



The role and impact of speech and language therapy provision in Sure Start in Northern Ireland

(antenatal to school-entry)

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Background

This document has been developed in partnership with speech and language therapists (SLTs) who are members of the RCSLT Sure Start clinical excellence network (CEN). While recognising that everyone makes a contribution in supporting and developing speech, language and communication for children attending Sure Start projects, the CEN SLTs met to scope their own role and impact in delivering against Sure Start outcomes. Since the original scoping work was undertaken, there has been a restructuring of SLT services, and a new strategic approach to service delivery is currently being agreed. It is hoped that this document may be of use in providing impact descriptors and an evidence base as a reference point for the CEN Sure Start SLTs.

This document provides examples of speech and language therapy provision in Sure Start projects and also highlights the importance of everyone working together to deliver improved speech, language and communication outcomes for children in socially disadvantaged areas. We hope that this work will be a useful tool for SLTs working in Sure Start projects, and for the wider speech and language therapy profession working in early years.

The document focuses upon the individual and team contribution that SLTs make in delivering Sure Start speech, language and communication outcomes. It sets out who SLTs work with, the kinds of work that they do and the impact that speech and language therapy should make. It also sets out how speech and language therapy supports the delivery of the Sure Start outcomes when working within a Sure Start team, and references how these impacts and outcomes can or are being measured.

The vision

For every child to start school having the best possible speech, language and communication skills to help them make friends, enjoy learning and reach their full potential.

How will we achieve this?

This vision can be achieved by SLTs working in an effective and dynamic partnership with parents, the Sure Start workforce, other early years professionals and the wider community. This partnership recognises the unique contributions of everyone involved in supporting and developing children's speech, language and communication in the early years.

Working together, we can...

- Ensure that children have the underpinning skills that are necessary for acquiring good speech, language and communication.
- Empower parents and caregivers by giving them the tools and knowledge to maximise the development of their child's speech and language skills at home.
- Provide an optimum communication environment for children in Sure Start centres by working with the early years workforce to support children in acquiring good speech, language and communication skills.
- Work with the wider community by developing and sharing public health messages that raise awareness of the importance of good speech, language and communication skills and how they can be supported.

What is Sure Start?

Sure Start is a government programme which provides a range of support services for parents and children under the age of four who live in disadvantaged areas across Northern Ireland. It aims to support parents from pregnancy and to give children the best start in life. Sure Start work is focused on six high-level outcomes to ensure children are:

- Being healthy
- Enjoying learning and achieving
- Living in safety and with stability
- Living in a society that respects their rights
- Experiencing economic and environmental wellbeing
- Contributing positively to community and society

What is a speech and language delay?

"A wide variety of terms is used to describe the skills of children who are slow to start speaking. Language delay is probably the most common term for young children, but we also hear the term 'late talker' being used. If difficulties persist, the terms 'language impairment', 'specific language impairment' or 'developmental language disorder' are used. A distinction is sometimes drawn between language delay and speech delay or even communication delay, although not always clearly. Most recently the term 'speech, language and communication needs' (SLCN) has been adopted after the Bercow Report to describe the whole range of children whose communication skills are affected across childhood."¹

¹ Law J, et al. *Early Language delays in the UK*. London: Save the Children Fund, 2013.

The policy context

There has been an increasing policy focus on early intervention in Northern Ireland recently, and, as a result, a number of cross-agency initiatives have been developed to concentrate resources on delivering better outcomes for children from disadvantaged backgrounds. These policies have been operationalised in projects such as Sure Start, The Children and Young People's Strategic Partnership (CYPSP) and the Early Intervention Transformation Programme (EITP).

All of these projects are outcomes-focused and increasingly recognise the importance that speech, language and communication plays in delivering the best outcomes for a child's social, emotional and educational development.

Other countries in the UK have been equally aware of the importance that speech and language skills play in a child's overall development. In 2014, Ofsted revised its framework for the Early Years Foundation Stage (EYFS)² and continues to place a strong emphasis on "communication and language as one of three prime areas considered to be crucial for igniting children's curiosity and enthusiasm for learning, and for building their capacity to learn, form relationships and thrive". They define the early learning goals under communication and language as follows:

- Listening and attention: children listen attentively in a range of situations. They listen to stories, accurately anticipating key events, and respond to what they hear with relevant comments, questions or actions. They give their attention to what others say and respond appropriately, while engaged in another activity.
- Understanding: children follow instructions involving several ideas or actions. They answer 'how' and 'why' questions about their experiences and in response to stories or events.
- Speaking: children express themselves effectively, showing awareness of listeners' needs. They use past, present and future forms accurately when talking about events that have happened or are to happen in the future. They develop their own narratives and explanations by connecting ideas or events.

