



22 May 2018

**The Royal College of Speech and Language Therapists response to the Department of Education's consultation on the proposed framework of future provision for children in the early years with SEN.**

The Royal College of Speech and Language Therapists (RCSLT) are grateful for the opportunity to respond to the above consultation document. RCSLT is the professional body for speech and language therapists (SLTs), students and support workers working in the UK. The RCSLT has over 17,000 members (around 500 in Northern Ireland), including nearly 95% of the speech and language therapists working in the UK. We promote excellence in practice and influence health, education, employment, social care and justice policies.

Speech and language therapists have a major role in working directly with children, young people, and adults as well as supporting and training other professionals in working with speech, language and communication needs (SLCN).

The RCSLT welcomes the publication of this framework and the recognition of the particular importance of providing high quality early intervention and education for children with SEN to ensure they have the best start in life and improve educational outcomes. We support the emphasis throughout the document that working with partners in health and social care is the best way to develop integrated support to meet the needs and protect the rights of children with SEN.

The RCSLT has opted to respond to this consultation by letter as opposed to completion of the online questionnaire. For ease of reference however we have identified and commented on the underpinning principles and six specific proposals listed in the document.

If you would like any further information then please do not hesitate to contact RCSLT.

Yours sincerely,

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### **Early years SEN and the role of speech and language therapy**

Speech and language therapy (SLT) is a fundamental service for children with special educational needs (SEN) and their parents. Speech and language therapists (SLTs) provide crucial communication support and ensure safe eating, drinking and swallowing. Early intervention to identify and support SLCN and eating drinking and swallowing difficulties (EDS) can help enhance children's lives, their prospects, health and educational attainment.

- SLTs assess, treat and support children with SLCN to communicate better. They work directly with young people, their families, and other professionals such as teachers to develop personalised strategies which support each child or young person's needs.
- SLTs also provide training to the wider workforce, including schools, and develop strategies so that they can identify the signs of SLCN and where appropriate, deliver interventions (with appropriate supervision) with children and support their parents with communication.
- SLTs support safe eating and drinking, including through direct intervention with those with more complex needs, and supporting parents and carers to help infants and children to manage their mealtimes as safely as possible.

### **Speech, language and communication needs (SLCN)**

Children with SLCN may experience difficulties with understanding verbal language, attention and listening skills, expressive language, vocabulary and word finding, speech sounds, fluency, and voice. These can be associated with other medical conditions (such as Autism Spectrum Disorder, cerebral palsy, learning disability, hearing impairment, and Down's syndrome).

Speech, language and communication needs can also exist without being associated with other medical conditions, and are known as developmental language disorder (DLD). Children with DLD will have SEN and will require tailored specialist support and teaching to access the curriculum which may or may not result in a formal statement of SEN.

There is a high prevalence of SLCN among children with an identified SEN.

- In Northern Ireland between 2012/13 and 2016/17 there has been a 25% increase in the number of children in mainstream school whose primary SEN is speech and language<sup>1</sup>.
- Approximately 8% of children, the equivalent of two children in every primary one classroom, will experience language disorders<sup>2</sup>.
- The number of children with SEN enrolling in special schools is increasing year on year in Northern Ireland <sup>3</sup>.

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<sup>1</sup> Department of Education NI School Census 2016/17: Figures include funded children in primary (including nursery, reception and year 1-7 classes) and post primary.

<sup>2</sup> Norbury CF, Gooch D, Wray C, Baird G, Charman T, Simonoff E, Vamvakas G and Pickles A (2016). The impact of nonverbal ability on prevalence and clinical presentation of language disorder: evidence from a population study. *J Child Psychol Psychiatr*, 57: 1247–1257. DOI: 10.1111/jcpp.12573

<sup>3</sup> Education Authority's strategic review of nursery school provision in special schools report (March 2018).

