

‘Now you’re Talking Fermanagh’

Early intervention speech and language project for Bump-3’s

Annabelle Ferguson - Lead Speech and Language Therapist

Annabelle Ferguson – Speech and Language Therapist, February 2016



Executive Summary:

The importance of speech, language and communication (SLC) skill development in the earliest years is well evidenced throughout the research. This unmet SLC need is having a huge impact on our children's educational attainment, mental health, leading into crime levels and employability levels, with 88% of unemployed men having a SLC need, all of which are costly to society. (Gross, 2011)

Since 2000, the development of Sure Start initiatives across the UK has often included speech and language support for the 0-3 population. While this has been an extremely positive development, there is a growing appetite for this type of communication support in communities not currently in a Sure start catchment area.

The project described by this report, called 'Now You're Talking Fermanagh' (NYTF), was a pilot which targeted three non-Surestart areas in Fermanagh: Lisnaskea, Erne and Portora wards in Enniskillen.

Target population:

- Parents and children under 3 years in non Surestart areas of Fermanagh and the Early years practitioners working with this young population.

Rationale:

The Western Area Outcomes Group approved funding to the NYTF project to be innovative and creative around ways of developing services for early language and communication intervention in areas of social deprivation. The ward areas selected were Lisnaskea, Erne and Portora wards in Enniskillen as they have ranked highest on scores for social deprivation in Fermanagh with limited or no early intervention projects, specifically, Sure start.

After a successful tender bid, the ARC Healthy Living centre was appointed as partner organisation. This involved provision of a support worker and the base from which the NYTF Project was located.

A steering group was established with representatives from Health visiting, Midwifery, Western outcomes group, ARC healthy living centre and Speech and Language Therapy. The steering group was committed to ensuring that the Infant Mental Health Strategy was developed and implemented using a partnership approach between a range of disciplines, key agencies and throughout the voluntary and community sectors.



Key Aims of the model:

The NYTF pilot set about tackling the high incidence of SLCN in our ward areas by targeting the younger 0-3 age group. The primary aims for the project were:

1. To establish the level of communication need in the bump-3 population in the three ward areas.
2. To promote the importance of SLC development in the bump-to-three period of a child's growth through engaging with parents and early years practitioners in the community.
3. To develop the capacity of those working with 0-3 population to best support SLC development by providing 'Consistent Key Communication Messages'.
4. To provide easy access to specialist SLC knowledge within the community at the pre-referral/signposting stage.

Main Findings:

- a) Baseline screening found 54% of children, from our project areas, presented with mild to significant language difficulties on starting preschool. This is in keeping with the national average of 55% in areas of deprivation (RCSLT, 2011).
- b) Practitioner questionnaires found 64% of those working with 0-3's had received no specific speech, language and communication training.
- c) Focus groups and individual interviews with service users and key stakeholders identified gaps in existing services provided locally. These findings informed the design of intervention services offered by the project. For example, parents highlighted the need for a consultation service with an SLT at the pre referral stage for early identification of SLC needs, advice and early intervention. This resulted in the 'Talk Link' service being developed.
- d) Parent questionnaires identified significant gaps in parental awareness and knowledge of 'Key Communication Messages'. For example, only 54% of parents felt it was important to introduce sharing books and songs and rhymes with babies from birth. This type of information was used when developing parent training workshops.

Main Outcomes and conclusions:

There has been key learning from the project even at this early stage. NYTF is highly transferable to other areas and communities as the model used here can be easily replicated in other areas where there are limited early intervention services. Also, this

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project demonstrates how partners across a range of disciplines throughout the statutory, voluntary and community sectors can work effectively and collaboratively towards a shared Infant mental health vision. It recognises that to deliver on a holistic model of support for support of infant mental health involves an awareness of the range of services and disciplines that each have a vital role to play in delivering on this agenda.

- It is hoped that this pilot identified an increased awareness and enthusiasm for early intervention speech and language services for families in areas where there is no intervention of this specific type.
- Insight and knowledge gained from engaging closely with parents and key stakeholders within our project communities was used to design and develop project initiatives. A range of programmes/services for families were designed to support communication development at critical stages of language growth.
- The need for speech, language and communication services in these areas are well evidenced from the projects performance indicators. For example, the number of community organisations who became involved with our project and the number of parents who attended our programmes in the short time we were operating.
- A quality assured training framework has been delivered to service providers working with 0-3's using both formal and informal training packages therefore providing a legacy of up skilled practitioners in the workforce.
- Due to the outstanding success and contribution of the NYTF project to improving services and empowering communities, the NYTF project was a finalist at the Advancing Healthcare awards 2016 for Allied Health professionals.

This document is a brief executive summary of the background, main aims, findings and outcomes of the 'Now you're Talking Fermanagh' project. Following is a full and detailed report providing in depth insight into the project in terms of the processes used, the data collected and subsequent findings.



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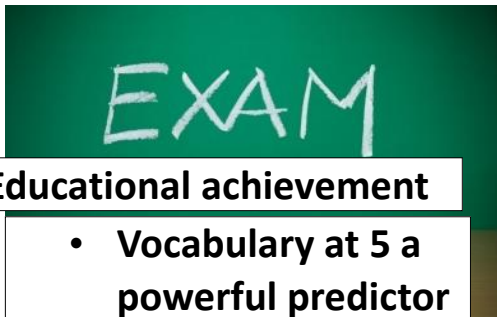
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Introduction and project rationale:

The ‘Now You’re Talking’ regional conference held in October 2013 highlighted the fact that early communication skills are clearly important in themselves but also because they are linked to later performance. In other words, declining communication skills of the preschool population is having a long term impact on all areas of development. As a developmental thread running through children’s earliest years, 0-3 years is a key time for language promotion and early intervention.

Jean Gross, Communication Champion (2011) outlines some of the evidence base around the long term impact of an unmet speech, language and communication need:



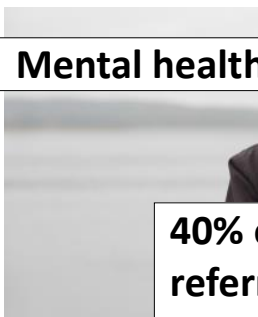
Educational achievement

- **Vocabulary at 5 a powerful predictor of GCSE achievement**



Behaviour/vulnerability

2/3 of 7-14 year olds with serious behaviour problems have language impairment



Mental health

40% of referrals to mental health services have had language impairment



Employability

47% of employers say they can't get recruits with the communication skills they need



Criminality

65% of young people in young offender institutions have communication difficulties



Disadvantage

Children from low income families are sixteen months behind at school

In response to this evidence, the Western Area Outcomes Group decided to fund a pilot project to further explore language and communication development at a local level.



Budget:

Project Speech and Language Therapist Band 7 (0.5 wte)	£25,000
Project Support Worker (0.5 wte)	£16,000
Resource costs	£9,000
Management costs	In kind
Total cost	£50,000 per year

The NYTF Pilot project was funded initially for 12 months and extended for a further 6 months by the Western Outcomes Group. The funding was granted for a band 7 Speech and Language Therapist (0.5 wte) and a Support worker (0.5 wte). Tender for the SLSW role was won by the ARC Healthy Living Centre, Irvinestown, and the SLT and SLSW were appointed and took up post on 1/9/14.

The ward areas selected for the project to target were Lisnaskea and the Erne and Portora wards of Enniskillen as they ranked highest on scores for social deprivation sitting outside a Surestart catchment area in the 2011 census.

A steering group was established with representatives from Health visiting, Midwifery, Western outcomes group, ARC healthy living centre and Speech and Language Therapy.

Now You're Talking Fermanagh is leading the way at investigating how we meet the needs of children in a catchment area where there are limited or no universal early intervention services for speech and language development. National figures released by RCSLT in 2011 indicated that up to 55% of children in deprived areas enter preschool having a speech, language and communication need (SLCN).



Project Description:

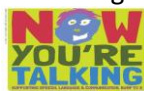
Phase 1: Gathering the baseline

Time frame: September 14 – January 15

The steering group were keen that service users and key stakeholders influenced the design and key aims of the project. Baseline information was gathered in the local area.

- Scoping – Establishing existing services already available for the target population in our areas.
- Networking - Developing key links within the community, voluntary and statutory sectors in our areas.
- Screening – a sample of 107 Preschool children were screened from our 3 ward areas to gain insight into language levels of children at preschool entry where there has been little or no access to early intervention and prevention speech and language services.
- 79 parent questionnaires were completed across the three ward areas to gain insight into parental knowledge base and awareness of language and communication development.
- 50 practitioner questionnaires were completed with a range of people from all sectors working with children aged 0-3 in our ward areas including:
 1. Day care practitioners
 2. Parent and Toddler Providers
 3. Playgroup and Nursery leaders and assistants
 4. Action for children practitioners
 5. Home start volunteers.

Insight and knowledge gained from phase 1 questionnaires and focus groups was used to shape the services delivered by the project. Programmes were devised for different stages within the 0-3 time frame. These programmes all had a clear focus on language and communication development as well as the aim of building the capacity of parents at crucial stages.



Results and Findings:

WellComm: A Speech and Language Toolkit for the Early Years

Baseline screening of 107 children from our 3 ward areas was completed using the WellComm Toolkit. When children complete the WellComm screen they are assigned a code; red, amber or green. The WellComm codes refer to:

Red - Language skills are significantly delayed

Amber – Language skills are mildly delayed

Green – Language skills are age appropriate

The WellComm toolkit does not provide a full assessment of a child's communication ability but a general idea of how their language is developing as would be expected for their age.

Methodology:

- Preschools were selected for the baseline screening on the criteria that they were physically located in our project areas.
- Blind screening - All children in each preschool was screened and then children from our wards were identified using their home address.

Venue	Total number of children	Number from project areas	No of SEN From area	No of EAL from area	No with Speech sound Disorder	No of A/R	% of Red/Amber from project areas
Montessori	30	12	2	1	1	3	37.5%
Little Castle	19	18	0	1	1	8	50%
St Ronans Am	23	23	0	0	0	14	61%
St Ronan's Pm	24	22	1	1	1	12	63%
Enniskillen Nursery Am1	26	9	0	0	1	4	50%
Am2	26	12	0	3	1	4	50%
Pm	25	11	0	7	1	2	67%
							Average: 54%

*SEN – Children with Special Educational Needs

*EAL – Children who have English as an additional Language

Children who had SEN or EAL were **not** screened.