Across the UK, Save the Children Fund has also focused on the importance of early language skills for developing later literacy skills. Save the Children's 'Read On. Get On' campaign is a national initiative that highlights that literacy skills are underpinned by early speech and language development.

"Since children's early language skills have a strong influence on their language and literacy throughout childhood, we are also working to ensure that every five-year old is achieving good early language development by 2020."³

² Department for Education & HM Treasury. *2010 to 2015 government policy: childcare and early education* (Policy Paper). London: Department for Education & HM Treasury, 2015. Available from: www.gov.uk/government/publications/2010-to-2015-government-policy-childcare-and-early-education/2010-to-2015-government-policy-childcare-and-early-education

³ Save the Children. *The power of reading. How the next government can unlock every child's potential through reading*. London: Save the Children, 2015. Available from: www.savethechildren.org.uk/resources/online-library/power-reading

The local evidence of the need for early speech, language and communication support

Speech, language and communication difficulties affect more children and young people in Northern Ireland than any other single condition, and are core impairments for many children with a learning, physical or sensory disability.⁴ Seven per cent of all children (two in every classroom) have speech, language and communication needs (SLCN), rising to more than 50% of children from socially disadvantaged communities.⁵

Recent studies in Northern Ireland (referenced below) support the findings that children from disadvantaged backgrounds are failing to reach expected standards in speech, language and communication by school entry.

- 1997: 'Language Matters', a study in Twinbrook and Poleglass, evidenced a preschool prevalence of 60% speech and language difficulties, 42% of whom required referral to a speech and language therapy service.
- 2009: A study in the Colin area, using standardised assessment tools, highlighted that 41% of children entering primary one (P1) had speech, language and communication difficulties (Coulter, Halligan and Jordan, 2009).⁶
- 2013: The Colin study was replicated in the Downpatrick area and evidenced 46% of P1 children with speech and language difficulties requiring intervention.
- 2014: A study in the Lisburn area evidenced that boys in deprived areas of Lisburn were three times more likely to have speech and language difficulties than those in non-deprived areas.
- 2014: 'Now you're talking Fermanagh' found that 57% of nursery school children had speech and language difficulties. These were preschool children from the four most-deprived wards after the introduction of Sure Start, and who were not in receipt of any early intervention programmes.

⁴ Northern Ireland Speech and Language Therapy Task Force. *Report on Speech and Language Therapy Services for Children and Young People*. July, 2008.

⁵ All Party Parliamentary Group on Speech and Language Difficulties (Westminster). *The links between speech, language and communication and social disadvantage*. February, 2013. Available at: www.rcslt.org/governments/docs/appg_report_feb_2013

⁶ Coulter, Halligan and Jordan. *Prevalence of speech and language delay in primary one children in Lisburn neighbourhood renewal areas*. Dundonald: South Eastern Health and Social Care Trust, 2009.

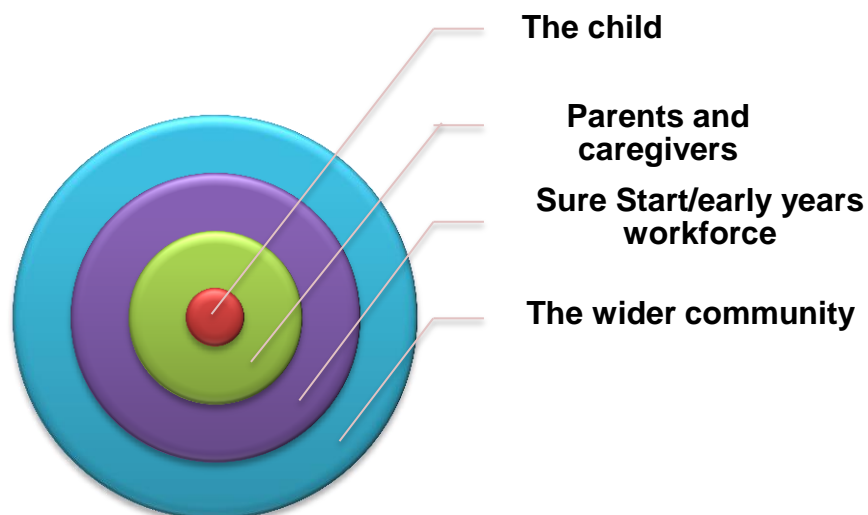
The role and impact of speech and language therapy

This section demonstrates the link between speech and language therapy activity and the six high-level Sure Start outcomes (mentioned on page 5) by describing the impact that speech and language therapy provision has upon the child, the parent/caregiver, the Sure Start workforce and the wider community. It describes:

- who SLTs work with;
- what they do; and
- when they do it (SLT activity by age of child).

