WHAT WORKS AND WHO CARES?

The professional response to development of a database to promote the adoption of evidence based interventions

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The context

• Evidence based practice on (almost) everyone’s agenda
• A rod for your own back or an opportunity to develop strengths?
• Role in SLT (NHS perspective)
• Role in schools (Head teachers as commissioners)
• Government initiatives (Foundations)
  – Early intervention Foundation
  – Education Endowment Foundation
Oral language interventions

Moderate impact for low cost, based on extensive evidence.

What is it?

Oral language interventions emphasise the importance of spoken language and verbal interaction in the classroom. They are based on the idea that comprehension and reading skills benefit from explicit discussion of either the content or processes of learning, or both. Oral language approaches include targeted reading aloud and discussing books with young children; approaches which explicitly extend pupils’ spoken vocabulary; and interactive approaches to developing reading comprehension with structured questioning. All of the approaches reviewed in this section support learners’ articulation of ideas and spoken expression, such as Thinking Together or Philosophy for Children. Oral language interventions therefore have some similarity to approaches based on Meta-Cognition which make talk about learning explicit in classrooms and to Collaborative Learning approaches which promote pupils’ talk and interaction in groups.

How effective is it?

Overall, studies of oral language interventions consistently show positive benefits on learning, including oral language skills and reading comprehension. On average, pupils who participate in oral language interventions make approximately five months additional progress over the course of a year.
And the “What works” (WW) for children with speech and language needs and the Communication Trust WW interactive website:

[Link to website: www.thecommunicationtrust.org.uk/schools/what-works]
The people

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• Sue Roulstone
• Yvonne Wren
• Biao Zeng
• Geoff Lindsay

Moderating group

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• Catherine Hills
• Shona Crichton
Research to practice...


Bercow review of provision for CYP with SLCN

More specifically just one report: ‘What Works: Interventions for children and young people with SLCN’

The original content of What Works came from the outcome of this report. The Trust then worked with the authors to translate it into an online virtual library to ensure as many practitioners as possible can access the information.
And the “What works” (WW) for children with speech and language needs

"What Works": Interventions for children and young people with speech, language and communication needs

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All the other Better Communication Research Programme reports:
http://www.education.gov.uk/researchandstatistics/research/better
Practitioner experience

• 536 complete responses to on-line survey about practice;
• 3 most commonly used interventions then examined in detail;
• 75% of SLTs reported their most common age ranges were within the 2-7 years range;
• Primary SLCN with language as the primary difficulty was the most common area reported (36%). Primary SLCN with speech as the primary area was reported by 19% and Autism Spectrum Disorder (ASD) by 11.4%;
• Mainstream schools were reported most frequently (35%) followed by community clinics (17%) and special schools (12%);
• 38 published programmes and 126 home grown specified. A further 163 ‘Other published programmes’ mentioned without details.
Integrating evidence base and the practitioner experience

The *What works for SLCN Resource*;
57 interventions either currently in use or published in the research literature plus 3 “Up and coming”;
3 (5%) were found to have the strong level of evidence, 32 (56%) had moderate evidence and 22 (39%) had indicative evidence;
Most interventions focus on work with preschool and primary school children;
30% of the interventions were specifically relevant for improving a child’s speech, 39% targeted language, and the remainder were aimed at a combination;
Five were universal interventions, 13 were clearly targeted and 16 specialist.
What is *What Works*?

- *What Works* is a moderated virtual library of evidenced interventions to support children’s speech, language and communication.

- *What Works* supports practitioners to find the most appropriate interventions for children and young people by providing an overview of the evidence base for each intervention.

- *What Works* aims to support decision making not determine it.
How does *What Works* work?

- The virtual library allows users to search for interventions by target group, age range, focus of the intervention, who it’s delivered by and type of format.

- The evidence for each intervention is rated as ‘**strong**’, ‘**moderate**’ or ‘**indicative**’ as determined by an academic panel of experts.
TALK OF THE TOWN is an integrated, community led approach to supporting speech, language and communication in children from 0-18 years in south Manchester;

**Universal**
- Elements of “Thinking Together” at the universal level (see intervention # 53)
- Audit of practice using the BCRP Communication Supporting Classrooms Observation Tool with guidance on developing best practice. Use of Living language vocabulary approaches (#24)
- Use of word wizard approaches to support vocabulary at universal and targeted levels (#57)
- Use of “Talking Time” nursery intervention. (# 50)
- Teaching children to listen (#52)

**Targeted**
- A narrative intervention by Becky Shanks Narrative Intervention (# 1)
- Talk Boost (#48)
- Focused stimulation techniques (#15)
- Comprehension monitoring approaches within mainstream classrooms (#5)
- Elements of colourful semantics programme (#3)
- Language for thinking for children in key stage 2 (#20)
- I CAN secondary talk (#18)
- Joffe vocabulary enrichment programme (#58)

**Specialist**
- Makaton training for staff to use with pupils with SLCN (#25)
- Psycholinguistic framework to support phonological awareness (#41)
What the WW does do..