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- 54% of the 107 sample from our project ward areas presented with code of amber or red ranging from language skills which were mildly delayed to language skills which were significantly delayed.
- 6 children had a significant unidentified speech sound difficulty and were sign posted to WHSCT SLT immediately.
- Out of 107 screened, there were 20 immediate onward referrals recommended for WHSCT SLT intervention due to a language delay.

Parent Questionnaire Findings at Phase 1:

A parent questionnaire was designed and completed with parents from our project areas.

Sample size – 79

Aim: To ascertain parental knowledge and awareness of language and communication development and how to nurture this in our young children.

A breakdown of all questions and results can be found in **appendix 1**. Below is a summary of the general findings and recurring themes identified:

- 41% of parents who participated reported they were either 'not confident' or 'a little confident' with their knowledge of the ages and stages of speech and language development. E.g. when babies say their first words
- Only 44% of parents felt it was important to share songs/rhymes and books/stories with babies from birth. This means a staggering 56% of parents felt that these fundamental activities should be introduced after 3 months and a 27% felt these should be introduced at 6 months or above.
- A huge 72% of parents had no awareness of the link between dummy sucking and glue ear and then the impact this can have of speech and language development.
- 38% did not know recognise the negative impact that too much screen time can have on speech and language development in the early years.



Themes from further comments made by parents included:

- Some parents recognised the importance of early introduction of rhymes and books reporting their positive impact on attention, listening and vocabulary development.
- 'My child prefers the I-Pad...its more interactive and fun'
- Frustrated at the significant lack of opportunities in their area for their young children.
- Parents with children who have English as an additional language highlighted the need for more information on development from birth.
- Parents unsure of what kinds of activities to be doing with their young child at this early stage.

Practitioner Questionnaire results at Phase 1:

A questionnaire was devised to be completed by practitioners who work with children from birth to 3.

Sample size: 50 (including Day care and child minding providers, Nursery/Playgroup leaders and assistants, home start volunteers and child development practitioners such as parent and toddler providers)

Aims:

1. To ascertain practitioner knowledge and awareness of language and communication development and how to nurture this in our young children.
2. To establish levels of training needs within the ward areas.

A full breakdown of all questions and results can be found in **appendix 2**. Below is a summary of the general findings and recurring themes identified:

- 52% of practitioners felt 'reasonably confident' with their knowledge of speech, language and communication. A further 36% rated themselves as 'not confident' or 'a little confident'.
- 64% of practitioners had received no formal training in the area of speech, language and communication development.
- Only 48% of practitioners felt 'confident' or 'extremely confident' at identifying children with speech, language and communication needs.
- Only 48% of practitioners reported feeling 'confident' that they could provide appropriate support to a child with communication difficulties in their setting.

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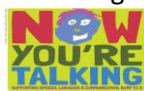
Themes of further comments made by practitioners:

- Majority of practitioners reported that they felt the numbers of children presenting with communication difficulties in their setting have increased.
- Practitioners report the over use of screen time and technology and poor parent child interactions as the two main reasons for this increase in communication difficulties.

Focus Groups and Face to face interviews at Phase 1:

Main themes:

- Health visitors commented on the long waiting times for an initial appointment for community WHSCT SLT and the gaps in treatment for children who have been seen.
- A majority of practitioners referred to a lack of provision for children less than 2 years who are not meeting their communication milestones.
- Parents report the lack of opportunities in their areas for young children aged between 0-3.
- Parents reported that it would be really beneficial to have the opportunity to make pre-referral contact with a speech and language therapist to identify if there is a need for onward referral to core SLT. They also felt that advice and strategies to support language and communication development while they waiting for an initial appointment would be beneficial.



Phase 2: Providing programmes and training

Following the completion of phase 1, the information gathered was used to design and develop project initiatives. A range of programmes were designed to support communication development at critical stages of language growth.

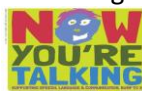
Programmes offered included:

- **Tickle Tummy Time** – 4 week programme for parent/carers and their babies from 5–10 months (pre-crawlers) to have fun singing and playing together. Tickle Tummy Time sessions last 45 minutes and support parents/carers to develop early communication skills with their babies and provide opportunities to share and socialise.
- **Rhyme and Chime** - 4 week programme for parents/carers and their children aged 0-3 years. These topical music and rhyme sessions last 45 minutes each and aim to promote rhythm, rhyme and communication skills in our young children.
- **Chatterbabes** – 4 week programme for parents /carers and children aged between 18-30 months. Children are referred to Chatterbabes following Talk link and groups are matched according to level and type of SLC need. Through language activities and play, these 45 minute small group sessions give parents/carers strategies to help develop early language and communication skills.
- **Talk Link** – one to one consultation in the home with SLT and parent/carer with their child to informally assess speech and language development and provide advice and recommend appropriate NYTF programmes. Onward signposting to other services is also offered through talk link.

The delivery of all programmes included the promotion of consistent early communication messages which were adapted to the appropriate age and stage of the child.

Training Offered:

- **Elklan** – accredited Speech and Language course involving 14 teaching hours over 7 weeks aimed at parents and early year's practitioners, such as, Day care workers, child minders and volunteers.
- **Parent workshops** –45 minute parent information sessions providing key communication messages and advice on language and communication development delivered by SLT in local playgroups and nurseries.



- **Bespoke training** - workshops aimed at up skilling early years practitioners e.g. advice on bilingualism, speech and language developmental norms and the link between play and language development in the early years.

A leaflet was devised and piloted with a group of service users to ensure its accessibility and used to promote our services in the community.

An expression of interest form was generated for parents and/or practitioners to complete in order to be contacted regarding NYTF programmes. To date, the majority of our referrals have come from health visitors and parents self referring.

Outcomes/Performance Indicators:

The following measurements demonstrate the achievement of the project aims in terms of making links with existing organisations in project wards, the uptake of families attending NYTF programmes and the number of parents and practitioners completing either formal or informal training.

Time Frame: January 2015-January 2016

- Number of organisations involved with the NYTF project: (for list see **appendix 3**)

Community:	17
Private Day cares:	4
Education:	4
Health:	3

- Uptake of Programmes:

Number of contacts made through individual programmes

Programme	Enniskillen Wards	Lisnaskea Ward	Total number of contacts made
Rhyme and Chime	1,558	616	2,174
Tickle Tummy Time	98	112	210
Chatterbabes	0	22	22



- Uptake of Formal Speech and Language Training:

Elklan Let's Talk with under 5s accredited course was delivered on two occasions due to high demand. An evening course was held to accommodate practitioners working during the day.

1st course ran from 26th May – 7th July 2015 (AM course)

2nd course ran from 12th October – 30th November 2015 (Evening Course)

Childminders	Day Care Staff	Home Start Volunteers	Action for Children	Sure Start	Total	Accreditations
6	12	4	1	2	25	21

- Uptake of Informal/bespoke Language and Communication Training:

20 Action for children practitioners attended a 1 day Language and Communication workshop.

- Parent Training:

Number of parents who attended parent language and communication workshops:

Enniskillen wards	Lisnaskea Ward	Total
86 parents	28 parents	114 parents

- Home Visits and Talk Links

Number of people parents/carers who received one to one consultation with SLT for specific advice:

Number of Talk Link referrals	Talk Link Home Visit	Talk Link at venue project team are visiting
51	33	15

Post project parent questionnaires:

Following the completion of funding for the project, the steering group felt it would be important to try to capture if parental knowledge and awareness of early communication milestones and messages had occurred. The same parent questionnaire from phase 1 was used with a sample of 30 parents from our 3 ward areas to examine if any change had occurred. For further break down of questions and findings see **Appendix 4**.

Some interesting findings:

	Pre Project Questionnaire Nov 14	Post Project Questionnaire Feb 15
Knowledge of ages and stages of speech and language development	Reasonably to extremely confident – 59%	Reasonably to extremely confident – 87%
Knowledge of risks of long term dummy sucking	Reasonably to extremely confident – 62%	Reasonably to extremely confident – 97%
Parental awareness of introducing rhymes and books to children from birth	44% said from birth	77% said from birth
Parental knowledge of impact of too much screen time on S&L development	62% aware of impact	87% aware of impact

It is evident that in all questions, there has been an increase in knowledge, awareness and empowerment of parents. Parents are now reporting increased confidence levels and are demonstrating increased knowledge in areas such as introducing songs/rhymes and books with babies from birth.

Conclusions and Recommendations:

There have been positive outcomes for children, parents, community staff/ volunteers and Early Years practitioners.

There has also been key learning from the project at this early stage; for example, NYTF is highly transferrable to other settings as the model used can be easily replicated in other areas where there are limited early intervention services. The key ingredients are those of a clinical SLT lead and support worker ideally from the locality with a working knowledge of the area. This project is very people orientated and is based on engaging with communities at a local level and meeting the perceived needs of that community by offering additional services following baseline assessment. The project is very cost effective considering the

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prevention of inappropriate referrals to core SLT services and the training providing long term sustainability post project. Most notably parental involvement increased as a result of this community based approach which resulted in the breaking down of barriers with families who find accessing Core SLT Services a challenge.

Looking forward:

Organised SLT talk link sessions into community organised parent and toddlers to provide preventative information on early communication development could help keep vital messages embedded in these settings already established by the project. In addition, a wider range of SLT approved leaflets providing early key communication messages for parents in non Surestart areas would increase accessibility and consistency of this information.

The questionnaires demonstrated that practitioners' initial training did not cover speech, language and communication in sufficient detail and there were limited opportunities post-qualification. More training opportunities for practitioners working with children aged 0-3 would alleviate this lack of confidence in the subject area.

The development of education workshops for antenatal and post natal parents to provide them with consistent and reliable early communication messages would be ideal for getting fundamental messages communicated from the 'grass roots'. This recourse could then be used to train other practitioners to deliver this directly to parents within their locality.

The NYTF project has demonstrated that by bringing Speech, Language and Communication issues to greater prominence within the community as a whole, we can build the capacity within a wider range of people who come into contact with our children.



References:

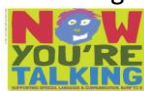
Two years On: Final report of the Communication Champion for Children: Jean Gross, Communication Champion, December (2011).

Population of 0-3 year olds and Deprivation Rank within Erne, Lisnaskea and Portora Wards: Source: 2011 Census and NIMDM, 2011, www.nisra.gov.uk

Community Quality 3: Royal College of Speech and Language Therapists, 2011.

Early Intervention: The Next Steps. An Independent Report to her Majesty's Government: Graham Allen MP, January (2011).