Speech and language therapy activity is set out into four main themes: **screening, training, intervention;** and **public health messaging**, and details existing data collection and external evidence sources that can evidence some of the interventions and outcomes.

Who do SLTs work with?



The child

SLTs working in Sure Start report that children involved in Sure Start projects reflect the general population in terms of the nature of their speech and language difficulties but not in terms of the prevalence of these difficulties.

The majority of children typically have speech and language difficulties that may not be permanent but may improve by developing their pre-language skills such as attention, listening and imitation skills, and by providing a rich language and communication environment at home and in their play groups. Other children may be identified who have additional learning needs and more complex communication difficulties. These children and their families may need more-specialist speech and language therapy interventions and support.

Parents and caregivers/the family and home

Recent research has evidenced the importance of a rich home learning environment for the development of speech and language skills. Hart and Risley⁷ evidenced that “the number of words directed towards a child over a given year ranged from 11 million in the ‘professional’ families to three million in the ‘welfare’ families”. This pattern was reflected in parenting style and in the amount of encouraging feedback that the children had experienced, and also in the non-verbal IQ and tested vocabulary scores that they achieved.

SLTs work with parents and families to optimise the home learning environment by developing parent/grandparent/carer understanding of speech, language and communication development and how to promote it. They may also develop a parent’s specialist skills and knowledge for children who have a persistent SLCN. This might be by introducing alternative and augmented communication strategies, such as Makaton, TEACCH or the Picture Exchange Communication system (PECS), for children diagnosed with autism spectrum disorder or a learning disability.

Sure Start/early years workforce

“Speech and language therapists provide training to the wider workforce as an integral part of their role, as outcomes for children are improved when the whole workforce can contribute to care pathways.”⁸ SLTs work with early years practitioners, including Sure Start staff, to help them identify children with speech and language delay or disorders, and in developing their specialist skills to support those children with persistent SLCN. SLTs also work alongside early years staff to optimise the learning environment by developing their understanding of speech, language and communication and how to promote it.

The wider community

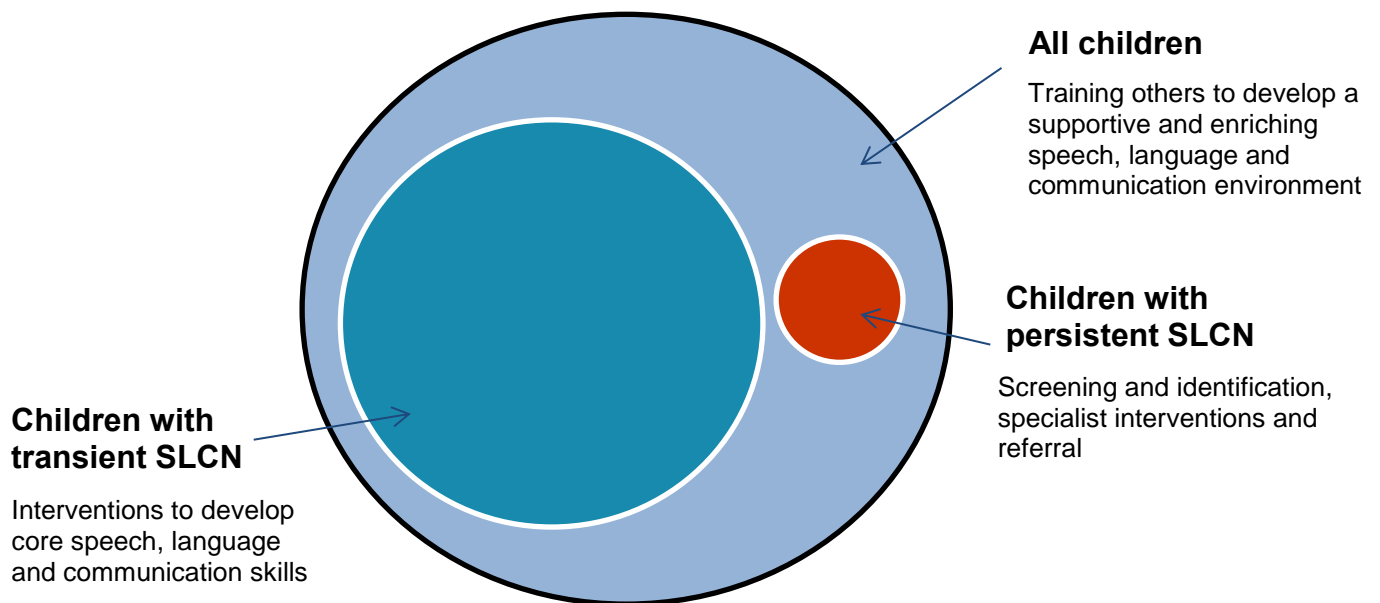
SLTs work in the wider community by raising awareness of how to promote good speech and language development, how to signpost parents to sources of information on speech, language and communication development and how to contact speech and language therapy services when they have concerns. They also contribute to the wider public health agenda by promoting health and wellbeing for people with communication difficulties.