- Describe a range of programmes that can be used to support individuals, targeted groups or whole cohorts of children to improve their speech, language and communication skills
- Detail who the interventions are aimed at; who they can be delivered by; where to go to for more information and what the current evidence base is
- Bring together information that reaches across professional groups - recognising the vital role of the speech and language therapist but the vital role played by wider team including universal practitioners, special educational needs co-ordinators (SENCOs), specialist teachers, pastoral care and parents
- Promote interventions where the evidence base and professional opinion suggests that implementing the programmes will support positive outcomes for children and young people
- Signpost to other sources of information that may help
What it does NOT tell you..

• Promise to be comprehensive at this stage. There are many good interventions and programmes that haven't been included because we don't know about them yet.

• Make unsubstantiated claims. The evidence base for each intervention is outlined. We welcome additional evidence or feedback on any of the interventions listed within this database to further develop the evidence base.

• Focus on guidance for commissioners on a wider population level. While these approaches may be used in schools or school clusters the database doesn't focus on providing support for Local Authorities or health commissioners. The Commissioning Support Programme (CSP) tools and Centre for Excellence and Outcomes work provides further guidance on these.
Key principles to consider before using an intervention

There are some things that all schools should do before they start to use an intervention. Find out more here.

Please click here to view the FAQs.

Choose from the options below to find interventions that meet your criteria, you can select all steps, one or two, or none at all. Then select from the results those you wish to read more about.

Click here to read about the key principles to consider before using an intervention. We also want to know your feedback on the site to help improve it, please click here to complete our short survey.

Or if you know the name of the intervention, search alphabetically below:

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z
meeting your criteria
Key principles to consider before using an intervention

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Core Vocabulary

Description of aims and objectives:

The Core Vocabulary approach (Crosbie, Holm & Dodd, 2005) is designed for use with children who have an inconsistent speech disorder (Dodd, 2005), i.e. many of their words are produced with inconsistent pronunciations but there are no signs of developmental verbal dyspraxia. Generally these children do not tend to have an underlying learning or language difficulty.

The idea for this approach with this specific group of children is that it targets the underlying difficulty in processing speech, rather than just trying to change mistakes children make in how they say particular words and sounds. In this way, there will be a system-wide change in a child's speech rather than just improving how children say individual speech sounds.

Below is the criteria for this intervention

Target Group

- **Speech**
- Language
- Communication
- Complex needs

Age Range

- **Preschool**
- Primary
- Secondary
**A worked example: Shape coding**

<table>
<thead>
<tr>
<th>Target Group</th>
<th>Age Range</th>
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<tbody>
<tr>
<td>Speech</td>
<td>Preschool</td>
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<tr>
<td>Language</td>
<td>Primary</td>
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<tr>
<td>Communication</td>
<td>Secondary</td>
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<td>Complex needs</td>
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<table>
<thead>
<tr>
<th>Focus of Intervention</th>
<th>Delivered By</th>
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<tbody>
<tr>
<td>Universal</td>
<td>Specialist</td>
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<tr>
<td>Targeted</td>
<td>Teacher</td>
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<tr>
<td>Specialist</td>
<td>Assistant</td>
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<td></td>
<td>Other</td>
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<table>
<thead>
<tr>
<th>Format</th>
<th>Evidence rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manual</td>
<td>Strong</td>
</tr>
<tr>
<td>Approach</td>
<td>Moderate</td>
</tr>
<tr>
<td>Technique</td>
<td>Indicative</td>
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</tbody>
</table>
Description of aims and objectives:

- Based on Lea’s 1965/1970 Colour Pattern Scheme and on Colourful Semantics (Bryan, 1997), shape coding has been developed by Ebbels and colleagues, working with children with severe speech and language difficulties, to ‘show’ the structure of a sentence thus linking the structure of a sentence (syntax) and its meaning (semantics).

- Shape coding uses a combination of shapes, colours, and arrows to “code” phrases, parts of speech, and words and word endings (morphology), respectively (Ebbels 1997, 2007).

- Shape coding is a tool to support children’s learning (rather than a programme), that can be gradually withdrawn as children are independently able to use or understand the grammatical structures.
Delivery:

• Originally intended for one to one direct therapy with children in primary and secondary “special” schools for children with severe speech and language difficulties, it is now supported by training (www.moorhouseschool.co.uk/shape-coding-course). Timing and duration are not prescribed but in Ebbels et al., 2007 all pupils received nine individual weekly therapy sessions in a quiet room with the first author, which lasted approximately 30 min each (a total of 42hr), in their normal school setting.
Evidence:

- The majority of studies are descriptive case studies but Ebbels has developed the intervention methodology further using a randomised trial with blind allocation (Ebbels, van der Lely and Dockrell (2007). Clearly this approach has good face validity and shows promise as a programme. The shape coding approach has a moderate evidence level. Within the evidence are examples of significantly positive outcomes for children with severe speech and language difficulties. It is therefore a useful approach to implement where appropriate.