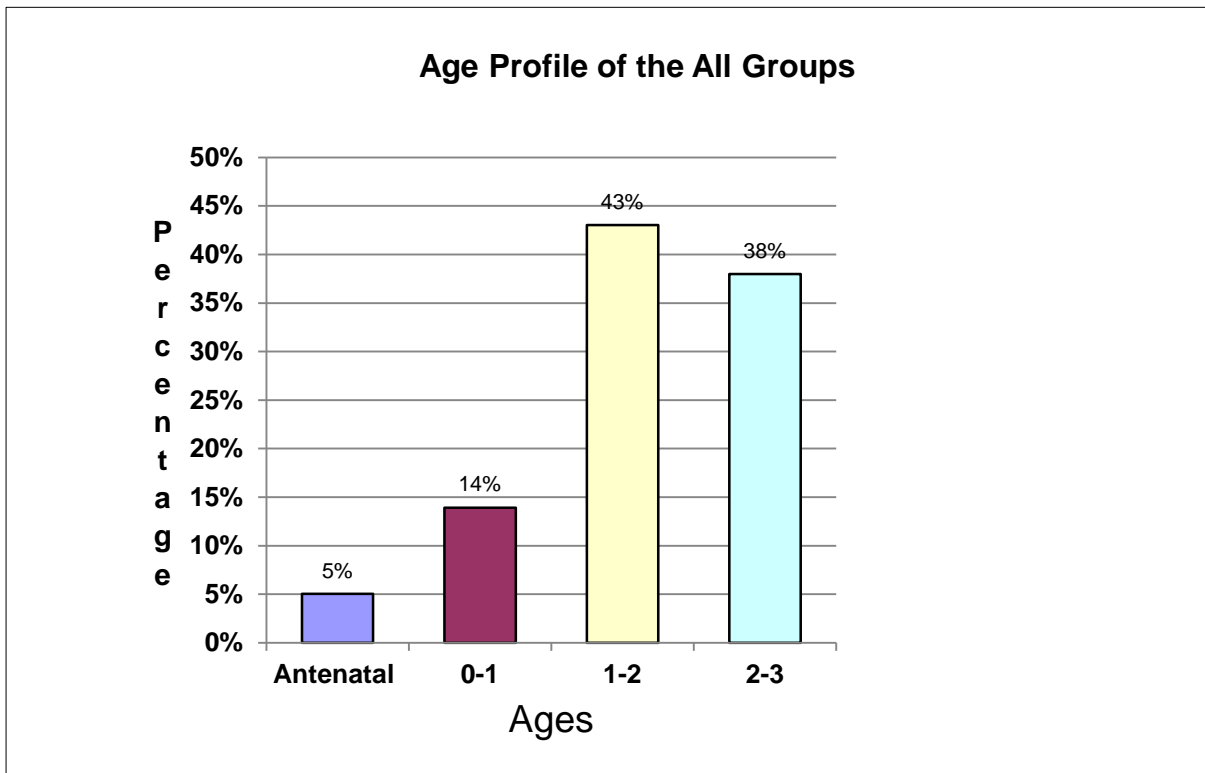
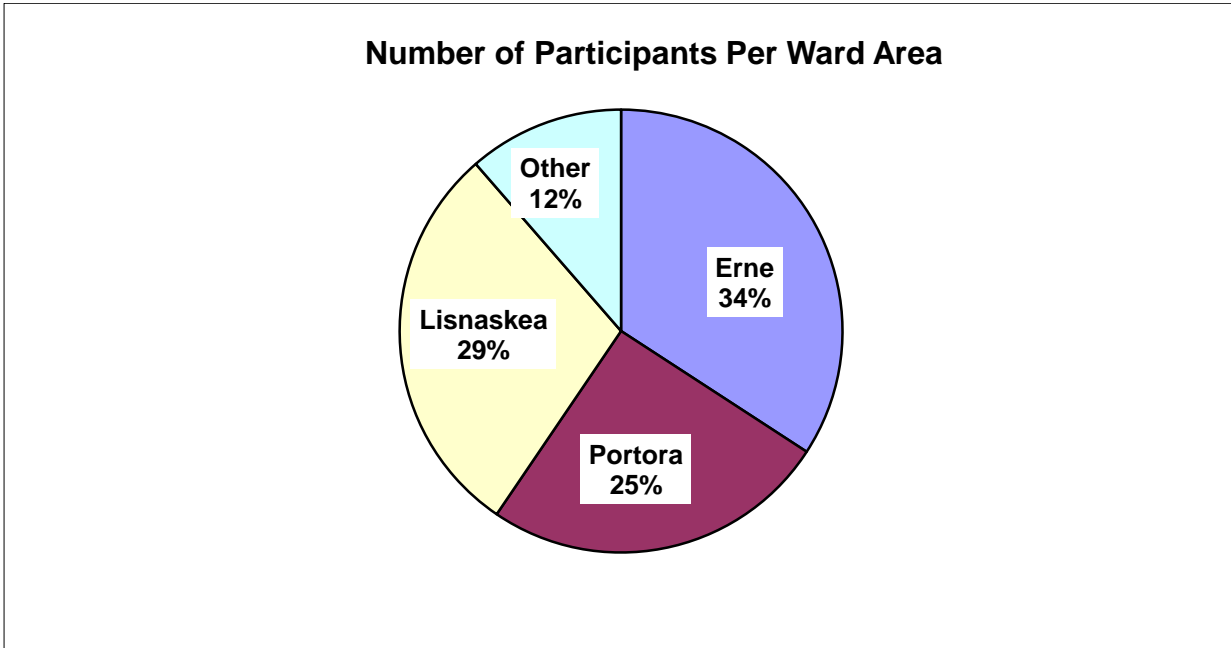
WellComm: A Speech and Language Toolkit for the Early Years, Sandwell Primary Care Trust (2010).



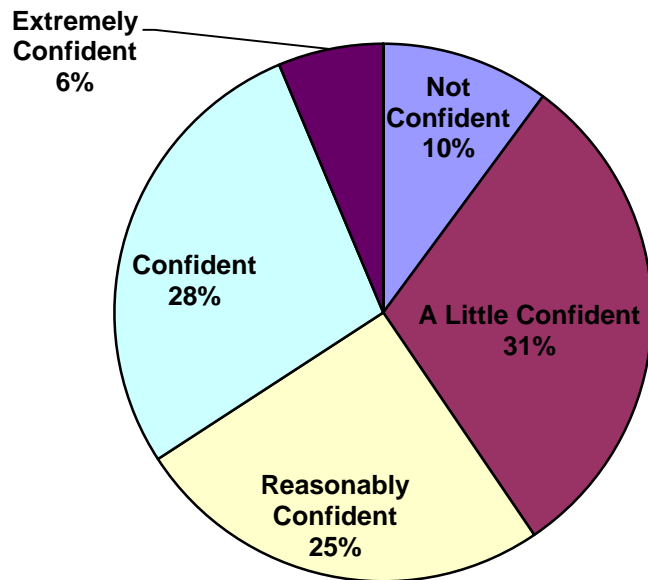
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Pre Project Parental Questionnaires

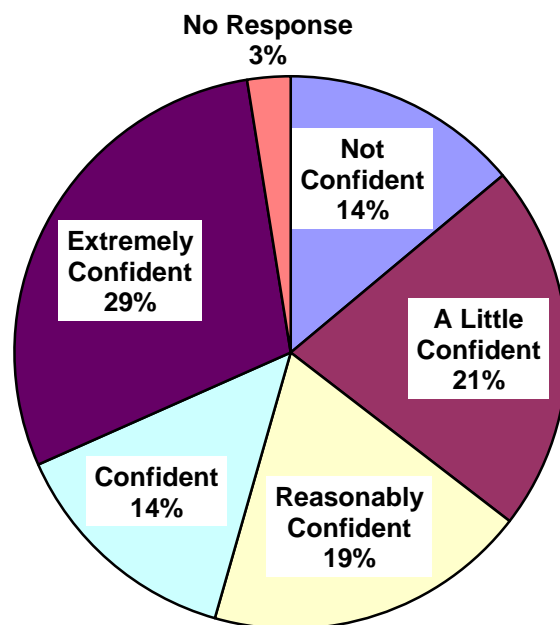
Sample Size: 79



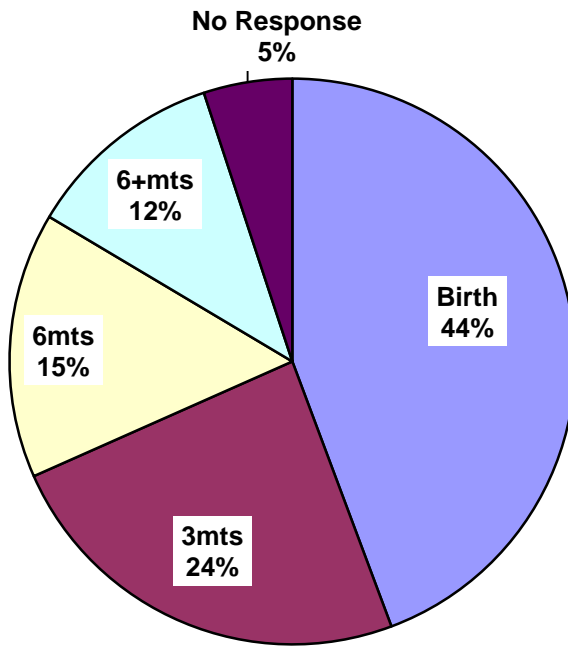
Knowledge of the Ages and Stages Of Speech and Language Development



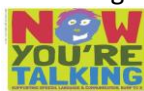
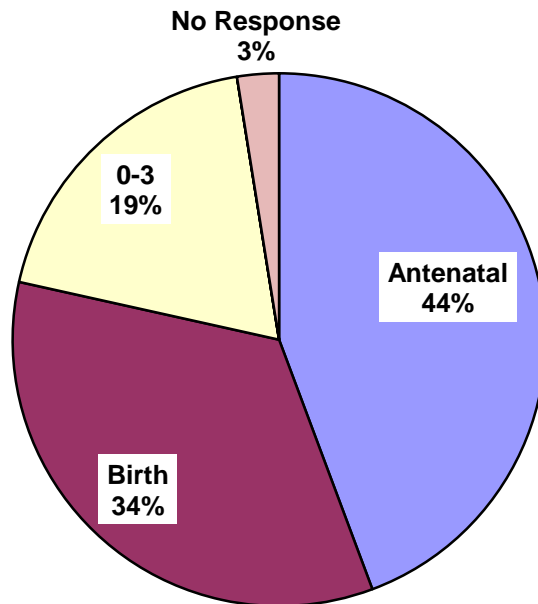
Knowledge of the Risks/Effects of long term dummy sucking