- Approximately 1% of children have the most severe and complex SLCN<sup>4</sup>.
- There are 11,000 children in Northern Ireland with a learning disability; 5,000 of these children are 0-7 years old<sup>5</sup>.
- Evidence shows that around 89% of people with a learning disability will require SLT interventions<sup>6</sup>.

### **Eating, drinking and swallowing difficulties**

Infants and children with neurodisability and those born prematurely are most likely to be at risk of feeding and swallowing difficulties (dysphagia), e.g. almost all children with cerebral palsy have dysphagia. However feeding difficulties can also occur in typically developing children.

**Principles underpinning the proposed framework: child-centred, developmental, parent-focussed, inclusive, flexible provision to meet pupil need, outcomes focussed, equity of access, partnership working, effective communication and effective transition.**

The RCSLT support all ten underpinning principles outlined in the proposed framework and have provided some more detailed comments on several of the principles below.

### **Inclusion and Equity of access**

The RCSLT support the principle of inclusion for children with SEN as long as that inclusion is meaningful. Appropriate communication support is paramount to meaningful inclusion for children with SEN to ensure that they can participate, learn and achieve in mainstream settings. We note the concerns and recommendation detailed in the Northern Ireland Audit office report on special educational needs support in mainstream schools<sup>7</sup> and regard this framework as an excellent opportunity to implement positive transformation in the early years for children with SEN.

Equity of access to special school provision is welcomed for children in Northern Ireland and we support the view that *quality* of provision is paramount to upholding the rights of the child. Language skills affect the quality of a child or young person's life. They:

- **Provide the building blocks for learning.** They provide the foundation for child literacy and are key to children's academic attainment.
- **Are central to social mobility.** The ability to communicate allows children and young people to fully participate in society, communicate their needs and achieve their potential.

<sup>4</sup> Department for Children and Families, England (2008). The Bercow Report: A Review of Services for Children and Young People (0-19) with Speech, Language and Communication Needs. Available at: [http://dera.ioe.ac.uk/8405/7/7771-dcsfbercow\\_Redacted.pdf](http://dera.ioe.ac.uk/8405/7/7771-dcsfbercow_Redacted.pdf)

<sup>5</sup> Webb &, Kelly (Jan 2018) Mencap NI Briefing Paper No.1. Creating brighter futures: early intervention for young children with a learning disability.

<sup>6</sup> Bradshaw J (2007). Chapter 6: Between You and Me. *Learning Disabilities Today*. Carnaby S (Ed). Pavillion: Brighton.

<sup>7</sup> NIAO Report (June 2017) Special Educational Needs available at <https://www.niauditoffice.gov.uk/sites/niao/files/media-files/Special%20Educational%20Needs.pdf>

- **Are closely linked with social disadvantage**, as well as youth offending and long-term unemployment in adulthood.

Every child with SLCN has a right to speech and language therapy in a setting that can support them to realise their full potential.

#### **Flexibility of approach and outcomes focussed**

The RCSLT support the flexibility of approach and outcomes-focussed principles outlined as part of this framework. We welcome the recognition that each child with SEN will have unique and evolving needs and that SEN supports should reflect this over time.

The RCSLT's position statement '*Caseload Management of Children's Services*' highlights that "*speech and language therapy intervention should be considered in the context of the best interests of the service user (in line with HCPC standards) and based on regular monitoring and outcome measurement*". Models of service delivery that are based on blocks of time or numbers of sessions are not supported by evidence and do not represent best practice. It further states that:

*"Every child's needs and contexts are different. Some will need ongoing intervention and others may only need a short burst of intervention.*

- *Speech and language therapy advice must address the child or young person's assessed needs rather than the availability of resources.*
- *Models of intervention and quantity of input should be based on available evidence and best practice.*
- *Regular monitoring and outcome measurement is essential to evaluate the effectiveness of speech and language therapy provision. This monitoring should be both at an individual child level and across a particular cohort/service."*<sup>8</sup>