⁷ Hart B and Risley T. *Meaningful Differences in the Everyday Experience of Young American Children*. Baltimore, MD: Brookes Publishing, 1995.

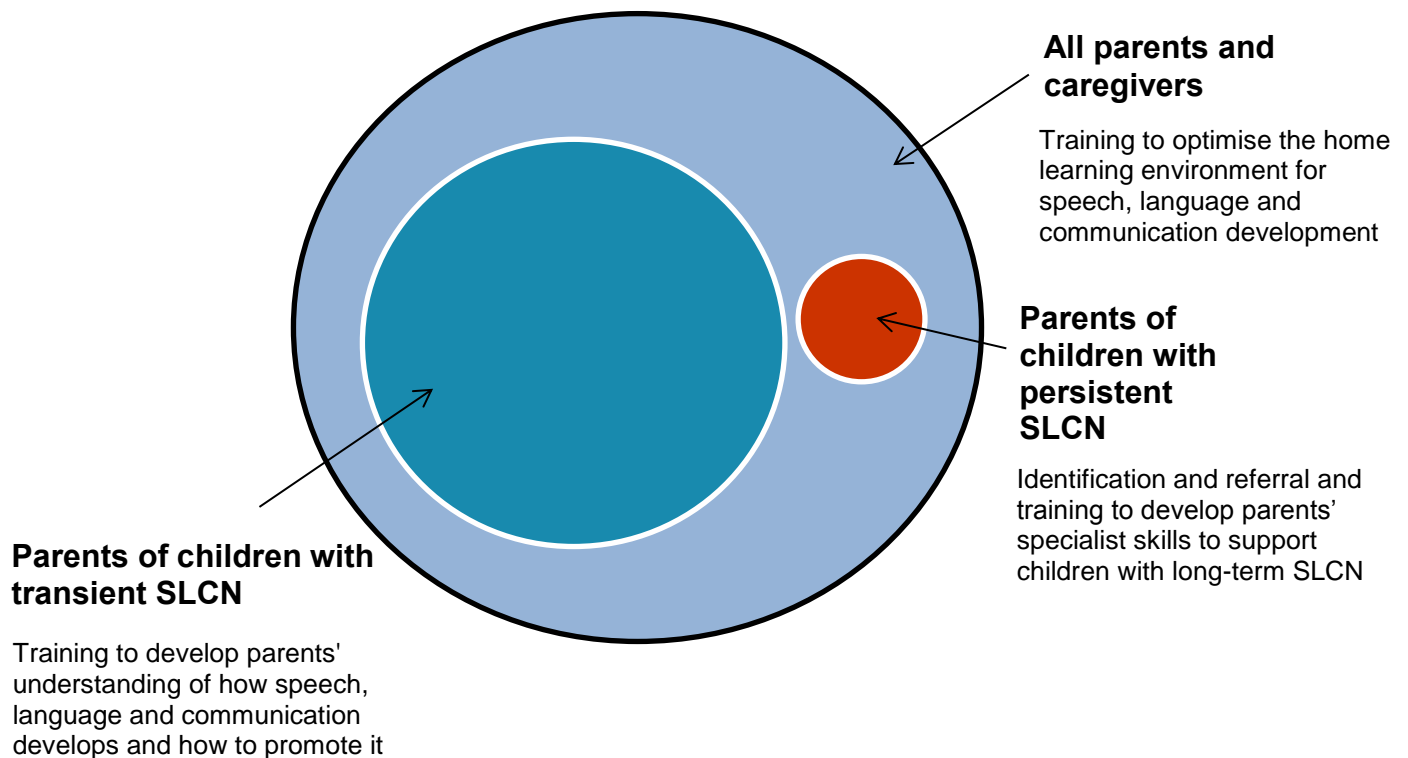
⁸ Enderby P, et al. *Resource Manual for Commissioning and Planning Services for SLCN*. London: RCSLT, 2009.

