Sure Start Local Programmes (SSLPs) supported children under 4 and their families by integrating services. This study reviewed the policy and practice issues that arose relating to improving language development for children in SSLP areas. The researchers sought to identify good practice to foster the development of young children’s language skills. Such lessons for good practice might have application in Children’s Centres.

Key findings

► All programmes had employed a Speech and Language Therapist (SaLT) at some stage. The time commitment of SaLTs varies widely between programmes and in several SSLPs their input has ended or is being reduced.

► All the SaLTs are enthusiastic about implementing the newer concepts of prevention. Midwives are enthusiastic about their new role and parents value the insights about their baby’s efforts to communicate.

► Bookstart is widely used and supported by staff but in some cases insufficient time is available for modelling the optimal use of books. Some SSLPs are knowledgeable about the importance of developing rhyme awareness but there is less evidence of other pre-literacy work.

► Close collaborations between early year’s library workers and SaLTs are evident. Links between SSLPs and schools are found in the SaLT support for ‘Ready for Nursery’ groups.

► SaLTs, in most SSLPs, work closely with SSLP staff and teachers. Practitioners value their joint learning with SaLTs and feel that it informs and improves their practice. Similarly parents endorse the value of the knowledge they gain from SaLTs.

► The early identification of children with difficulties in language or communication is one potential benefit of settings like Sure Start. Some SSLPs collaborate with SaLTs to improve their awareness of how to recognise these children but there remains scope for developing this function further.
Background

Sure Start local programmes were community based and served neighbourhoods with an average 400-800 children under 4. By March 2004 524 programmes had been established over 6 rounds. The National Evaluation of Sure Start (NESS) has assessed the impact, implementation, community characteristics and cost effectiveness of SSLPs by examining the first 260 programmes. This study was part of the Implementation module of NESS, which examined how SSLPs were set up and delivered, what services were provided and how these were organised locally.

A central aim of SSLPs was to ensure that children would be ready and able to benefit from their education when they start school. The ability to use spoken language to communicate and the acquisition of pre-literacy skills are important components of school readiness, but children in areas of social deprivation often lag behind their more fortunate peers in these areas of development. The extent to which SSLPs can and do facilitate improvements in language and pre-literacy is, therefore, an important issue.

The Changing Role of Speech and Language Therapists (SaLTs)

In the past SaLTs worked primarily within a clinical model, treating children on a one-to-one basis. Although appropriate for children with severe problems, this may not be the best model for the large number of children with delayed language acquisition, who suffer from inadequate opportunities to learn rather than specific disorders.

As a result, there has been growing interest in prevention and the Royal College of Speech and Language Therapists (RCSLT) now emphasises a public health approach, advising that SaLTs should devote more time to the promotion of optimal language development, putting into practice the evidence already available about the mechanisms of language acquisition. This could be done either directly, working with parents, or indirectly, working with other staff in a training, support and consultancy role. The study indicated that SaLTs were key players across the span of ages and could play key roles at several stages.

Aim

The aim of this study was to determine the extent to which the emerging knowledge about speech, language and pre-literacy is being utilised in SSLPs, and the role played in this process by SaLTs. The approach advocated by the RCSLT represents a radical shift in professional practice and it was important to ascertain firstly whether it is feasible and secondly the readiness of SaLTs to espouse this. The study also sought to identify examples of good practice and to analyse how SSLP staff approached issues of language and pre-literacy.

Methodology

The study looked at 15 SSLPs (and 3 pilot sites) selected to give a spread according to size, ethnic mix, urban or semi-rural locations and outcomes for language development in three year olds (derived from the NESS Impact study). Fieldwork included interviews with Programme Managers and practitioners from a wide variety of disciplines. The researcher observed groups and met parents.

Interventions working directly with parents and children

The newborn period and the first months

Many practitioners were involved in Sure Start programmes and some took key roles during particular periods of a child’s life. During the newborn period and in the first months, health visitors and midwives worked together.

Many midwives now see their role as encompassing psychosocial issues and child
development as well as monitoring the pregnancy and supervising labour. In this study midwives in SSLPs reported a number of initiatives relevant to early language acquisition. They supported access to networks and services and, by introducing developmental ideas, established themselves and their profession with clients as “really something that was ‘quite nice’ rather than ‘what’s the point of that?’” Several midwives collaborated to set up a group where mothers could “talk about what was going on in their lives socially, which is not always good, they talk about depression, how they are feeling. Then they can keep coming up until the baby’s three months … when they’re depressed and when they’ve got new stuff going on at home.”