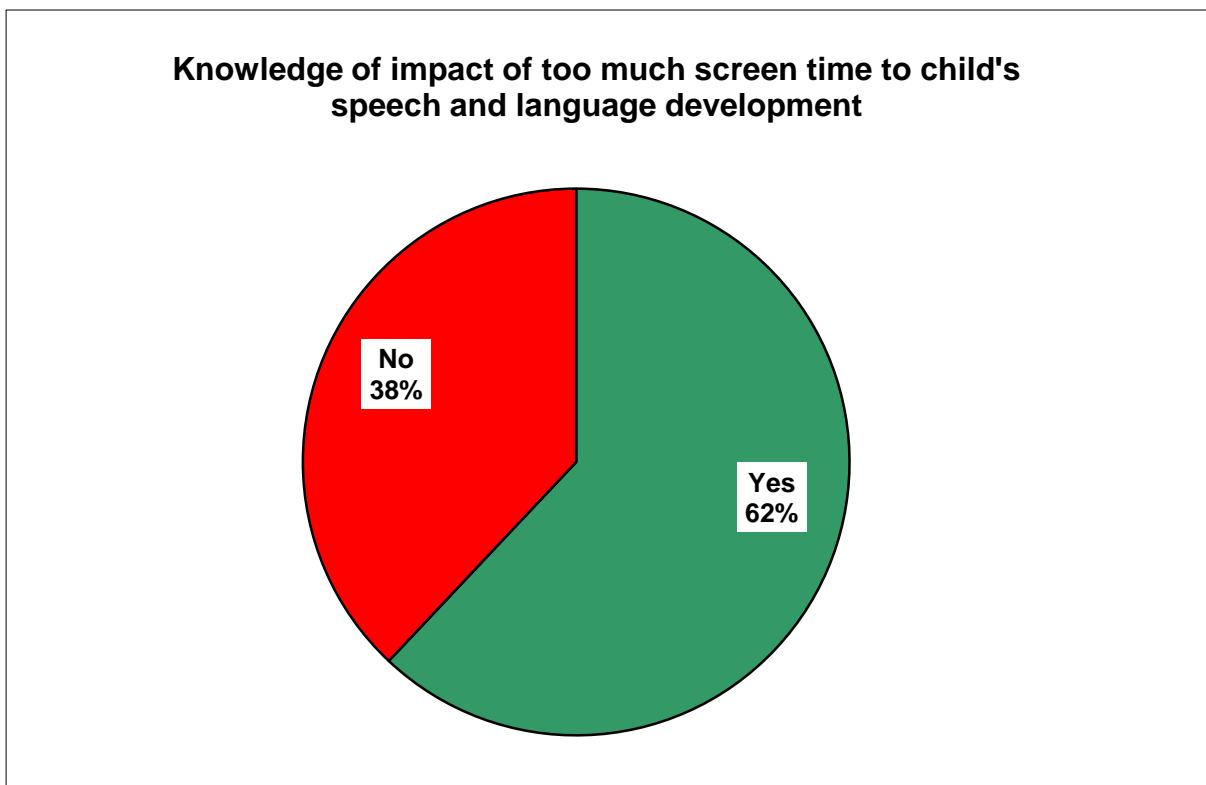
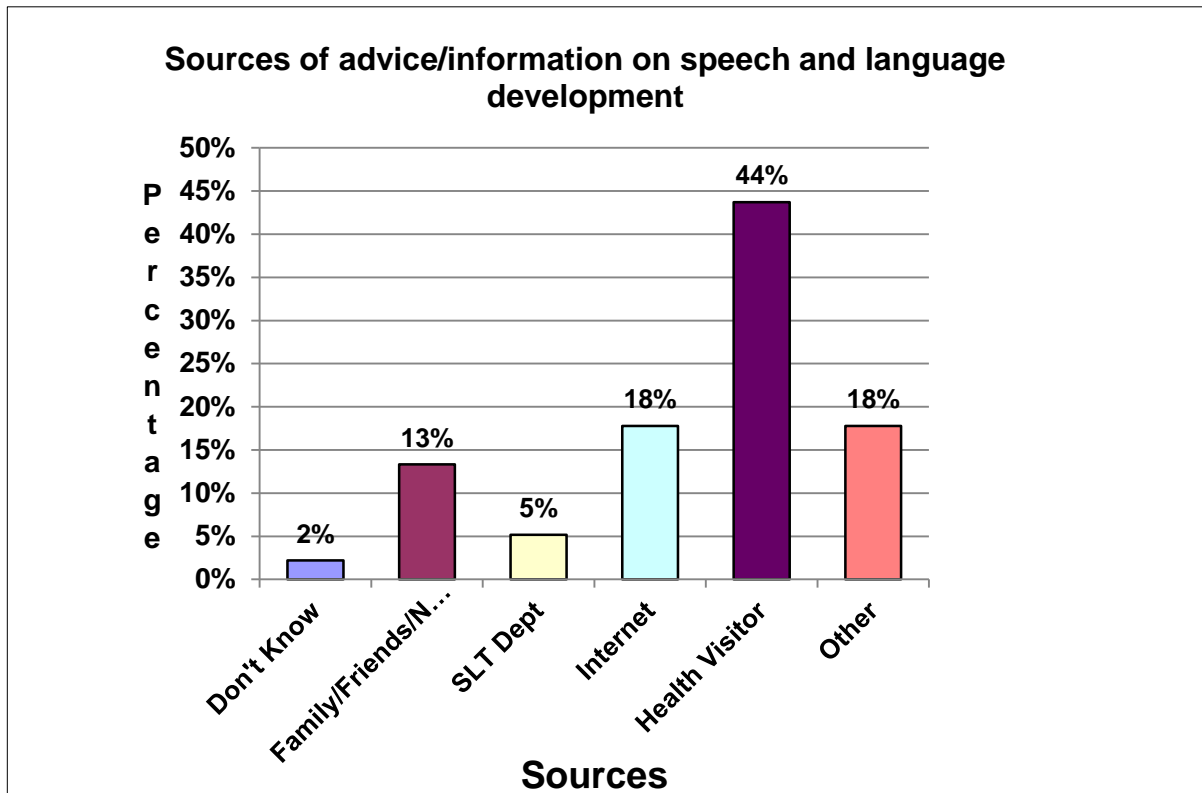


Parental Awareness of when books, songs/rhymes should be introduced to children

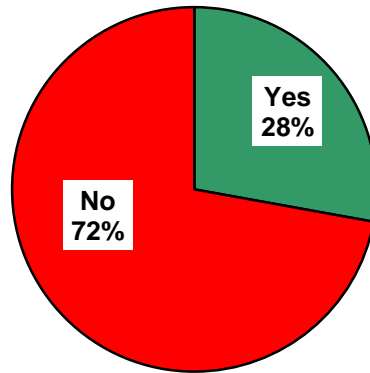


Parental Awareness of when to start talking to their baby

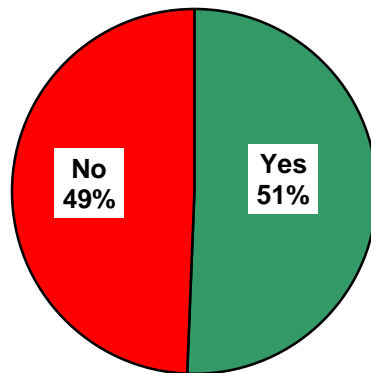




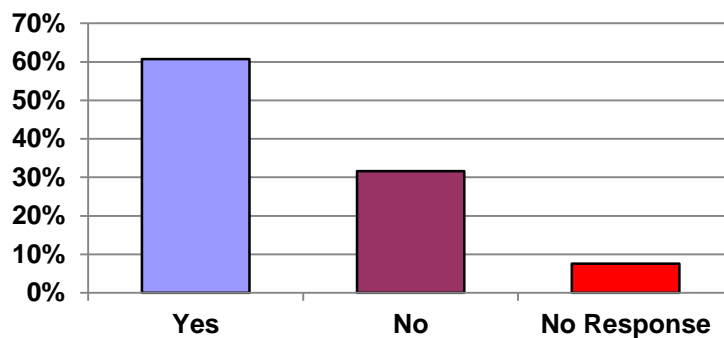
Knowledge of the links between Dummy Sucking, Glue Ear and Speech, language and communication difficulties



Knowledge about the impact of constant background noise on a baby/toddler's speech and language development