What do SLTs do?

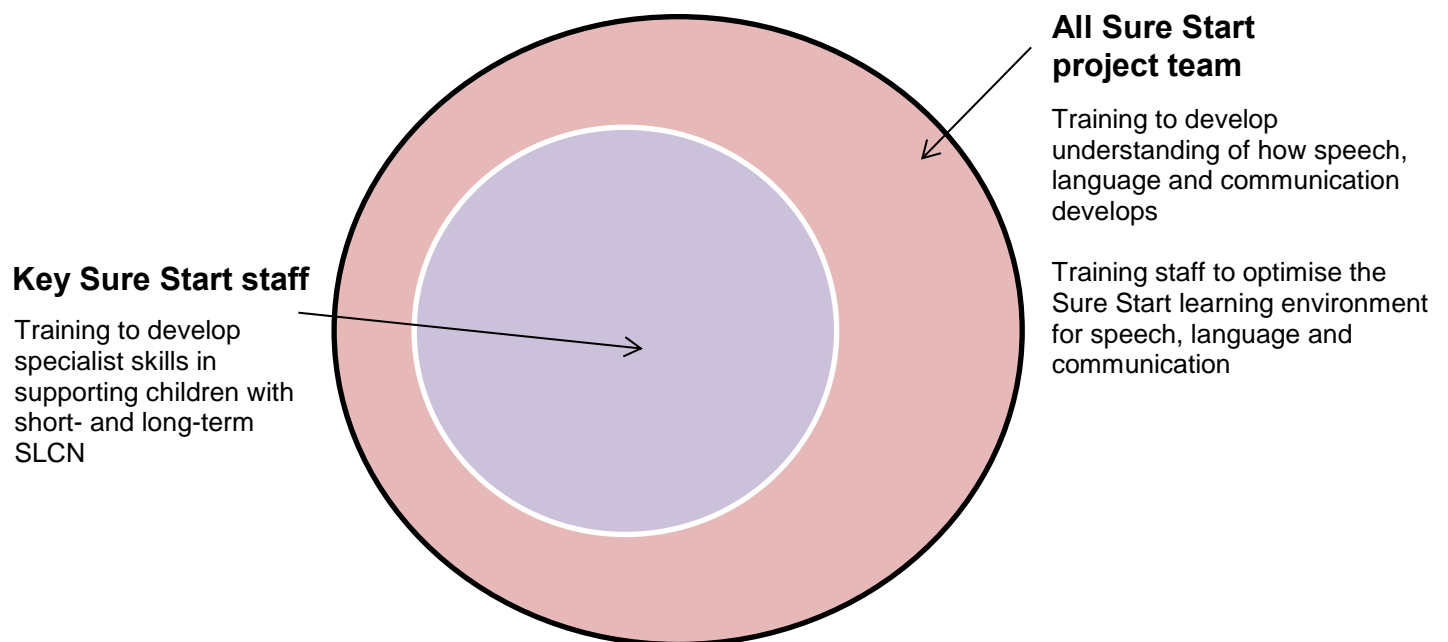
The child



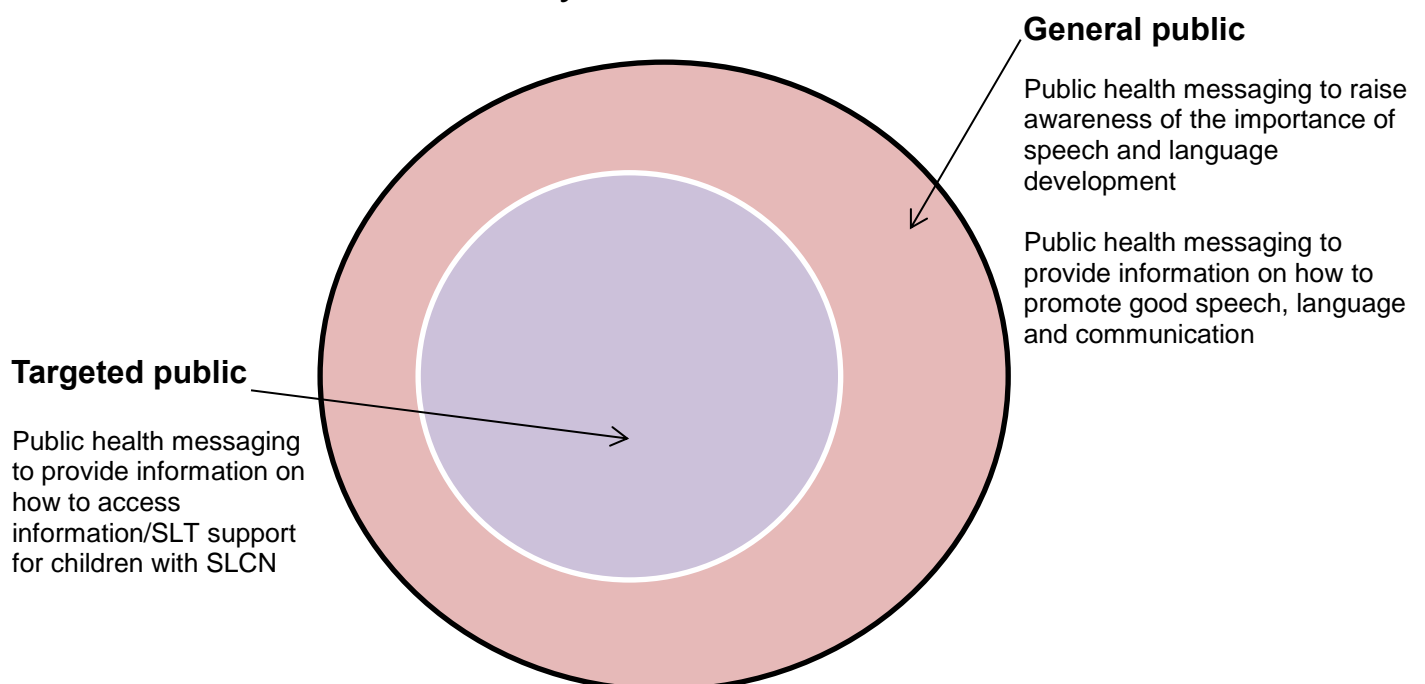
Parents and caregivers/the family and home



Sure Start/early years workforce



The wider community



When SLTs work (ages and stages)

The tables on pages 11 to 29 demonstrate the link between