SPEECH, LANGUAGE AND COMMUNICATION NEEDS UNIT 15 WORKING WITH COLLEAGUES AND OTHER AGENCIES

Learning outcomes

Trainees will:

- understand the professional culture and practices of the practitioners who work with children and young people with SLCN, and how these affect joint working
- understand the structure of national and local health educational services which are relevant for a range of children with SLCN
- be able to contribute positively to the development of effective multi-agency working practices for children and young people with SLCN.
- have a clear understanding of their role as a specialist in SLCN in relation to schools and speech, language and therapy services and other agencies.

(These relate to SLCN framework Specialist E1, E2 and E3)

ONLINE RESOURCES

The content and tasks throughout these PDFs are supported by online resources that are designed to facilitate and supplement your training experience.

Links to these are signposted where appropriate. The resources use graphics and interactive elements to:

- Highlight salient points
- Provide at-a-glance content summaries
- Introduce further points of interest
- Offer visual context
- Break down and clearly present the different stages and elements of processes, tasks, practices, and theories

The online resources offer great benefits, both for concurrent use alongside the PDFs, or as post-reading revision and planning aids.

Please note that the resources cannot be used in isolation without referencing the PDFs. Their purpose is to complement and support your training process, rather than lead it.

You should complete any learning or teaching tasks and additional reading detailed in this PDF to make full use of the Advanced training materials for autism; dyslexia; speech, language and communication; emotional, social and behavioural difficulties; moderate learning difficulties.

To find out more about the resources, how they work, and how they can enhance your training, visit the homepage at: <u>www.education.gov.uk/lamb</u>

The first resource for this unit can be found here: www.education.gov.uk/lamb/slcn/joint-working/intro

Briefing Notes

A multi-disciplinary approach to working with pupils with SLCN is considered to be the best way to support the development of their speech, language and communication and facilitate inclusion. This is emphasised in the recommendations from the Bercow Review:

In planning, commissioning and delivering universal, targeted and specialist provision, it is critical that health services and children's services, including schools, work together in support of children and young people with SLCN. No single agency can deliver any one of the five Every Child Matters outcomes for children and young people by working in isolation. Operating in separate silos produces misunderstandings, causes divisions and can be bewildering or infuriating to parents.

See online resource:

www.education.gov.uk/lamb/slcn/joint-working/importance

Read the executive summary available here:

https://www.education.gov.uk/publications/eOrderingDownload/Bercow-Summary.pdf

Services are configured differently in different local authority and health services, but the current recommendation is for both education and health to configure their services based on a tiered model of universal, specialist and targeted services and with professionals from different agencies working collaboratively to plan and deliver different types and levels of input to pupils with SLCN.

This paper puts forward recommendations of how this might work in practice; you should read pages 15 and 16.

http://www.rcslt.org/docs/free-pub/Supporting_children-website.pdf

In your role as a specialist teacher you will need to have a critical understanding of multidisciplinary approaches at both operational and strategic levels as they apply to the context of your work. Think about the services that are provided for individual pupils and at whole school level and who provides them and note them in your learning log. Identify the parts of the services that are planned and delivered separately and those which are planned and delivered jointly. Who commissions these services in your area and how are they managed?

Look at this model of joint working with a school by specialist teachers and speech and language therapists.

http://www.city.ac.uk/__data/assets/pdf_file/0004/96439/poster-courtnage.pdf

The tasks in this unit invite you to examine the working practices and culture of speech and language therapists and teachers and reflect on ways in which the knowledge and expertise of both can be utilised to best effect for pupils with SLCN. You will also critically examine the impact and evaluations of some examples of joint working in schools and consider your role as a specialist teacher in multi-agency working.

Task 1

Evaluate joint working between a speech and language therapist and a teacher in your setting and identify any areas for action to improve or enhance collaboration. You should make notes in your learning log of your activities and reflections.

Activity 1

Complete the table (Appendix 1) as far as you are able by writing brief notes on your experience of each group's training and expertise. Compare your answers with the suggested answers Appendix 2 and note your reflections in your learning log.

Activity 2

Using your understanding of the strengths of both professional groups look at an example of the advice and recommendations provided by the speech and language therapist and identify the areas in which the knowledge and expertise of the teacher can be used to ensure the advice and recommendations are implemented. Make a note in your learning log of any guidance and support you could provide to either professional to promote effectiveness in their joint working.

Identify any issues outside of the control of either professional which may be barriers to successful collaboration – e.g. opportunities for liaison, contact, space, conflicting priorities and make notes in your learning log. Identify how these barriers might be overcome – including "what" "who" and "how" actions required including your role in relation to the SLT and the SENCO.