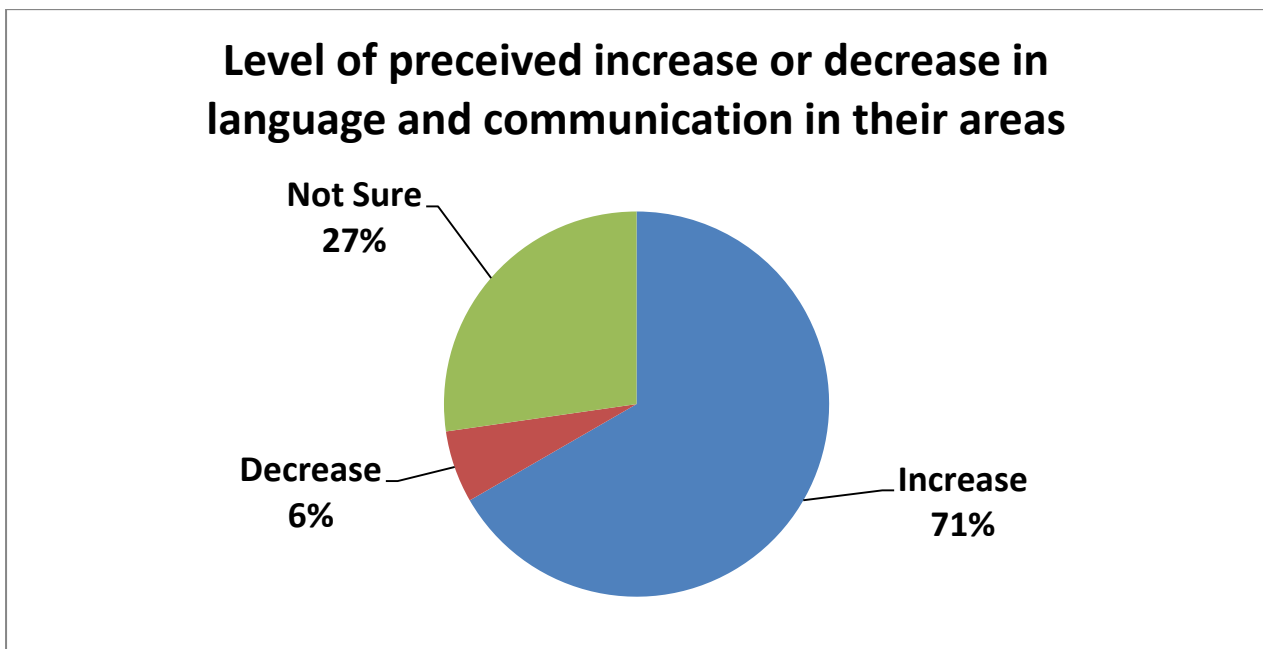
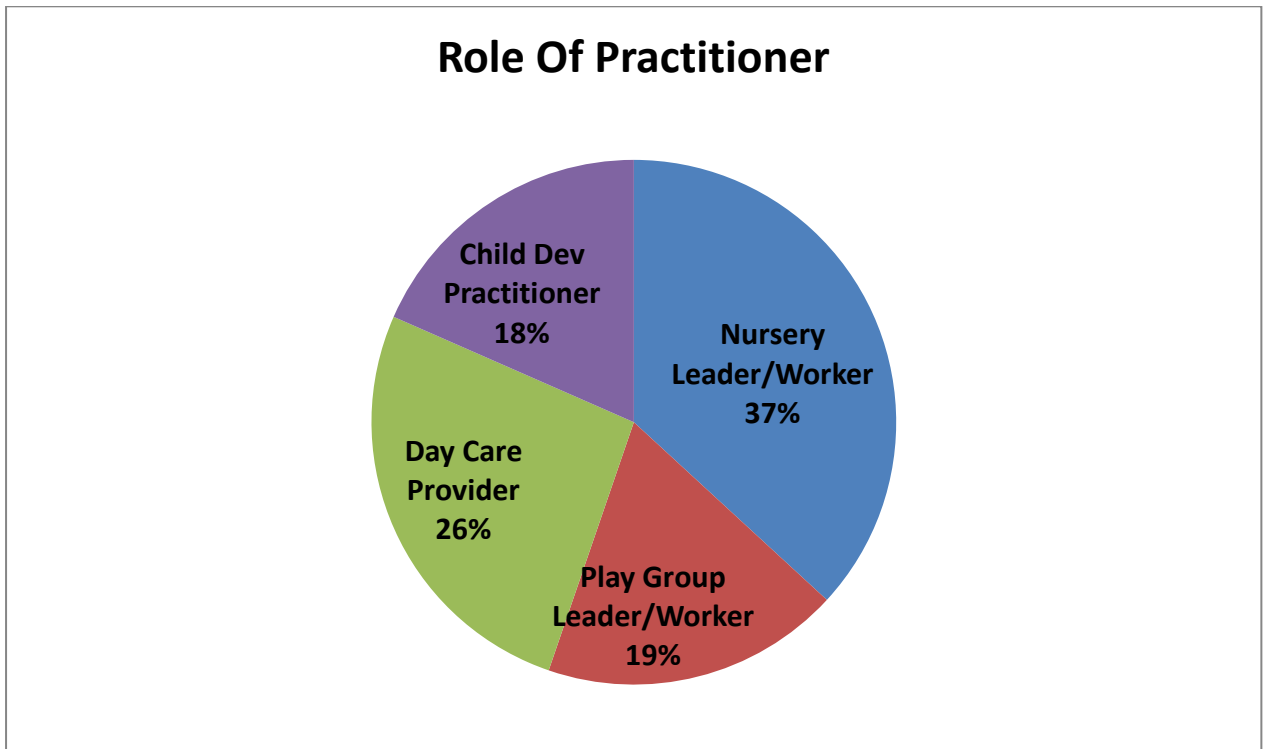
Knowledge of where to get support if concerns about general parenting

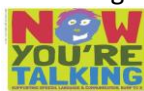
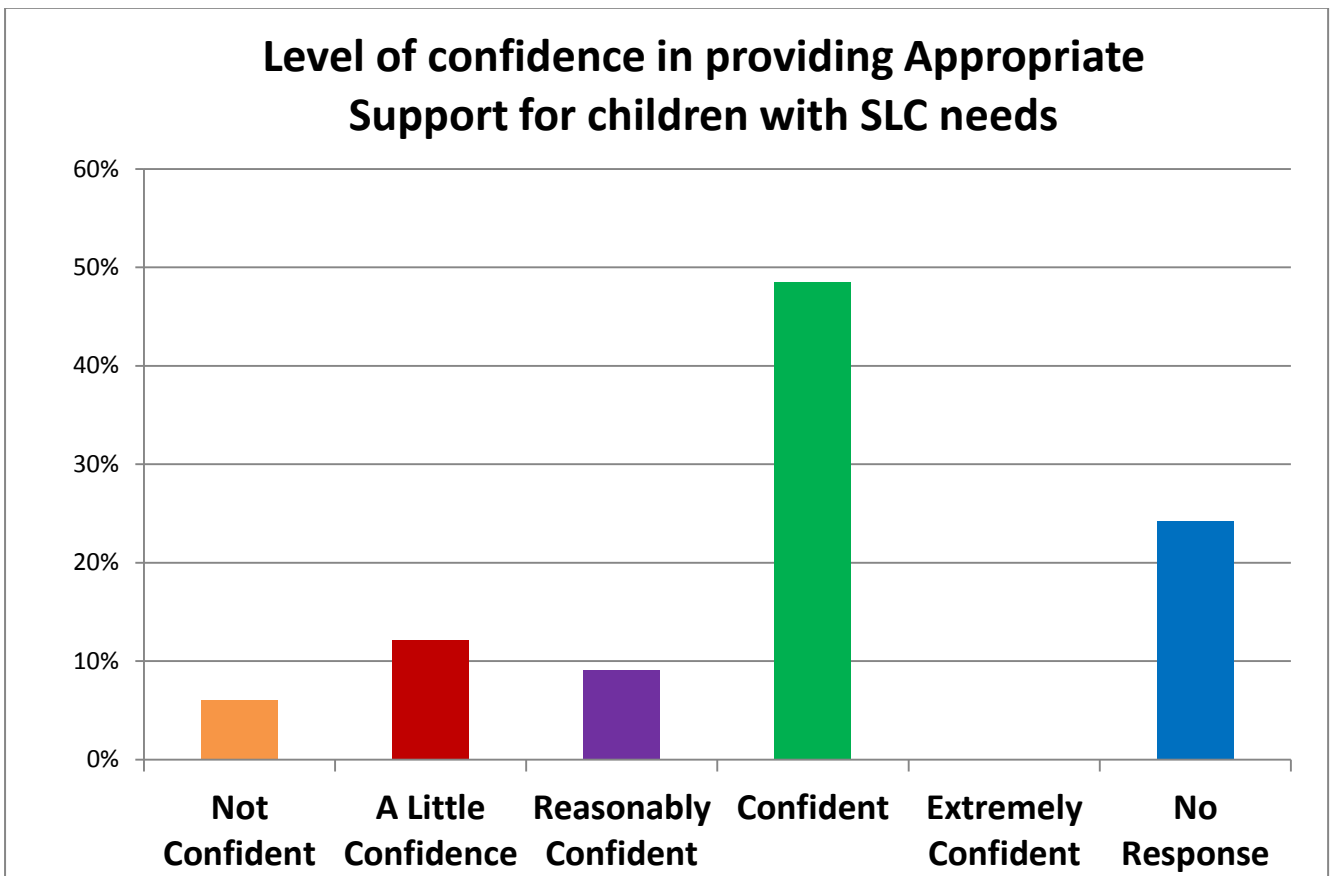
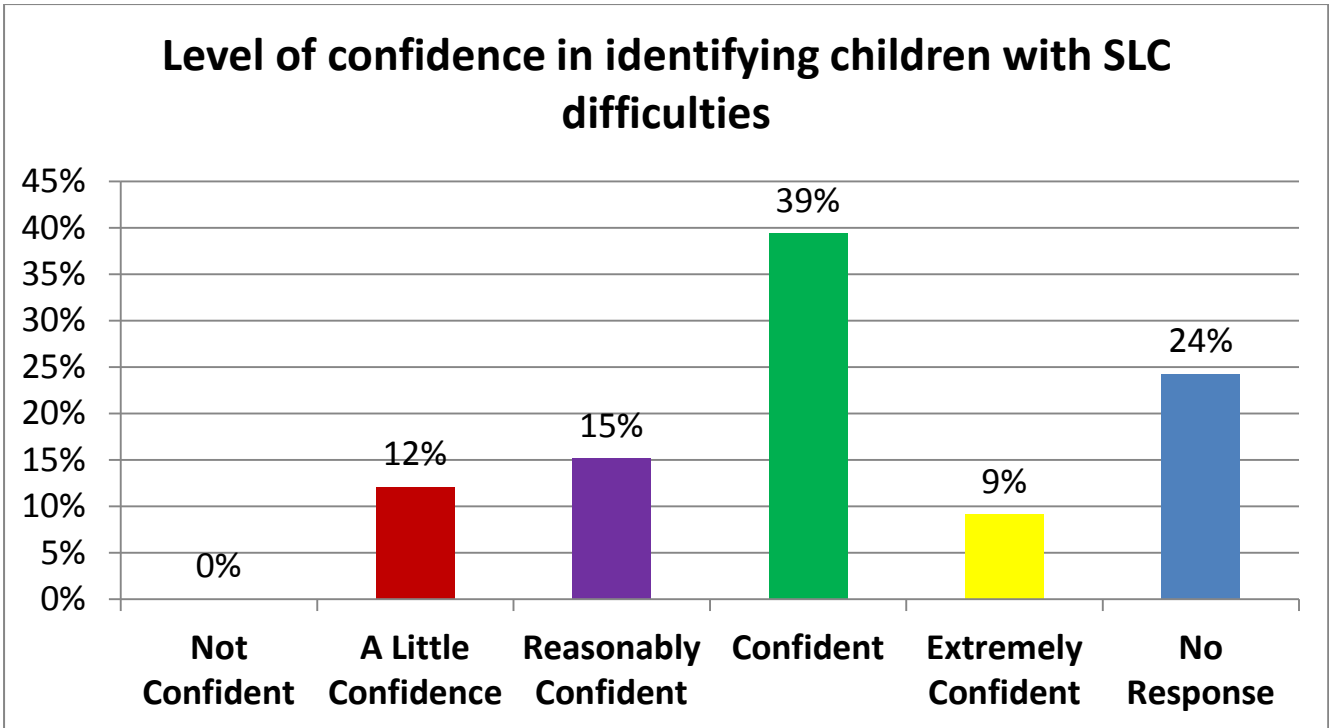