speech and language therapy activities and Sure Start outcomes under the following themes:

- Screening
- Training
- Interventions
- Public health messaging

And under the following age groups:

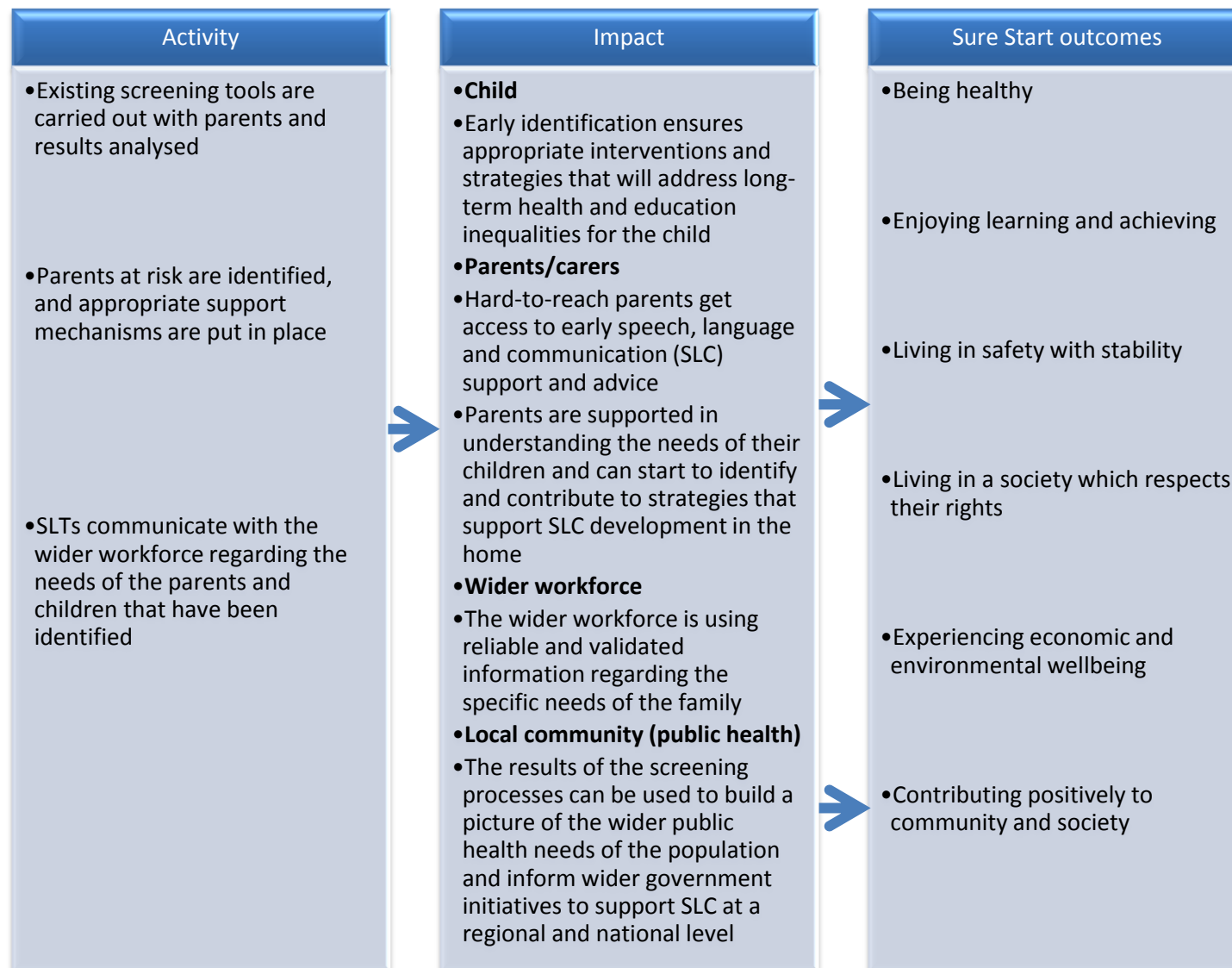
- Antenatal
- 0–18 months
- 18 months – 2 years
- 2–3 years
- 3–4 years