Health visiting is a universal service, though it does not provide exactly the same to all families. Parents attending the SSLP had opportunities to learn more about child development by observing their own and other children and benefited from the explanations offered by the Health Visitors. The Health Visitors’ supported families’ sustained involvement in Sure Start and other local services and facilitated family engagement in wider interactive networks.

**Using books to promote language skills and to develop an interest in books**

Books were used in many SSLPs in Stay and Play groups (encouraging parents to use strategies to promote their child’s language) – for example, as a resource in the free play time in groups or modelled during a rhyme or story time. Among the most popular schemes is Book Start, promoted by a wide range of staff. Health Visitors took Book Start packs to families but often there was no time for them to model and explain early book use with young babies. Some nurseries and SSLPs had very good library facilities – parents appreciated suggestions about the creative use of books with very young children.

**Good practice involving families of newborns and during first months**

- A service called ‘Play in the home’ – Sure Start outreach workers and nursery nurses, supported and led by SaLTs, to model and teach strategies to parents and carers in the home.
- A series of ‘I Can’ books, which alerted adults to the skills of babies from birth.
- Creation of home DVDs about baby play and interaction.
- One SaLT used Brazelton’s work to justify her practice of informing parents about new babies’ communication skills.

**Good practice with books in SSLPs**

Weekly activities planned by early year’s librarians; showing parents how to make book bags, modelling the use of books and puppets, ‘Book Crawl’ which involved collecting stickers for each book borrowed and awarding certificates.

One SSLP had produced a DVD of story sharing with local parents set in the new Children’s Centre library. One family literacy outreach worker ran an 8-week ‘Words and Pictures’ course for parents and toddlers. One mother and baby swimming group had swimming bath books.

In some SSLPs they offered bilingual literacy opportunities (generally with minority ethnic populations), this included: bi-lingual story sacks, translating nursery rhymes into Urdu, and story telling sessions - however, for many language groups, if these occurred at all, they were intermittent and uncommon.
The role of early years librarians

Early Years librarians were popular with parents. They collaborated with other staff to run groups and story sessions in various locations (library, the Sure Start centre, nurseries and play groups). Librarians, aware that parents may have problems with literacy themselves, presented libraries as non-threatening places where parents and children would feel welcome. The children attending groups varied in age from a few months to five years and several library workers were developing more age focused groups.

Supporting families with young children

Involving Fathers

Fathers are often neglected yet play a crucial role in child rearing. Only a small number of observations could be made in the present study about fathers’ inclusion, particularly with regard to young babies. Many women believed men had little interest in children’s development but one SSLP member questioned this “...men do want to know more about children’s development from before birth.” One Children’s Centre had plans for parents to be able to register births at the Centre so that fathers could establish contact.

Most of the emerging groups were more focused on men with toddlers and older children rather than with newborns. Pictures on the walls showed men playing, feeding and supporting children. The timing of sessions was important – weekday activities during office hours often meant that fathers were excluded.

More could be done to engage fathers in developing their children’s language development. Children’s Centres should consider training all staff in the importance of fathers being involved with language development issues and also consider possible methods for facilitating such involvement.

Meeting the needs of bi-lingual families

SSLPs were generally well aware of the particular challenges involved in working with families whose first language is not English. Contacting and engaging parents in multi-cultural settings can be difficult. A SaLT emphasised that the need was not just for interpreters but for people who understood language acquisition: “We’re getting more families now where we are having to work via interpreters and it feels as though maybe it’s not as effective …. [we need] a parent group with those people who don’t speak English or Bangla, have the interpreters there and go through stuff so that they can work with their children.”

Many SSLPs had staff that were not qualified as SaLTs but had been trained by an SaLT in early language acquisition. For example, in three SSLPs, bi-lingual SaLT assistants worked with Indian subcontinent heritage families who had been settled for several generations. In another SSLP SaLTs had trained the nursery workers to run Stay and Play language activities.

Meeting the needs of parents

SSLP staff understood the issues facing the people living in their areas: mental health problems, ethnic, linguistic and cultural pressures, domestic violence and financial difficulties. They helped children by supporting parents with limited emotional resources for their children.

SSLPs promoted adult activities like simple art and craft or cooking which could encourage parents, with negative memories of education, to feel comfortable in a regular classroom setting; this could lead on to other more ambitious study. Many parents had ambitions for their children but needed guidance in how best to interact with and support their child’s learning. Ideas that seemed simple and obvious to the staff were often a revelation to the parents.
Identification and management of language delay

SSLPs were asked how they identified children who might have significant delay in speech and language development. The commonest mechanisms were: by health visitor suspicion; observations by childcare practitioners; parental referral (though it is often difficult to determine whether parental concerns are first raised by professionals). The information and raised awareness provided by SSLPs about language issues seemed to result in an increased number of referrals by parents though this was not the case in all programmes.