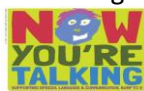
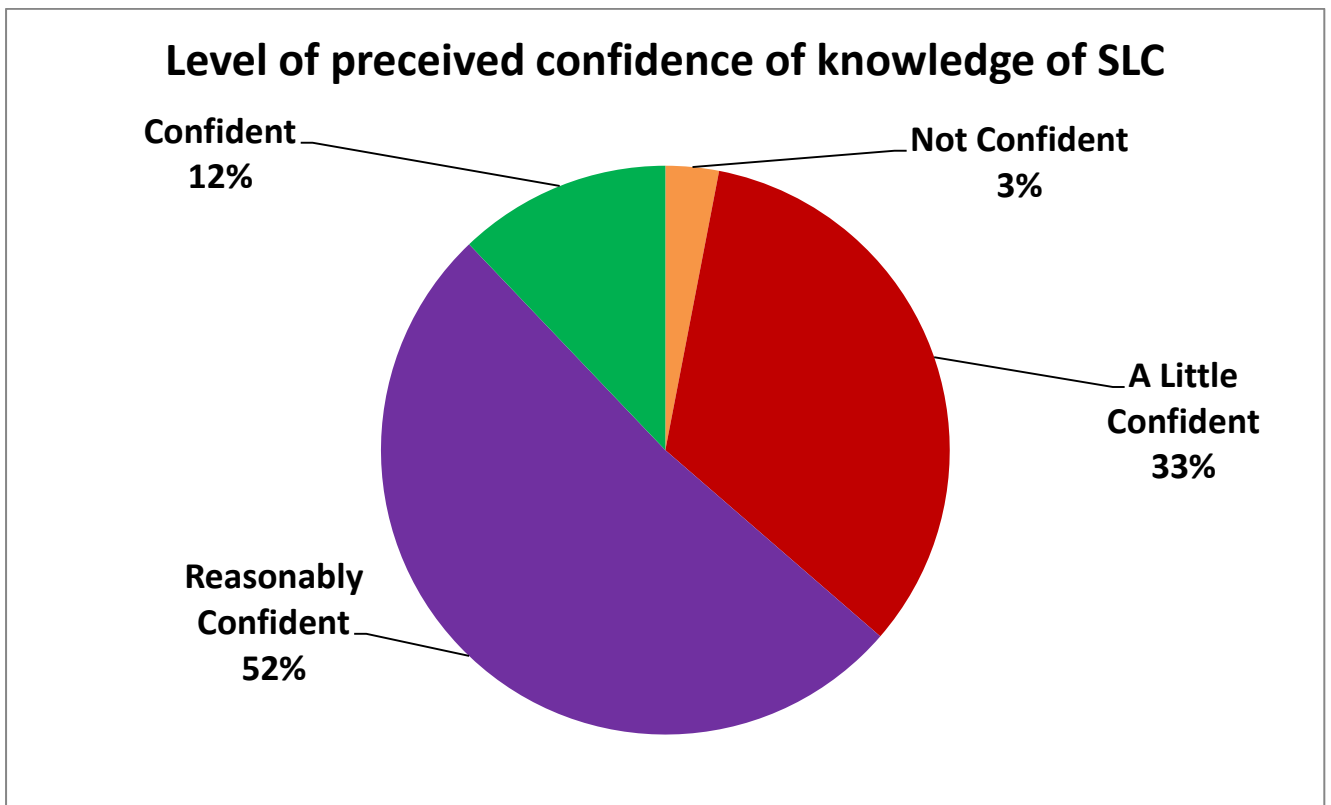
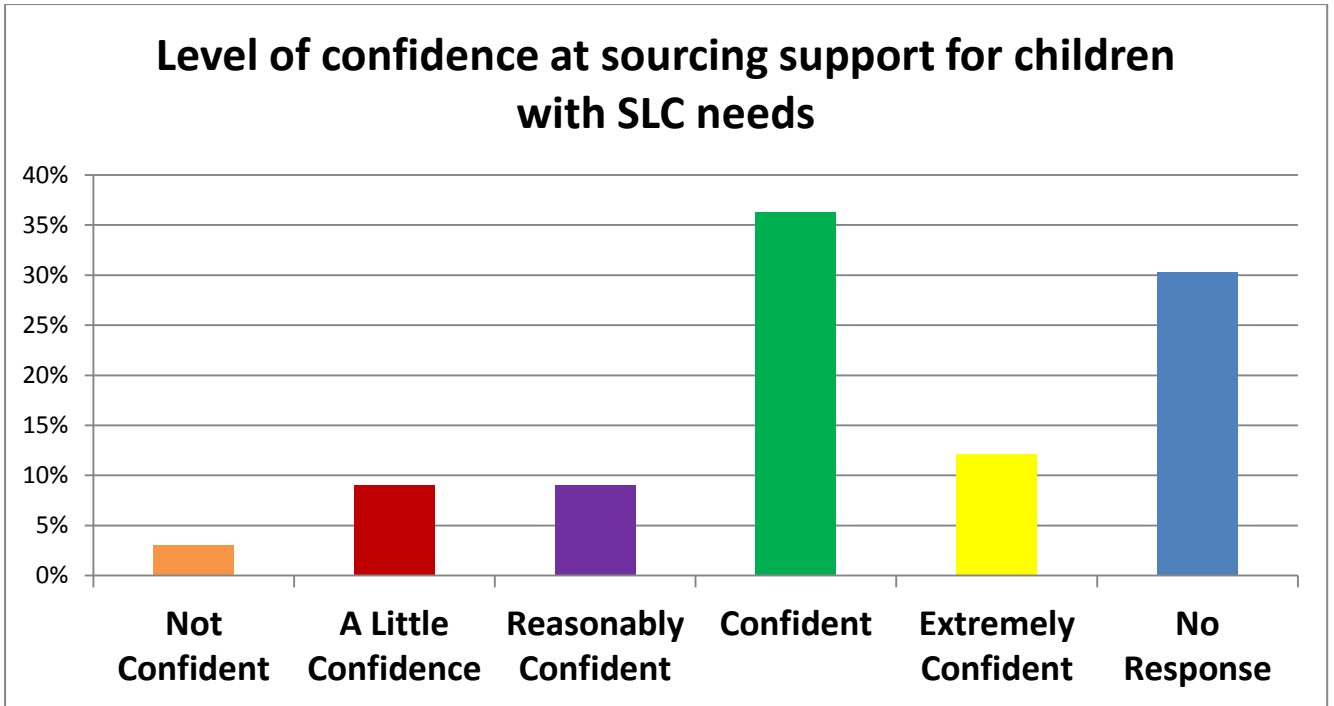
Appendix: 2

Practitioner Questionnaires

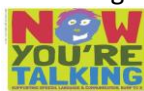
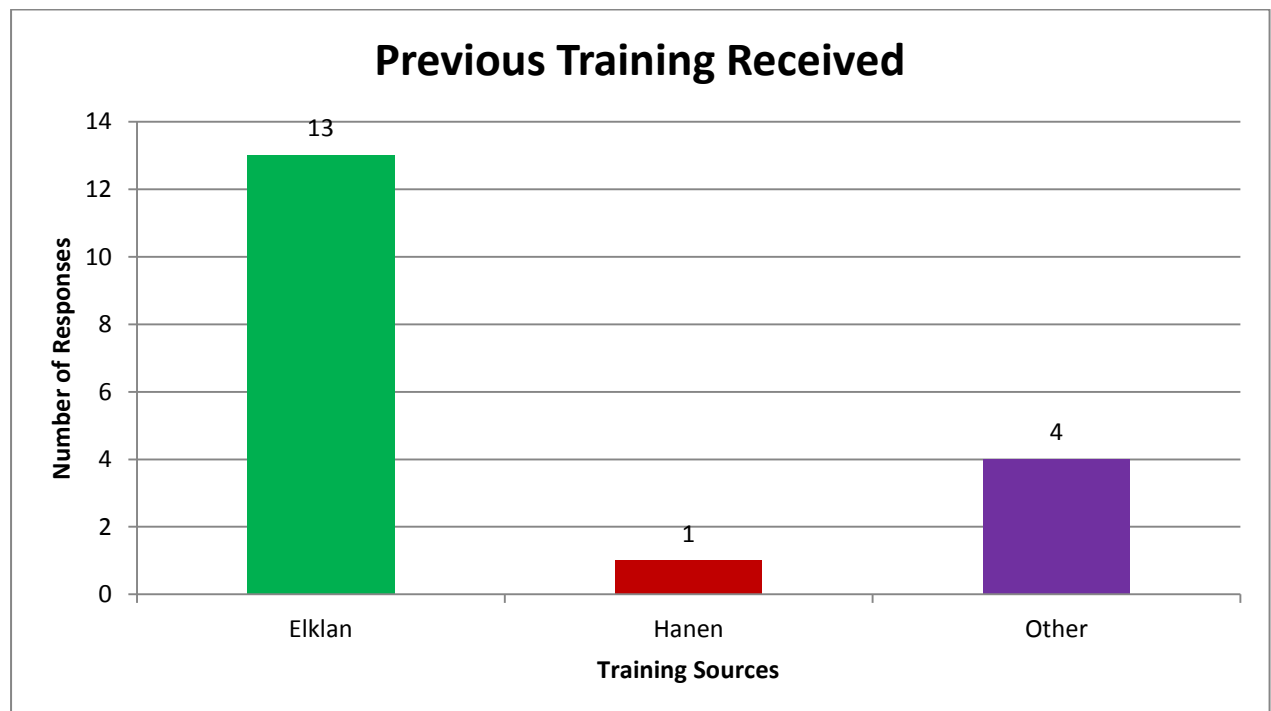
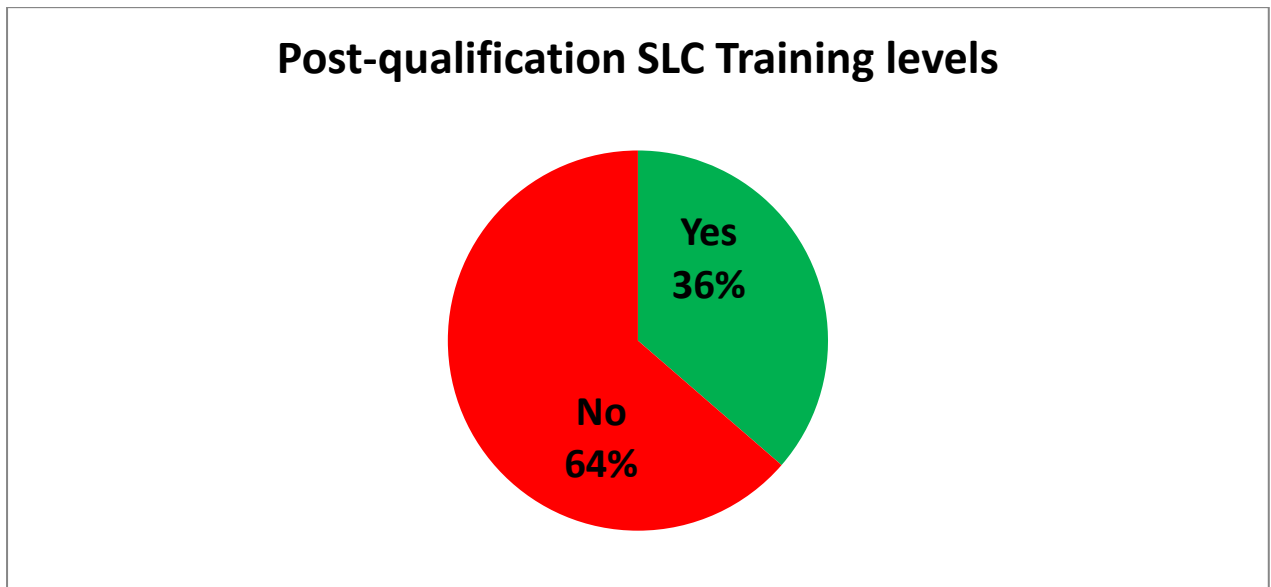
The sample size is 50:







TRAINING



Appendix: 3**List of organisations involved**

Community Organisations:

1. Oak healthy Living Centre, Lisnaskea
2. Carrosyl Centre, Lisnaskea
3. Lisnaskea Parent and Toddler
4. Home Start
5. Life Start
6. Surestart
7. Child Minders Independent Group
8. NICMA – Northern Ireland Child Minder Association
9. Action for Children
10. Kilmacormick Resource Centre
11. Enniskillen HUB
12. West End Community Association
13. Breast Feeding group
14. Tiny Life
15. Elim Church, Enniskillen
16. Methodist Church, Enniskillen
17. St. Michael’s Parish, Enniskillen

Private Day Cares:

1. Burrendale, Enniskillen
2. New Hope, Enniskillen
3. Toddle In 1, Enniskillen
4. Toddle In 2, Enniskillen

Education Sector:

1. Enniskillen Nursery
2. Montessori, Enniskillen
3. Little Castle Playgroup, Lisnaskea
4. St. Ronans Nursery, Lisnaskea

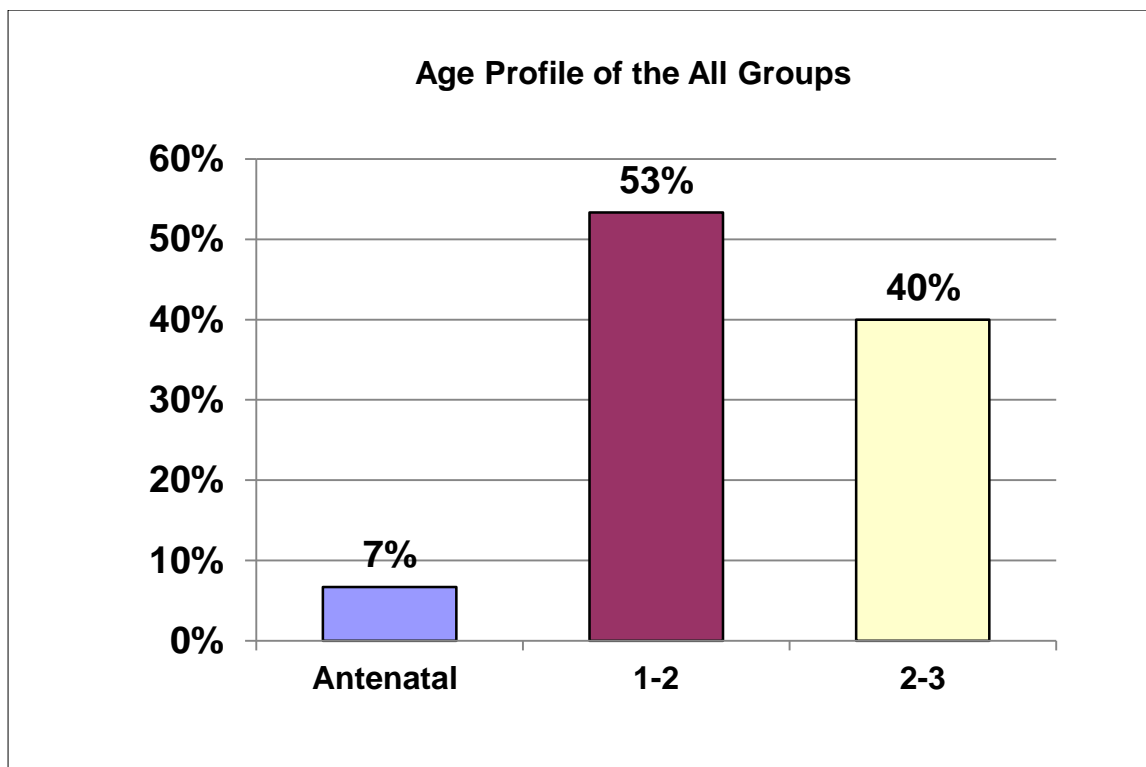
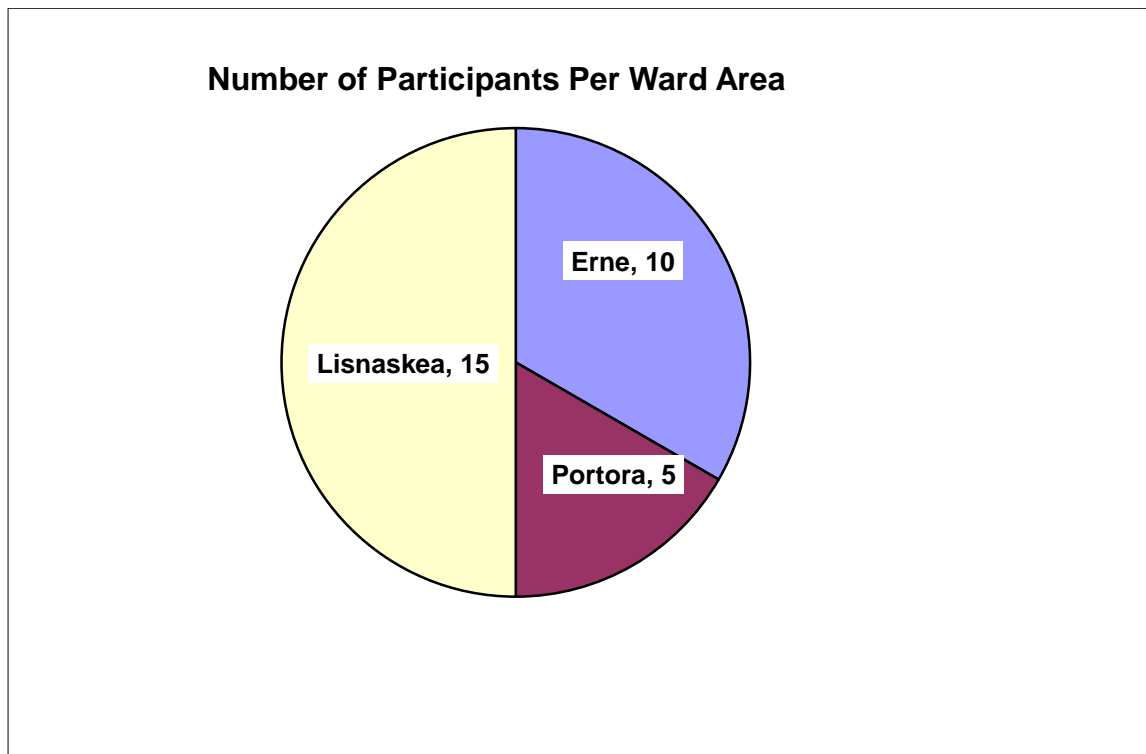
Health Care Sector:

1. SLT Department
2. Health Visiting Department
3. Midwifery Team

Annabelle Ferguson – Speech and Language Therapist, February 2016



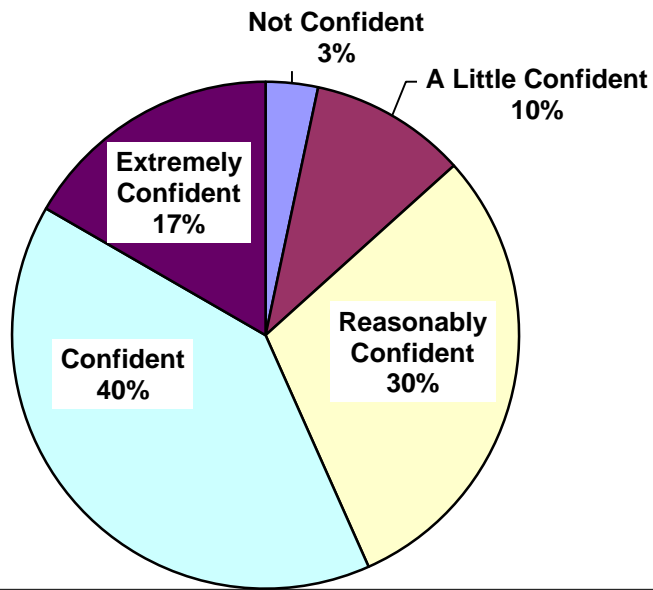
Appendix: 4

Post Project Parental QuestionnairesSample size: 30

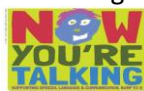
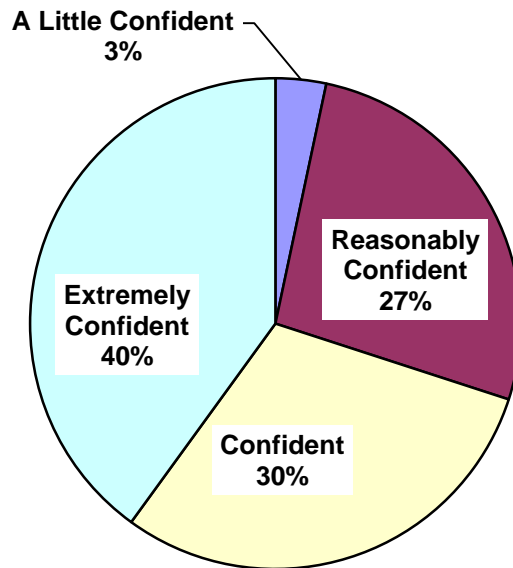
Annabelle Ferguson – Speech and Language Therapist, February 2016