#### **Do you agree with the proposed 2 phase programme of provision as outlined in the Educational Authority (EA) Early Years SEN Integrated framework of Support. Phase 1: EA Early Years SEN Inclusion Services (0 to 3 years). Phase 2: EA Pre-school SEN Provision (pre-school year)**

Yes. Members who participated in pre-consultation work with the EA have informed us that, the remit during the pre-consultation was solely around the second phase of the framework and changes to nursery school provision. As such, there are some real concerns that the extent and scope of work that speech and language therapists do with the 0-3 age group of children with SEN, hasn't informed the discussions of the development of this service. SLTs work closely with children with complex SEN from birth as part of multidisciplinary community teams and are skilled at supporting parents with the evolving needs of their child as they grow and approach their pre-school education.

<sup>8</sup>RCSLT Children's Services Strategy Position Statement: Caseload management in children's services, 2018 Available upon request from RCSLT NI.

### **Proposal 1: Communication**

**To develop clear and easily accessible information on EA early years provision and support for children with SEN.**

The RCSLT welcome the move for greater transparency and communication with parents and also for improved communication with health professionals to ensure that needs of children with SEN in the early years are being met.

In developing communications on early years SEN provision, information presented to parents should be child-focussed, in line with the underlining principles of the framework. Members have highlighted:

- the need to include links to the appropriate health professionals or teams with contact names and details as part of any EA information service for early years SEN.
- that information offered should be relevant and up-to-date and in an accessible form.
- the need to ensure consistency of messaging for parents between the EA and existing health provision.

Members working with SEN families would welcome more details on how this information would be gathered, disseminated and updated with health partners.

The RCSLT note the establishment of the Early Years Panel for all SEN referrals as part of proposal one: *“Establish an Early Years Panel for all early years SEN referrals from health and social care and educational psychology, with input from EA Special Education administration”*.

More detail about this proposed early years panel is required:

- Who would sit on this panel?
- What information would they be considering?
- Would this panel interact with health and social care professionals, other than educational psychologists and paediatricians?

The RCSLT’s (2017) report into the implementation of SEND reforms in England highlights a best practice example of the Brighton and Hove local area SEND service (which includes early years) which was highly praised by CQC and Ofsted. The SLT service worked extremely closely with the SEND team – an SLT sat on the SEND referral panel and also provided training for SEN case work workers on how to interpret SLT reports to avoid miscommunications<sup>9</sup>.

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<sup>9</sup> The Royal College of Speech and Language Therapists (2017) The SEND reforms in England: Supporting children and young people with speech, language and communication needs. The Brighton and Hove Case Study, Pg 18. Available at [https://www.rcslt.org/governments/docs/send\\_report\\_jan2017](https://www.rcslt.org/governments/docs/send_report_jan2017).

*In light of the rising numbers of children with SLCN as their primary SEN in NI, RCSLT recommends that an integrated approach be adopted by including an SLT on the early years panel SEN referrals panel.*

### **Proposal 2**

**Partnerships: To strengthen partnerships with health and social care as well as statutory, voluntary and other early years providers to develop more integrated provision and support.**

Partnership working is fundamental to meeting the needs of children with SEN and we strongly support the emphasis on partnership working in this framework.

Members have welcomed the specific plans under proposal two to establish joint educational/health working group and SEN forum, and support increased opportunities for joint staff working and staff training, providing joint training to parents and having joint care pathways.

However all members have noted that these proposals require a real commitment of time to be effective, which may pose capacity challenges for SLT services.

Similarly, plans to enhance relationships between mainstream and special school staff to facilitate continuous professional development are welcome. However, the ability to undertake additional professional development within existing service capacity will be limited. Therapists must balance time out of their settings against their clinical commitments to individual children and their families and their provision of training to education staff colleagues.

This is an issue that was reflected in the RCSLT's 2017 report on the implementation of the 2014 special educational needs and disability reforms in England. It highlighted that a third of speech and language therapists who responded to an independent survey reported capacity challenges in delivering the level of partnership working required by the reforms<sup>10</sup>.