The tables also provide the link to the Sure Start outcomes as below:

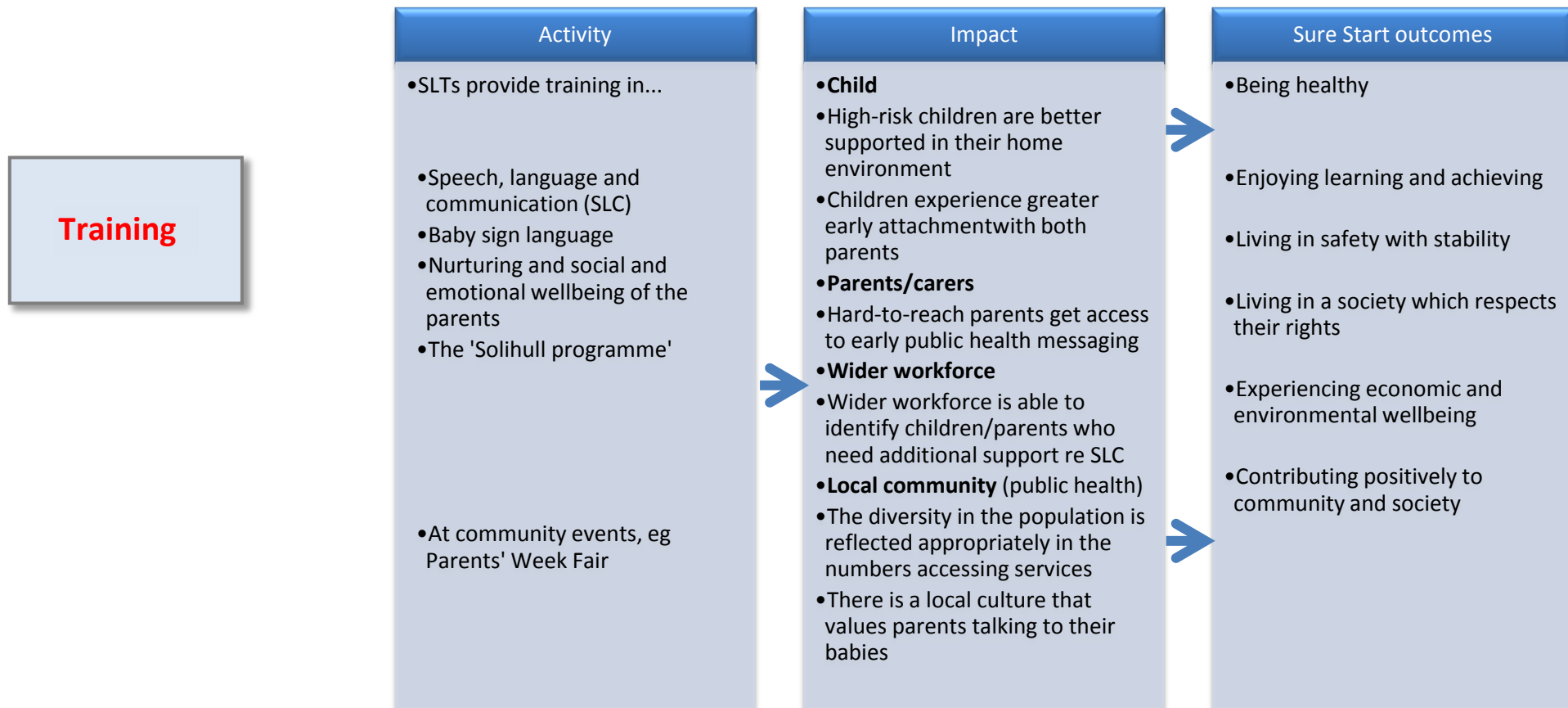
- Being healthy
- Enjoying learning and achieving
- Living in safety and with stability
- Living in a society which respects their rights
- Experiencing economic and environmental wellbeing
- Contributing positively to community and society