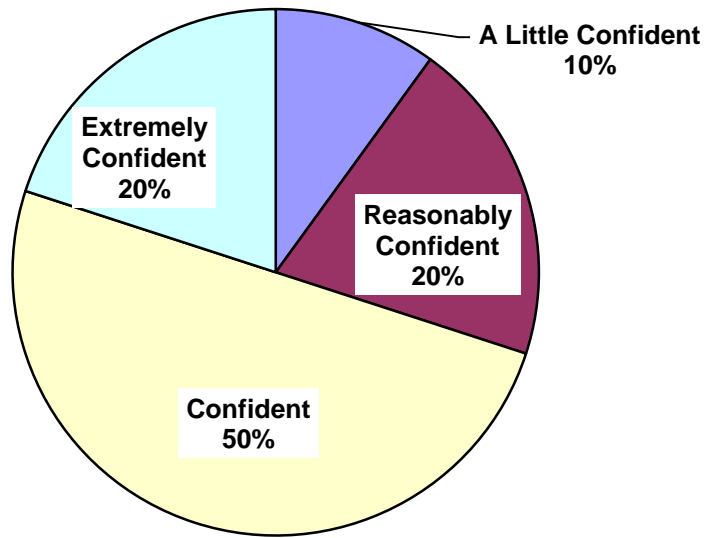
Knowledge of the Ages and Stages Of Speech and Language Development



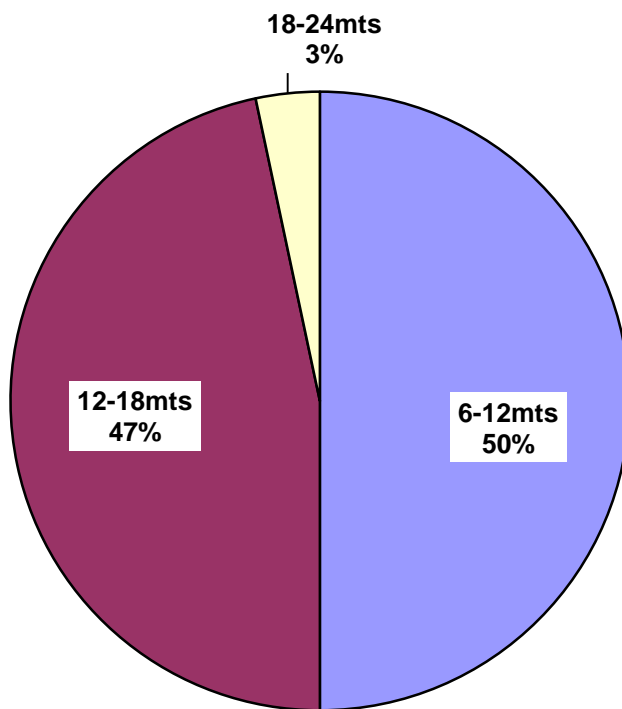
Knowledge of the Risks/Effects of long term dummy sucking

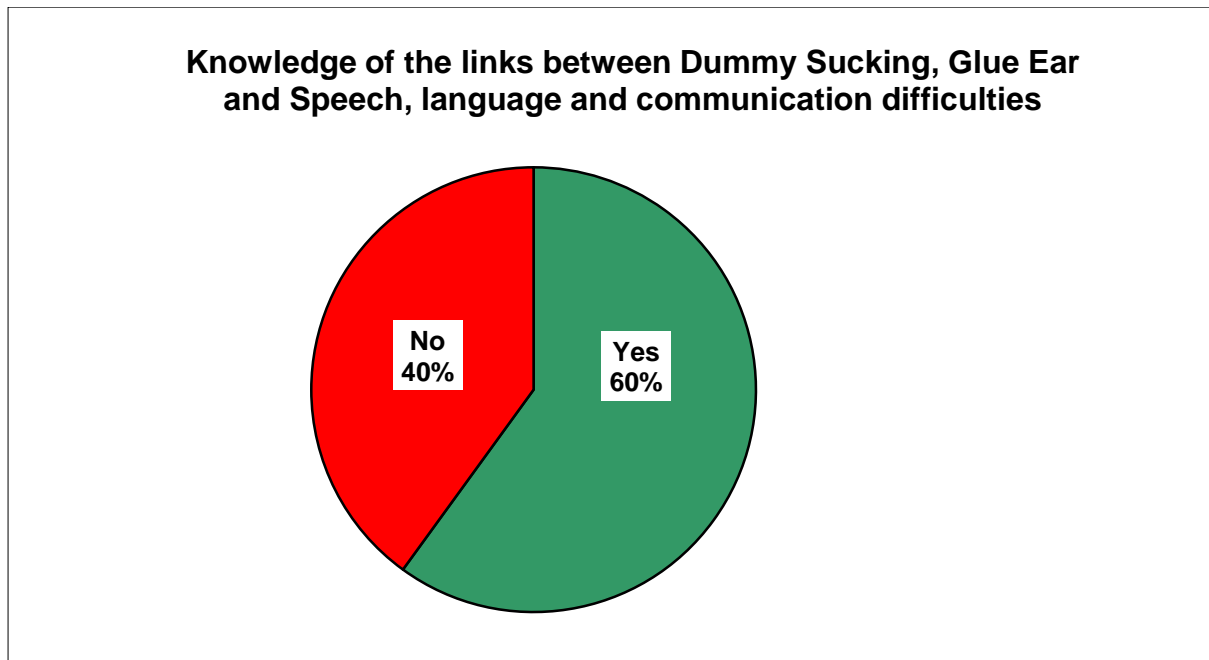
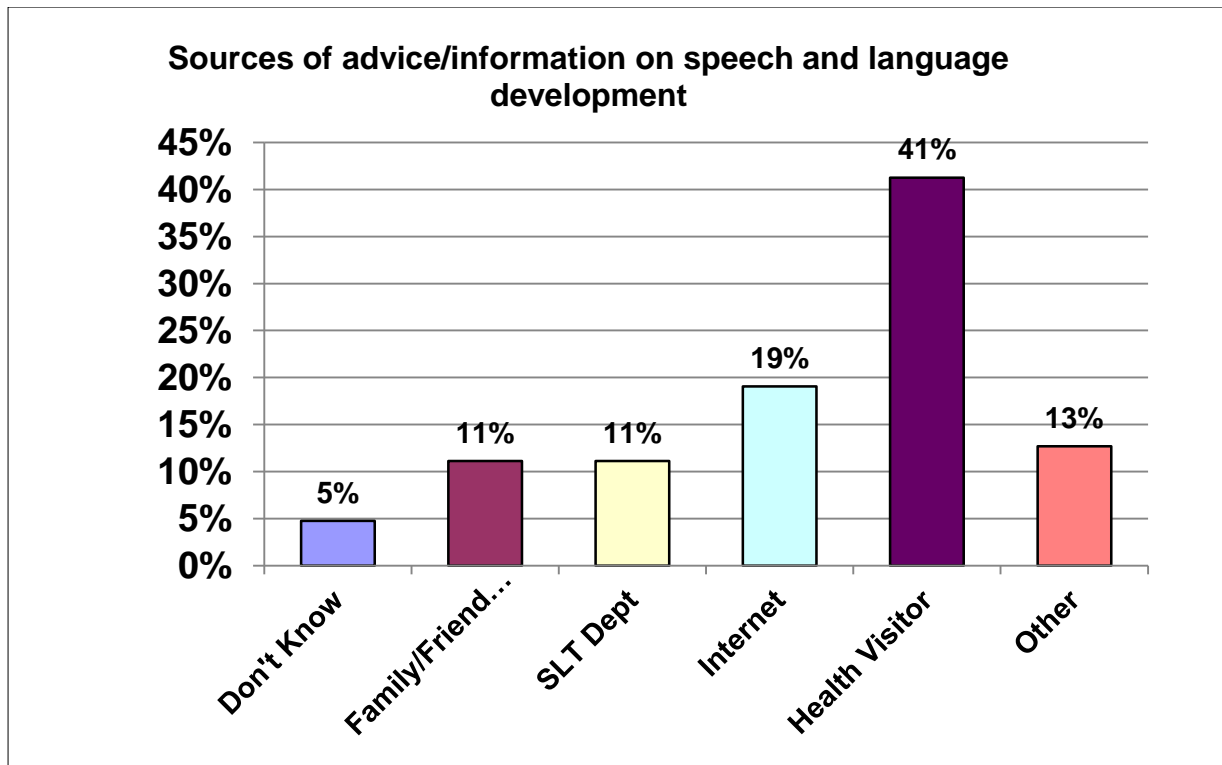


Knowledge of support available if concerned about a child's speech and language development

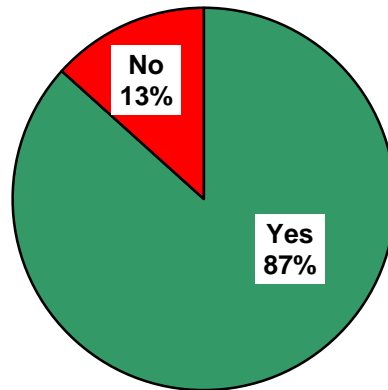


Parental Awareness of Age of babies first words

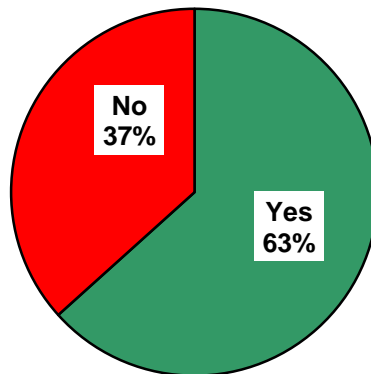




Knowledge of impact of too much screen time to child's speech and language development



Knowledge about the impact of constant background noise on a baby/toddler's speech and language development



Knowledge of where to get support if concerns about general parenting