Utilising existing health-based forums for sharing best practice which have a regional remit may offer some economies of scale in terms of time and region-wide representation.

**RCSLT recommends that to ensure regional equity the establishment of the proposed partnership groups should include adequate engagement with, and when established, representation of speech and language therapists from across the region.**

Links could be made, via the SLT heads of service forum, to existing SLT clinical networks. There are currently two clinical networks that are pertinent to early years SEN, the regional SLT children with disability network and also the regional SLT community group.

### **Proposal 3:**

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<sup>10</sup> RCSLT (Jan 2017) The SEND reforms in England: supporting children and young people with speech, language and communication needs.

**To provide earlier support for children aged 0-3 with SEN who are not yet in their pre-school year. This will be delivered by the Early Years Inclusion Service and will be provided to children and their parents. This will provide opportunities for children with SEN, and their parents, to access intervention and support in the period prior to a child's pre-school year. This will represent the first phase of early years support.**

The RCSLT support the outreach by the EA to children aged 0-3 years through this proposal. The importance of early identification and interventions for children with SLCN is illustrated in the 2018 RCSLT and ICAN report 'Bercow: Ten Years On. An independent review of provision for children and young people with speech, language and communication needs in England'.

*"Identifying and supporting children and young people's speech, language and communication needs (SLCN) accurately and early means fewer issues later on. Early identification is a well-evidenced, cost-effective approach shown to result in longer term economic benefits<sup>11</sup>"*

The RCSLT believes the provision of this service will require careful planning and collaborative working and must address the identification of and support for children with SLCN. More information is needed about the role the EA envisages for health professionals in their programme of offer for the 0-3 SEN service.

Key issues are:

- What training will be provided and by whom for the SEN inclusion service staff, will this have a core component on SLCN?
- Will there be links to ensure existing good practice is utilised in areas such as parent training and home-based advice services – such as Sure Start and the Early Years Transformation Projects, for example autism workshops?
- Collaborative working will be needed to ensure that consistent messages and supports are offered to parents by all the SEN services they come into contact with across education, health and the third sector.
- Will the stated plans offering parental training to build their capacity to deliver interventions directly, include speech, language and communication?
- Will speech and language therapy be commissioned as part of the stated plans to provide parent-child sessions in early years SEN settings?

***RCSLT recommends a regional coordinated approach between health and the SEN inclusion service to ensure equity and avoid causing confusion for families through conflicting or ill-timed advice for parents and children with SLCN.***

Below are some additional comments on the enabling principles under Proposal three where relevant.

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<sup>11</sup> RCSLT and ICAN (March 2018) 'Bercow: Ten Years On. An independent review of provision for children and young people with speech, language and communication needs in England' available at <https://www.bercow10yearson.com/wp-content/uploads/2018/03/337644-ICAN-Bercow-Report-WEB.pdf>

**The EA propose through the EA Early Years SEN Panel to work in partnership with parents to determine appropriate support for each child.**

It is unclear what ‘determine appropriate supports’ means in practice, for example what support or services this will relate to - education only or health and social care educational support services, or health and social care core services? If health supports are being included what role, if any, would SLTs who are working with children and their parents have?

**The EA propose to liaise with health and social care and other voluntary and community providers in relation to the complementary delivery of support to children with SEN aged 0 to 3 years and their parents.**

The RCSLT suggest that there is an opportunity to strengthen this proposal further by referring to ‘integrated’ rather than *complementary* delivery of support to children with SEN.