Task 2

This task is designed to develop your understanding of how the expertise of other professionals, particularly speech and language therapists, can be drawn into planning and can lead staff from trialing such approaches to embedding them in all their teaching. Look at the following example of successful joint working between a speech and language therapist (SLT) and teachers in secondary schools which operated at the three different levels mentioned in the briefing notes: universal, targeted and specialist, and read the evaluations in the link below.

Whole School level

- Working at a strategic level across different subjects to promote the development of spoken language skills
- Effective differentiation of schemes of work
- Supporting the development of relevant policies/procedures such as screening of all young people entering Year 7 for SLCD
- Developing the consist teaching approaches for reinforcing key skills such as listening

Subject/Class level

- Team-teaching with subject teachers, form tutors, etc.
- Advising on differentiation of topics
- Developing a range of practical resources for use with interactive whiteboards
- Supporting generalisation of strategies from small group work into the classroom.

Pupil level

• Supporting school staff (teachers and teaching assistants) to run speaking and listening groups so that individual students with particular SLCN could develop their skills within a supportive environment.

NB. The SLT refers students with complex or extensive SLCN on to specialist colleagues within her service.

See online resource:

www.education.gov.uk/lamb/slcn/joint-working/listen-ear

Tiers of support

The health service is typically seen as operating within a tiered system of support that reflects the intensity of intervention. The speech and language therapy services working within ListenEar can be placed within that structure.

There were also three levels of intensity of support:

- Tier 3 The specialist level ListenEar triggered by SLT referrals of cases that cause concern
- Tier 2 Support for colleagues working in the frontline ListenEar Broad range of support from SLT and SENCO for teachers and teaching staff,
 - Tier 1 Direct support ListenEar The SENCO and SLT give direct support

to pupils within universal provision

This model can be adapted for primary schools and can be mapped on to the Waves model from the National Strategy and the Code of Practice and also incorporated in to provision mapping.

Make notes in your learning log about the benefits of a joint working approach such as Listen-Ear in your setting. Note also any issues that would need to be addressed if you were to implement it. For example – what needs to be in place at the strategic level within local health and/or education services and the school?

Task 3

This task asks you to look at some outlines and evaluations of collaborative programmes offered by outside agencies to develop schools' capacity to meet the needs of pupils with SLCN and to consider issues relating to implementing collaborative projects in your school/s.

The Talk Programmes were developed by ICAN – read the descriptions here <u>http://www.ican.org.uk/en/What-we-do/Talk%20Programmes.aspx</u>

<u>The Primary Talk Programme</u> was evaluated by the University of Sheffield. This study, a part of the full evaluation of Primary Talk, was designed to examine the experiences of school staff responsible for implementing the pilot and identify best practice in successful implementation of a whole school initiative. Five schools agreed to take part in this study. One did not complete the whole interview process.

The authors concluded:

"...the schools' experiences of implementing a whole school approach differed. This was related to their different starting points with regards to speaking and listening across the curriculum and their varied motivations for engaging with a whole-school approach in the first place. For example, the three schools [seeking the highest level of certification]...were most committed to implementing the whole school approach. The two schools [seeking less high levels of certification] may have had less experience of dealing with children with language and communication difficulties, hence implementing [might have posed a considerable challenge and might explain why the programme 'lost momentum'. "

In four schools, the head teachers and/or coordinators believed that the whole school approach had changed teaching practice, rated its impact as moderate to high, and felt it was well worth the effort.

Their teachers and TAs were more aware of the importance of speaking and listening, and the need to modify their own speech in order to support children's language and learning; they also made better use of visual resources.

The training and resources were useful, even if not always accessed fully.

Three of the four head teachers felt implementing a whole school approach also had strategic value.

However, there were costs. The coordinators spent a significant amount of their own time preparing to cascade the training in their schools. They appreciated the support of a Regional Advisor but needed this to continue for longer than it did.

Financial costs included paying for TAs and non-teaching staff time to be involved in the training.

There was a strong feeling that a senior leadership team should be included in the team, implementing a whole school approach, particularly to deal with questions and more advanced level training.

Screening and identification of SLCN was perceived as very 'technical' and the domain of the senior leadership team. Coordinators found this aspect of the whole school approach the most challenging. Although some school staff felt that they should be able to screen and 'diagnose' children with SLCN, this had not been the intention. Rather, the aim was to raise awareness of SLCN and to identify which children needed to be referred to SLT or other services. One coordinator recommended an introductory awareness-raising session as a starting point, moving on to identification only later in the training and with an SLT involved.