Good practice involving adult education and children’s literacy development

The Local Authority ran an adult education course linked to Sure Start called “Early Start”, aligned with ‘Birth to Three Matters’ and the ‘Skills for Life’ adult basic skills agenda. For children under four and their parents, it has 3 aims:

- helping parents enhance their children’s early development
- helping parents develop their own skills
- providing relevant activities for babies and young children

Children spent time in the educare crèche then had a joint activity with their parents. Child care practitioners and two SaLTs were involved. Parents chose books for their children, and made puppets to link with the story. They then wrote an ‘Early Start Diary Sheet’. A male Sure Start practitioner gave information about a computer course and encouraged parents to develop themselves further. Two parents admitted difficulties in committing to strict timetabled courses but enjoyed this one because it was timed so that older children could be dropped off at school first.

Good practice in recognising and managing language delay

- Awareness of language development is encouraged through good information about speech and language between 0-4 years that is easily accessible to parents and staff.
- Speech and language is embedded in activities throughout the programme. SSLPs are sensitive to possible stigma - parents might interpret language delay in their children as criticism of their parenting.
- The training provided for staff is adapted for their roles:
  - General knowledge about communication for all staff.
  - Practical and applied knowledge for frontline staff working directly with children.
  - Extra training and support for those who needed to develop more skills so that they could offer advice and raise the overall standard of communication with children.
  - Different ways of identifying children with delayed language, including observation in different settings, detection by health visitors or support staff and response to parent concerns.
- There is easy and flexible access to SaLT opinions.
- Barriers such as waiting lists for SaLT assessment are minimised.
- Local provision for hearing tests encourages parents to have their child’s hearing checked and to rule it out as the reason for language delay.
- There is seamless multi professional assessment for children with complex needs.
Interventions working with groups, classes and courses

A variety of groups catered for prebirth children right through to age four and above. Some groups and classes were age specific; others spanned the pregnancy and the child’s first and second year of life. The latter focussed on helping young lonely parents to build relationships and make friends. Some groups were modelled on established programmes such as the Canadian Hanen courses and PEEP (Peers Early Education Partnership: http://www.peep.org.uk/). All SaLTs contributed to programmes for parents to increase knowledge of speech and language development. SaLTs visited playgroups, antenatal groups or parenting classes and had input to basic skills adult education classes.

• A baby group called ‘Baby Play’ provided in parallel with postnatal examination midwife clinics - play workers at this group promoted early book use and play.

• Several playgroups for parents and babies in their first year were run by Sure Start play workers – for example a 0 to 10 month olds’ PEEP group session included songs and rhymes. Staff explained to parents how these could develop phonological awareness.

• One SaLT ran “Incredible Years” parenting programmes which incorporate communication skills in speech and language, using indirect modelling and good practice in communication linked to behaviour management.

Play and Learn Groups

The term “Play and Learn” was used to describe various groups in which modelling of strategies to promote language for parents took place. There were wide variations in the frequency, quality and content of formal learning opportunities and the extent to which they formed part of a coherent planned programme.

Good practice involving group work and courses

In one SSLP the programme manager or the educational psychologist ran a four-session course for parents and practitioners called Bright Start. This emphasised the importance of speaking, listening and language development and the links to behaviour and cognitive development. It taught specific strategies used by good teachers and by parents whose children were successful at school, e.g. maintaining and extending interaction with children, such as the use of open questions and of feedback to encourage children’s thinking - e.g., ‘what do you think would happen if…?’ and ‘Tell me how you did that’.

For parents who found regular attendance difficult, some SSLPs also offered “drop-in” sessions. Examples of group work included:

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Good practice in “play and learn” sessions

A drop-in session: songs and rhymes with actions with children sitting on their parents’ knees. Staff pointed out behaviours such as anticipation of a familiar part of a song. Puppets were used to demonstrate the action of the mouth and tongue when words are formed.

A drop-in run by the SaLT: she worked with parents and children where concerns about language had been raised. She modelled and explained good eye contact and clear simple sentences, and used song and rhyme to emphasise sound discrimination.

Use of songs: a song time for parents and children with percussion instruments. The group also sang two songs from the Jolly Phonics scheme. All parents had printouts of the songs.

One “Ready for Nursery” Group encouraged awareness of print with children of two years and nine months by using name cards which the children were helped to identify.

Modelling of story telling with books took place at several library based activities, for example showing how flaps on the pages could be lifted to support children’s anticipation and memory of stories.