**The EA propose to enhance the skills of early years practitioners to identify, assess and meet the needs of children facing barriers to learning.**

The RCSLT welcome the recognition by the EA of the need to enhance the skills of early years practitioners. Local evidence backs up UK wide trends of the increasing numbers of children who start school with unidentified speech, language and communication needs:

- A project called ‘Now you’re talking Fermanagh’ in 2014 found that 57% of nursery school children in the three most deprived areas outside of Sure Start wards (and therefore not in receipt of any early intervention programmes) had speech and language difficulties.
- In a Limavady neighbourhood renewal area, a Limavady schools project entitled ‘Communicating Better Together –’ screened over 300 children entering four nursery and primary schools in 2014, and found that 68% had speech and language difficulties. The project was re-run in 2015 and found 62% of this cohort also had language difficulties.
- In 2016 a Save the Children poll reported that 70% of teachers in Northern Ireland saw children arriving in primary one struggling to understand simple sentences and 75% of teachers reported that children were unable to use full sentences<sup>1</sup>.

The Bercow Ten Years On report<sup>12</sup> identified that “understanding of speech, language and communication should be embedded in initial qualifications and continuing professional development for all relevant practitioners”. Save the Children have also highlighted the need for a focus on SLCN in early years workforce training locally. Their 2016 report<sup>13</sup> called

<sup>12</sup> RCSLT and ICAN (March 2018) ‘Bercow: Ten Years On. An independent review of provision for children and young people with speech, language and communication needs in England’ available at <https://www.bercow10yearson.com/wp-content/uploads/2018/03/337644-ICAN-Bercow-Report-WEB.pdf>

<sup>13</sup> Save the children (2016), READY TO READ: Closing the gap in early language skills so that



for “the introduction of time-bound commitments to raising the standards of the general early years workforce. An explicit focus on early language development needs to be identified and prioritised”. The aforementioned NIAO 2017 report<sup>14</sup> also made a recommendation on improved training: “the EA and schools should ensure that all teachers, including those studying for their teaching qualification, receive appropriate training so they are able to identify children with SEN and take the necessary action to provide support to them”.

In England, the Public Health Agency (PHE) and the Department of Education have recently launched a joint project to address the “word gap” and the inequalities associated with speech, language and communication needs in the early years. The programme of work will include training for health visitors on speech, language and communication needs; the introduction of an early language assessment tool to support clinical decision-making; and the development of a model pathway for services for children 0-5 years to promote language and early identification / interventions for children with speech, language and communication needs.

RCSLT would therefore welcome more clarification on the extent of this proposal:

- Is a regional approach planned? Will there be links to the ETI?
- Is a training framework planned to ensure consistency and who will deliver this training?
- Will non-statutory and voluntary sectors be involved? Will there be links or opportunities across the whole early years workforce, for example child minders and play group staff?

In order to address barriers to learning it is imperative that parents, carers and practitioners have the skills and knowledge to promote healthy speech, language and communication development at all stages and to spot the signs of language delay and disorder early and to know when to refer to SLTs. The Sure Start workforce development model, which employs a speech, language and communication framework, provides an excellent template or basis upon which to develop training on SLCN for staff, offering an online platform and a tiered approach depending on the level and training of the early years practitioner.

***RCSLT recommends that a fundamental component of skills development for early years practitioners should be focussed on awareness of and ability to identify SLCN, ways to support children’s speech, language and communication skills and when to refer to SLT.***

**The EA Propose to: provide advice and support to parents at the earliest opportunity to ensure they are well informed in relation to their child’s assessed needs**

We would seek further clarity regarding whether there is a threshold of need or support required to access this service:

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every child in Northern Ireland can read well available at <https://www.savethechildren.org.uk/content/dam/global/reports/education-and-child-protection/ready-to-read-northern-ireland.pdf>

<sup>14</sup> NIAO Report (June 2017) Special Educational Needs available at <https://www.niauditoffice.gov.uk/sites/niao/files/media-files/Special%20Educational%20Needs.pdf>

- Will children need to be under the care of community paediatric teams or have had educational psychology assessment to qualify for the 0-3 service?
- Will this service be accessible to children with DLD or severe, persistent language delay that are in receipt of support from community SLT services and may not always be known to education until they approach their pre-school year?