Practical activities in the training were essential for the coordinators to develop their skills and confidence as trainers. Time to try out, reflect on, feedback, and share new strategies to support children's speaking and listening skills was essential for embedding new teaching practice; only two of the four schools seemed to actively engage with this concept.

The following aspects of best practice were observed in a school where both the head teacher and whole school approach coordinator rated the impact as very high.

- Strong support from the head teacher and senior leadership team was clearly in evidence.
- There was a firm belief in the importance of speaking and listening before implementing the whole school approach
- There were no competing initiatives
- The coordinator was a member of the senior leadership team, had a limited number

of additional roles, had reduced teaching commitments, and allocated a specific amount of time per week to implementing the programme.

- The coordinator's time was used flexibly, depending on what needed to be done.
- The programme was delivered methodically and in its entirety as far as possible
- Training was delivered to as many members of staff as possible, including nonteaching staff, some parents and governors
- After delivering the initial training, it was broken down by the coordinator to focus on one or two issues at a time.
- Action plans were put into place and discussed.
- There were dedicated times in staff meetings to discuss relevant issues and make decisions.
- Staff were enthusiastic and motivated. They networked and shared good practice by visiting each other's classrooms.
- The coordinator carried out classroom observations and assisted with embedding changes into practice.
- The Regional Advisor visits only stopped after the coordinator was 'up and running' with the programme.'

This table asks four questions based on the description of the successful school described and one more general one based on the rest of the study.

	Question		Suggested answer
A	In the school described, whose support was needed to support the introduction of the WSA for its success?	1	There were dedicated times for discussion and decision-making about the initiative
В	How were staff meetings used?	2	The head and senior management team
С	How faithfully did the school stick to the programme design?	3	For advice and additional training
D	What aspect of the 'Regional Adviser's' support was seen as particularly successful?	4	The programme was delivered methodically and in its entirety as far as possible

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E	Why did some schools want the help of an SLT on the introduction of the programme?	5	The support was given until the programme was properly established
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Complete Table 2 to suggest the correct answers to the questions in Table 1

Table 2

А	В	С	D	E

See online resources:

www.education.gov.uk/lamb/slcn/joint-working/primary-talk-1

www.education.gov.uk/lamb/slcn/joint-working/primary-talk-2

www.education.gov.uk/lamb/slcn/joint-working/primary-talk-3

www.education.gov.uk/lamb/slcn/joint-working/primary-talk-4

www.education.gov.uk/lamb/slcn/joint-working/primary-talk-5

<u>The ELCISS project</u> was developed by Victoria Joffe at City University – read the description here.

http://www.elciss.com/elciss-projects/index.php

Evaluation:

47 boys and 7 girls with a mean age of 12.8 years who presented with severe and complex difficulties with language and communication were involved in the study. Only one of these pupils was receiving speech and language therapy.

They were given pre-tests covering non-verbal intelligence, receptive and expressive language abilities, and literacy and narrative skills. They were assigned randomly to two intervention groups, which lasted for six weeks. One intervention involved the understanding and telling of stories with a focus on structure, story description and inferential understanding; the other was a vocabulary enrichment programme, which involved the teaching of key concepts and vocabulary through word association, mind-mapping and word-building. The programs were grounded in the schools' own curricula and given by student SLTs, supervised by Victoria Joffe of City University. Detailed guidelines, instructions, session plans and materials were provided.

The results

The battery of tests after the six weeks, of similar type to those given before the intervention, revealed:

- No significant differences between the performance of the two groups on any of the tests
 - Significant gains on receptive vocabulary, recalling sentences, and non-literal comprehension
 - Some gains in tests of word classes and receptive grammar
 - The 'narrative group' did show gains in narrative skills and reading comprehension but the scores did not reach significance
 - The 'vocabulary group' made more gains than the 'narrative' group on understanding grammatical constructions, recalling sentences and naming.

Victoria Joffe is cautious about explaining the improvements to the language measures in the absence of a control group. But she points out '...given the pervasiveness and severity of the children's language impairments, and the fact that reported changes after intervention for this age group are often small...these results are encouraging....' She also points out that such a study would normally need a 'no treatment control group'. But there are ethical issues in not treating some of a school population and the study would not have received support if it had included a no treatment control group.

Summary of the pupils' views of the programme

74%	'helped with talking and understanding'
56%	'helped with reading and writing'
54%	'helped them in the classroom and getting on with friends'
33%	'helped them make new friends'
41%	'would like more of the lessons'

See online resource:

www.education.gov.uk/lamb/slcn/joint-working/ellcis

The study concludes, 'They [the pupils] had significant language and communication impairments, but were receiving little or no specialist support. The results show that adolescents with language and communication impairments can show improvements in their language abilities after relatively short periods of therapy.'