Getting Ready For Nursery Groups

Some SSLPs ran transition groups – for example, in one SSLP all children of two and a half were offered a Sure Start play session which used the ‘Birth to Three’ framework. Some children were offered very focused “Ready for Nursery” sessions - for example if parents and practitioners had concerns about the child’s speech and language development and confidence. The child’s needs could be assessed before going into the nursery.

The practices in “ready for nursery” group were quite tough for some parents. For example, some 3 year olds were still receiving diets suitable for babies and were regularly offered a feeding bottle, parents were surprised by the requirement for hand washing at snack time, and some parents were embarrassed by the routines of songs and actions.

Teachers working with Sure Start

Some SSLPs had or shared a qualified teacher within their centre whilst others worked collaboratively with teachers from local schools. There was a wide variation in both the knowledge and the interest of school teachers in early language acquisition – some teachers were lacking in knowledge about normal language acquisition.

Some teachers in school settings did not have a background in birth to five year old pedagogy. Several Local Authorities had seconded teachers to SSLPs to study “Birth to Three” issues. In one area, advisory teachers worked with nurseries on developing the Foundation Stage. Such measures develop a pool of Foundation Stage teachers, some of whom may apply for subsequent Children’s Centre qualified teacher posts.

Teachers helped parents and practitioners to understand language development, recognise their children’s achievements, interact with their children and model language. Some teachers had become interested in how SSLPs were affecting language development. For example an SSLP was comparing the language and development of school entrants who had or had not attended SSLP facilities. There was anecdotal evidence of positive effect for children who had experienced Sure Start.
Inter-disciplinary collaboration and training

The importance of professional networks, referral processes and staff training is widely recognised and was reinforced in this project. Child care practitioners benefited from working alongside one another and moving between different settings as a way of developing professional skills.

Many SSLPs had run a generic training for all SSLP practitioners to raise awareness of speech and language development. The training generally included practitioners who had direct responsibility for child care but in some programmes included all staff - for instance kitchen and cleaning staff - who would learn how they could support a child with delayed speech.

Child care staff valued their learning from SaLTs (and other professionals) who worked alongside them to develop practice.

Several difficulties and obstacles were also observed:

• Duplication of effort – for example, in one area NCH (the Children’s Charity), the Primary Care Trust and the Local Authority were all putting staff through diversity training.
• Release of staff for training was often problematic.
• Concern over the sustainability of SaLT input in Sure Start areas. Because of the instability of the service agreements, many SSLPs no longer had a direct relationship with a SaLT. Ongoing professional development of staff suffered. New staff had to take on duties such as family visiting in spite of having received no training in speech and language issues.
• Changes are needed in professional education. Early Years staff need expertise drawn from a range of disciplines. For Health Visitors supervision (as used in social work and psychotherapy) would be valuable.

The role of SSLP managers

Programme Managers’ leadership generally focused on a generic community building approach. All the managers had worked with SaLTs in their programme and the SaLT had been key in developing the awareness of early language amongst staff. However, many managers believed that by supporting the development of the community, especially through the provision of activities involving parents and children, interaction with children would be improved and consequently children’s speech and language development would be enhanced. Thus there is a distinction between on the one hand the view that community development and parent support would be the most potent way of helping children’s development and on the other, the view that a more focused educational approach would be more powerful.

Good practice in collaboration and training

• training in specific strategies that SaLTs modelled for practitioners while working with a child or children in a nursery or home setting;
• a SaLT and childcare staff engaged jointly in practitioner research to enhance language development with children;
• ongoing incidental observation of practice by other practitioners such as a SaLT, Teacher or another skilled practitioner;
• SaLTs in SSLP centres were easily consulted with concerns around language development;
• nursery nurses worked on case studies with a SaLT to increase their knowledge of language development.
Recommendations

• All early years programmes serving deprived areas should have an agreement with SaLT services to ensure that the good practice observed in this study can be maintained. In particular there should be sufficient SaLT input to support staff training and development in language and pre-literacy promotion and in the early detection of children with serious communication disorders.

• SaLTs should train and offer support to midwives, health visitors and early years staff so that they can continue to offer parents demonstrations of how infants communicate and respond as key aspects of healthy development.

• There should be regular opportunities for teachers and SaLTs to collaborate and learn from each other at all levels.

• The contribution of early years librarians should be examined and developed further.

• Although Bookstart is well established its full benefits are not being realised and staff would benefit from more training and more time so that they can model the use of books with parents.

• Pre-literacy and early literacy need more attention, using evidence-based approaches such as the ORIM approach 4

• The role of Early Years staff in early identification of children’s language difficulties should be developed

• Language acquisition and pre-literacy skills should be part of any early years curriculum.

• The importance of understanding language and literacy issues should be emphasised in Children’s Centres with regard to staff selection, programme planning, training and evaluation.

Further information

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