#### **Proposal 4**

**Additional Support to mainstream pre-school settings: Through an agreed framework, enable mainstream pre-school settings to access additional EA professional and practical in-school support to meet the needs of children with SEN.**

Earlier comments on our support for the principle of inclusion apply here, as do our comments under proposal three around the need for careful planning and a co-ordinated approach with existing support services for pre-school children with SLCN including Sure Start and RISE NI.

**The EA propose to: provide in-school support from the Early Years SEN, Inclusion Service and other EA Pupil Support Services, including: Autism, Behaviour, Sensory, and Language and Communication**

The RCSLT strongly welcome the creation of a dedicated pupil support service for speech, language and communication and look forward to SLTs working in collaboration with education colleagues in supporting this service.

**Recruit Early Years Practitioners to the Early Years SEN Inclusion Service. These Early Years Practitioners would have appropriate training to provide additional support, on the basis of assessed need, across mainstream pre-school settings.**

The RCSLT welcome the provision of additional capacity in early years practitioners, provided that they have the skills necessary to understand, identify and support children with SLCN. Failure to address children's SLCN can have a serious impact on a child's life chances, mental health and their educational attainment as highlighted in the Bercow Review: Ten Years on report<sup>15</sup>:

- just 26% of young children with SLCN made expected academic progress in the Early Years Foundation Stage<sup>16</sup> compared with 69% of all children.
- just 15% of pupils with identified SLCN achieved the expected standard in reading, writing and mathematics at the end of their primary school years<sup>17</sup> compared with 61% of all pupils.
- Only 20.3% of pupils with SLCN gained grade 4/C or above in English and maths at GCSE, compared with 63.9% of all pupils.<sup>18</sup>

<sup>15</sup> RCSLT and ICAN (March 2018) 'Bercow: Ten Years On. An independent review of provision for children and young people with speech, language and communication needs in England' available at <https://www.bercow10yearson.com/wp-content/uploads/2018/03/337644-ICAN-Bercow-Report-WEB.pdf>

<sup>16</sup> Department for Education Early Years Foundation Stage results 2017, England

<sup>17</sup> Department for Education Key Stage 2 SATS results 2017

We note the use of the phrase ‘in line with their assessed need’ in the above proposal when referring to providing support for children. The RCSLT would welcome clarification on whether there will be a threshold for children qualifying for additional supports, for example at a certain stage in the SEND process or children who have a statement of SEN? Also will these additional services be offered to both statutory and non-statutory settings? As local evidence, detailed above, shows that between 50-70% of children are beginning pre-school and primary one in some areas, with SLCN that have not been identified previously, we are concerned that some children may be at risk of being overlooked for supports where criteria may be applied.

**Collaborate with Health and Social care and voluntary and community providers, as well as other delivery partners, in relation to the complementary delivery of in-school and parental support to mainstream pre-school settings**

HSC SLT heads of service have raised concerns about their capacity within current SLT resources, to provide additional or on-going supports to mainstream settings, in terms of staff training, direct therapy and indirect support. There are concerns regarding the impact on SLT service capacity to meet the needs of clients, parents and teachers, across an increased number mainstream preschools, for example implications for travel and time.

Notwithstanding these concerns, children with significant SLCN must have access to direct SLT interventions in mainstream settings and this will require additional services to be commissioned, perhaps using models such as those developed by RISE NI and Sure Start.

We note that the NIAO 2017 report<sup>19</sup> on SEN recommends “the Department and the EA should review the current funding arrangements to ensure that available resources are used effectively to meet the needs of all children with SEN, with or without a statement” and believe support for SLCN should be considered as an area requiring a future strategic review.

