and provision of SLCN support within this sector.

FE staff are more likely to report that 'My setting has not provided or arranged any training for me on oracy in the last 3 years' than staff in other phases of education.

MILLARD & MENZIES, 2016

Case study: Kent
Support for SLCN embedded in College of Further Education

The multi-campus college directly employs a speech and language therapist to work as part of the wider staff team. The SLT works across the whole system developing infrastructure and providing training as well as supporting young people.

Young person support:

- Tutors complete a screen of skills
- Young people often have to present their own needs and seek support which can be challenging for pupils with unidentified SLCN
- Young people with identified SLCN on EHC plan can contact SLT and seek support and strategies with learning

Environment:

- Courses are often practical and have a very functional learning environment
- Increasing amount of visual support including smart boards/lap tops
- Audio recording for student to recap
- Moodle – online learning platform to support tutor led learning
- Observe communication environment and make enhancement recommendations

Workforce:

- Completing a training matrix of skills and needs
- Have provided a range of twilight session on SLCN strategies however uptake has been variable as staff work a range of times and may not be aware of the need for SLCN strategies

Identification:

- Tutors complete initial screen for all Young people and refer to SLT if required
- SLT completes functional or formal assessment according to previous info and need

Intervention:

- 1:1 and group interventions such as communication skills groups co-delivered with learning support staff as part of skills development
- In class support work to observe, identify strategies and feedback to staff about what works well
- Jointly run tutor sessions
- Joint planning and development of visual resources to support social skills/social language for example using social stories and 5 point scales.

Things that would make most difference in relation to SLCN

- Better provision in secondary schools ensuring better transition
- Joining up specialist provision with FE so that there is more effective communication and pathways for the young people
- Understanding of the need for universal level provision including having a strategic view of the young people's needs and journey through FE from start to finish

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Hackney Youth Offending Team (YOT)
SLTs work as part of YOT based in same office and provide support to various teams within YOT, including prevention and diversion team, court team, gangs unit Effective elements of support include.

- Collaborative approach working across universal, targeted and specialist provision so that YOT staff talk about impact of SLT support on communication with young person. This also results in young person seeing SLT as part of the package of support rather than as an add-on
- The recognition for SLT as part of the YOT resulting in amount of time commissioned. This enables direct work with YP as well as time to follow up with key staff across young poeple and educational settings
- Being part of the wider SLT service so that there is excellent transfer of information between YOT and education SLTs to ensure young people have continued support across services.

Young person support:

- Case workers complete a screen
- Young people can identify their own communication needs and receive support for a range of skills including preparing for YOT sessions

Environment:

- Dictionaries with key vocabulary for interviews to help staff and young people understand what has been said
- Tools and strategies for checking understanding during a YOT sessions/conversation
- Visuals to support approaches for example restorative justice pathway

Workforce:

- Rolling program of training including identifying and supporting SLCN available to YOT staff and wider children and young people service
- Autism in young people in YOT training
- Restorative justice approach supported using visuals (comic strip conversations)
- Individual case-led support for staff

Identification:

- Caseworker completes initial screen and refers to SLT if required
- SLT completes assessment and feeds back to key people in YOT and education setting where relevant. SLT shares SLCN and makes recommendations for wider workforce to support young people's communication skills in context
- Young people can identify their own communication skills and needs

Intervention:

- Communication strategies to support young people in interview situations
- Communication strategies based upon young people's self-assessment
- Restorative justice approach using comic strip conversations
- Weapons awareness programme using SLCN -friendly principles
- Strategies used by caseworkers according to young people's SLCN
- Written strategies/programs to promote wider use of communication support strategies
- Individualised interventions provided by SLT where required

Working with employers

We began this section with the reality that good communication skills are vital for employment. For the majority of young people with speech, language and communication needs, good support starting from the early years and continuing through school and further education will allow them to develop these skills and enter the workforce. Employers are being encouraged to facilitate access to the workplace through apprenticeship schemes and the requirement to make reasonable adaptations for people with disabilities. Young people with SLCN as part of an SEND are able to apply for Access to Work funding to use for adaptations or support that is needed to make a workplace viable for them. And yet even for graduates with communication difficulties, only 30% were found to be in full time employment six months after graduation compared with 58% of non-disabled graduates[87,88].

What needs to happen

In order to improve employability and support for students with SLCN

- Government should ensure that curriculum and accountability frameworks focus on oracy in secondary schools and FE to ensure functional skills preparation for employment

- Government should fund a programme to develop universal resources focused on the 16+ context

- Local areas should specifically and jointly commissioning for the 19-25 age range for those with SEND including SLCN

- Speech and language therapy services should actively take up opportunities to provide enhanced services to settings, schools and FE colleges, Youth Offending Teams and to support those with SLCN using Access to Work funding to enter the workplace

Conclusion:

This report talks about a generation of children and young people who are growing up in a world where good speech, language and communication skills are increasingly vital for life. We have reviewed the policy landscape that affects them and identified key enabling or hindering factors. We have analysed and presented data showing where there has been significant progress and improvement, sometimes against expectation. Yet there continue to be significant numbers of children and young people with SLCN whose needs are not identified in time, who do not have access to the support they need, and whose future life chances are consequently placed at risk.

These young people need prompt, concerted action from national and local government, and from schools, colleges and employers, if they are to have the opportunities they deserve. This report has made recommendations for such action. The case for change is clear - we cannot afford to let down another generation.

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