Now answer the following questions and note the answers in your learning log:

- 1. How strong is the evidence obtained from the design of this research? What would improve the strength of the evidence?
- 2. What additional information might you seek about the study if you were to consider introducing something similar into a school or cluster?
- 3. What would be the pros and cons of having the interventions described undertaken by teachers from the school after training rather than trainee speech and language therapists? [It is assumed that the pre and post testing would be better carried out by SLTs]
- 4. This is a targeted intervention compared to the whole school approach described in Task 1. Which messages from the first article would be equally applicable to the introduction of a specialist intervention to your school or cluster?

See Appendix 3 for suggested answers.

Evaluation learning from the Unit

To check your learning with the perspectives of others, consider this passage from Leyden et al, 2011, in relation to your role and responsibilities as a specialist on SLCN in the school:

'There was a strong feeling that an SLT should be included in the team implementing a WSA, particularly to deal with questions and more advanced level training. Screening and identification of SLCN was perceived as very 'technical' and the domain of the SLT. Coordinators found this aspect of the WSA the most challenging. Although some school staff felt that they should be able to screen and 'diagnose' children with SLCN, this had not been the intention. Rather, the aim was to raise awareness of SLCN and to identify which children needed to be referred to SLT or other services.'

1. Write a note in your log reflecting on the statement 'The teacher's role is simply to identify which pupils with SLCN should be referred to other services.'

2. Write in draft two slides of a presentation to a school staff meeting. One should briefly explain your role as the specialist on SLCN, the other should briefly explain any role for the other teachers in school in identifying pupils whom you might support.

Show your slides to the SENCO or a member of the Senior Management Team and
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ask them to comment on the appropriateness of what you have written.

Appendix 1

	Teachers	Speech and language therapists
Knowledge of use of language in the classroom and teachers' communication with pupils		
Knowledge of pupil-to- pupil use of language		
Knowledge of national curriculum and specific vocabulary related to it		
Detailed knowledge of individual pupil's SLCN		
Knowledge of specific strategies for teaching grammar, vocabulary, narrative		
Experience in assessing levels of receptive and expressive language and language use		
Trained to work with large groups		

Trained to work with small groups/individuals	
Trained to work with parents and carers in initial training	

Appendix 2

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	Teachers	Speech and language therapists
Knowledge of use of language in the classroom: teacher communication with pupils	Trained in this	Not usually trained on this
Knowledge of pupil-to- pupil use of language	Trained on this	Likely to have had substantial training on communication with peers
Knowledge of national curriculum and specific vocabulary related to it	Not normally	Will need support from teachers
Detailed knowledge of individual pupil's SLCN	Depends on depth of involvement in the assessment/ dissemination of assessment results	Depends on depth of involvement in the assessment/ dissemination of assessment results
Knowledge of specific strategies for teaching grammar, vocabulary, narrative	More likely in primary than secondary	Will have these as standard
Experience in assessing levels of receptive and expressive language and language use	May have this	Will have this as standard
Trained to work with large groups	Trained	Not trained
Trained to work with small groups	May have training	Trained
Trained to work with parents and carers in initial training	Limited training	Substantial training

Appendix 3

- 1. Neither intervention was shown to be better than the other, but there were significant improvements for the whole group in receptive vocabulary, recalling sentences, and non-literal comprehension. Word classes and receptive grammar just failed to reach significance on the post-tests. The reasons for such small improvements may be due to the wide range of ability in the young people, the relatively short intervention period (six weeks), and the possible lack of sensitivity in the outcome measures. The researchers felt the study could have been strengthened by using a control group. This can often be a difficult matter for schools: no one wants to withhold what looks like a useful intervention from some pupils. Alternatively, what is known as a cross-over design might have been used. If, for example, two groups are involved, one has a period of intervention and a period with no intervention; the other has a period of no-intervention, followed by the intervention. The changes/progress in each period are observed and measured.
- 2. You might like to know more about the assessments that were used to determine the language levels of the pupils and the implications of these for learning in the classroom. You might like to know more details of the interventions and how these relate to the pupils' curriculum.
- 3. The trainee SLTs would have benefited from their experience of working with secondary aged pupils, but the teachers would have missed the opportunity to provide interventions aimed specifically at improving vocabulary and narrative skills and to develop their own professional skills in this area.
- 4. Nearly all of the aspects of best practice from the first article would apply to implementing a targeted intervention in your school.