#### **Proposal 5**

**Extension of the Continuum of Mainstream Pre-school Provision: To extend the continuum of mainstream provision for children in their pre-school year with SEN. This is in line with a more inclusive framework of support for those children for whom this is appropriate, whilst still ensuring access to specialist interventions.**

**The EA propose to:**

**Explore potential for establishing Early Years SEN Centres attached to a range of mainstream pre-school settings across EA**

<sup>18</sup> Department for Education GCSE results 2017

<sup>19</sup> NIAO Report (June 2017) Special Educational Needs available at <https://www.niauditoffice.gov.uk/sites/niao/files/media-files/Special%20Educational%20Needs.pdf>

**Conduct a pilot of Early Years SEN Centres in up to six mainstream early year settings across EA, with evaluation of the child's needs in this context informing their transition to an appropriate Year 1 placement.**

**Collaborate with health and social care and voluntary and community providers, as well as other delivery partners, in relation to the complementary delivery of support to children in Early Years SEN Centres, and their parents.**

RCSLT welcome the extension of provision of pre-school placements for children with SEN, provided the quality of provision is suitable to meet their needs. We note that Early Years centres are described as catering for children with more significant needs. However, there is no detail on admissions criteria for SEN centres and mainstream settings. This detail would need to be clear and equitable from the outset.

Co-location on a site of a mainstream setting will not of itself result in inclusion, particularly for children with SLCN, if interactions with the mainstream setting can not provide a suitable communication environment to enable children to participate with peers. Additionally the needs of children with dysphagia would also need to be carefully considered. More clarification is needed on:

- What would the admissions criteria be for SEN centres and what types of SEN and disabilities would they cater for example for physical and learning disability in a single centre?
- Would this provision be considered special or mainstream?
- We note capacity would be established at 12 children per class, but what staffing complement would be deemed appropriate for these centres?
- How would speech and language therapists be involved and what would be their role?
- SLTs working in multiple facilities already report additional capacity is required because of travel time and increased support required for staff training on different sites.
- If children cannot secure a place due to demand how would they be supported?

We appreciate that the plans for these Early Years SEN centre pilot may still be evolving, however it is vital that AHPs who work with children with significant needs are fully engaged in this process.

#### **Proposal 6**

**Special School Provision: To establish consistent access arrangements and provision for children in their pre-school year who require a special school nursery place to ensure that the programme of offer across these settings is equitable and will meet the needs of children with the most complex needs.**

**EA propose to:**

**Annually monitor the demand for special school nursery provision across the EA in order to plan for and meet future need.**

**Make provision for children who are in their pre-school year and who have relevant, up to date professional advice regarding the complexity of their needs.**

**Through an annual audit of staffing and pupils in special school nursery settings, make relevant and appropriate adjustments to the special school early years workforce in line with changing need and demand.**

**Bring consistency to the programme of offer across all special school nursery settings.**

**Collaborate with health and social care and voluntary and community providers in relation to the complementary delivery of support to children in special schools, and their parents.**

The RCSLT fully support the EA's commitment to increase access to special school nursery provision, however it is important that the quality of provision is retained for children with the most complex needs.

We are aware that the EA has undertaken direct consultation with AHPs who work in special schools around changes to nursery provision and will be aware of the communication and feeding needs of children with the most complex needs. SLTs working with children with the most severe SEN provide direct and indirect therapy interventions; support children to use alternative and augmented communication strategies and technology; provide training to children, parents, education and supervisory staff on communication and feeding support.

Children with complex needs will also have changing needs over time and changes to their health can also have a significant impact of their therapeutic requirement. As with all children with SEN, communication support and an appropriate communication environment is fundamental to their ability to learn and achieve their full potential.

We understand that where the EA has implemented interim measures to expand access in the last two years by moving to dual nursery days in some settings, this has been supported by additional educational resources. However, at present we understand that no corresponding provision has been made available to increase the capacity of speech and language therapists or other AHPs who support these children attending dual days. We believe this urgently requires a review and that designated AHP resources will be required to fully support this proposal. Also, the implications of reserving special school nursery places only for children with the most complex needs has an impact on the caseloads for SLTs, in terms of the time available to support each child. This also needs to be considered in connection with the work ongoing as part of the EA's Area Plans for special schools in Belfast.

17 May 2018

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