• Lea, J. (1965) A language system for children suffering from receptive aphasia Speech Pathology and Therapy, 8, 58–68.

• Time to look at the WW website...

• Practice session

• How has it been used in your experience (SLTs, EPs, Teachers)?

• Role in commissioning – examples?
DEVELOPMENT OF THE WEBSITE
Who was consulted during the development of the What Works site?

• You! – a survey was run by RCSLT with its members
• 65 SLTs completed the survey; 43% worked in schools
• Most respondents were employed by the NHS
• 70% felt What Works was completely relevant,
• 92% felt it was completely or mostly clinically relevant
• 84% felt it completely or mostly reflected current and previous research
• 93% felt it was completely or mostly accessible to SLTs.
And we’re continuing with the consultations...

- Evaluation surveys from across the pilot year completed by registered practitioners

- Work with Hubs
Some of the changes made in response to consultations...

• Changes to the home page carousel
• New sections role of the SLT including importance of setting and evaluation targets
• Include importance of working with parents and independent SLTs
• Links to further organisations in info for parents
• Making it clearer who delivers intervention
More changes....

• More detail in ‘where to find more info’
• Expanded Glossary
• Put in links to similar databases and resources both in and out of our sector
• Expanded Information for Commissioners
• Link to NHS Evidence

• Issue of difference between strength of evidence and outcomes for children – we are still working on this!
User survey responses

• We carried out a number of surveys asking whether the website was met its original aims
• We also collated information on who was using the website
• And whether they felt it had impacted on practice
Survey responses...

Does it meet aim 1?

- Describe a range of programmes that can be used to support individuals, targeted groups or whole cohorts of children to improve their speech, language and communication skills.
Survey responses...

**Does it meet aim 2?**

- To bring together information that reaches across professional groups recognising the vital role of the speech and language therapist but also that played by a wider group of professionals.
Survey responses...

Does it meet aim 3?

• To signpost to other sources of information that may help
Survey responses...

Does it meet aim 4?

• To detail who the interventions are aimed at; who they can be delivered by; where to go to for more information and what the current evidence base is
Survey responses...

**Does it meet aim 5?**

- To identify interventions where the evidence base and professional opinion suggests that implementing the programmes will support positive outcomes for children and young people
Who uses What Works?

Practitioners

- Teaching assistant
- Head/school leader
- SENCo
- EYP
- Other teacher
- SLT
- Health worker
- EP
Has using What Works impacted on your work with children and young people with SLCN?
Based on most recent feedback...

• Web and design changes
• Implementing the new evidence criteria
• Developing What Works for training programmes
• Support the VCS to write up their research to further the evidence base
• Investigating child outcomes
• Develop the ‘In Practice’ section
The Communication Trust has worked with the Better Communication Research Programme to develop the What Works database of evidenced interventions to support children's speech, language and communication. What Works is endorsed by the Royal College of Speech and Language Therapists.

The What Works database was launched as a prototype with around 60 interventions included. We are currently undertaking an evaluation survey of What Works as we move towards the end of our year-long pilot. We are very keen to hear from key stakeholders and practitioners how What Works has impacted on your practice and how you think we might improve the site. We're always interested in your feedback, and would be extremely grateful if you could complete our online survey.

Below you can find answers to frequently asked questions about What Works. If you have any other questions, please email enquiries@thecommunicationtrust.org.uk

To find out more about What Works including how it has been developed and how to submit an intervention, please visit our Frequently Asked Questions page or follow the links in the carousel above.

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Please note: The What Works website focuses on interventions. It is important to note that other approaches are essential in order to effectively support children with speech, language and communication needs (SLCN), particularly workforce and professional development packages. Practitioner knowledge, skill and confidence in supporting
We’re continuously aiming for...

• More practitioners signed up – a wider range of professionals
• Creating a ‘community’ of What Workers – practitioners using the site as a way to find out more and give feedback on different interventions and approaches
• Gathering feedback – this can be done directly to The Communication Trust (enquiries@thecommunicationtrust.org.uk)
• Building the evidence base through continued submission of evidenced interventions
New interventions

• Anyone can submit an intervention for review; details of how to do this and deadlines are on the What Works site.
• We have detailed criteria available to help you decide if an intervention has a suitable level of evidence to be included on the database. All documents are on website – let us know if anything is unclear.
• There is also an appeals process.
There are currently 7,250 practitioners registered with What Works

- How did you hear about What Works?
- Who has registered?
- Has anyone submitted an intervention?
- Would anyone like to?
What next ....?

- How can we engage the profession and support the development of the evidence base?