The role and impact of speech and language therapy in antenatal services

Screening



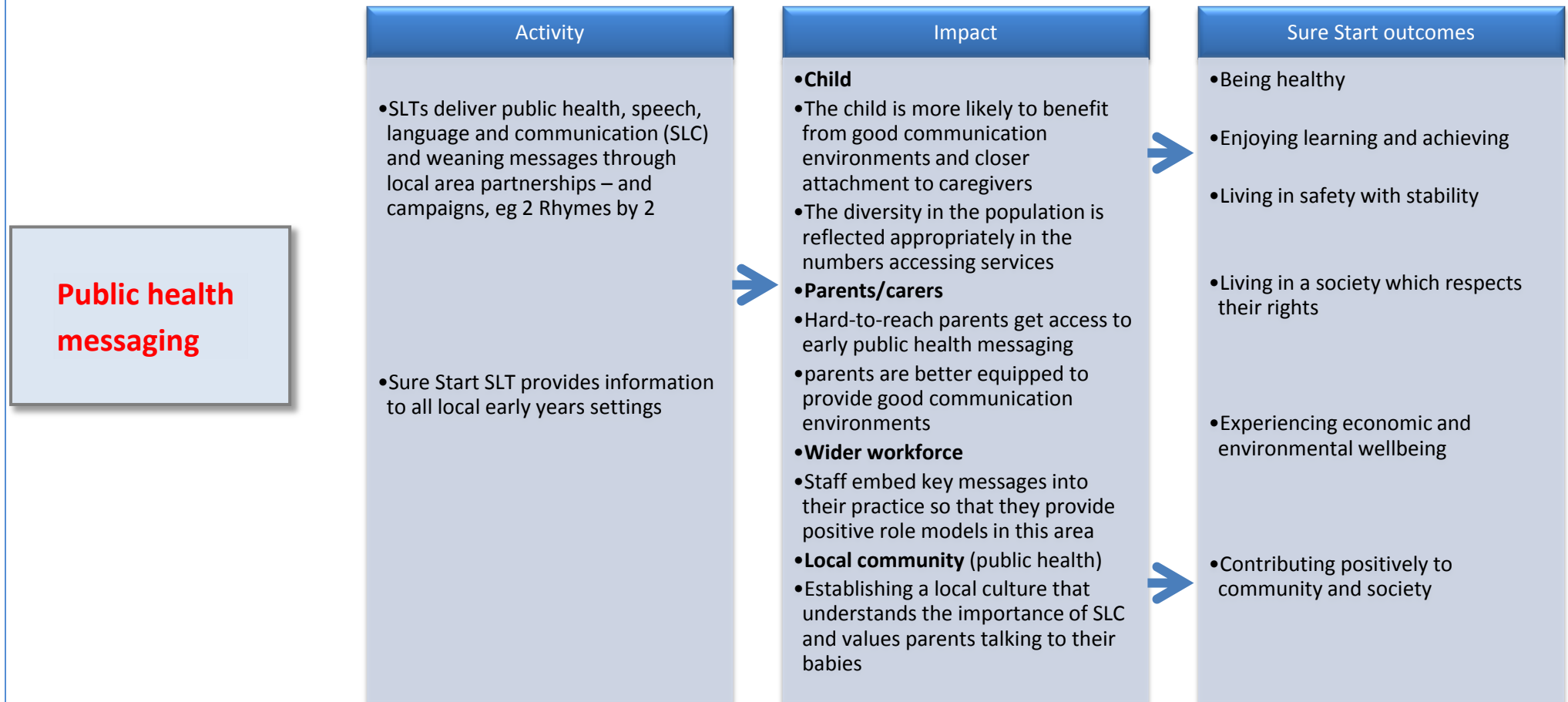
The role and impact of speech and language therapy in antenatal services



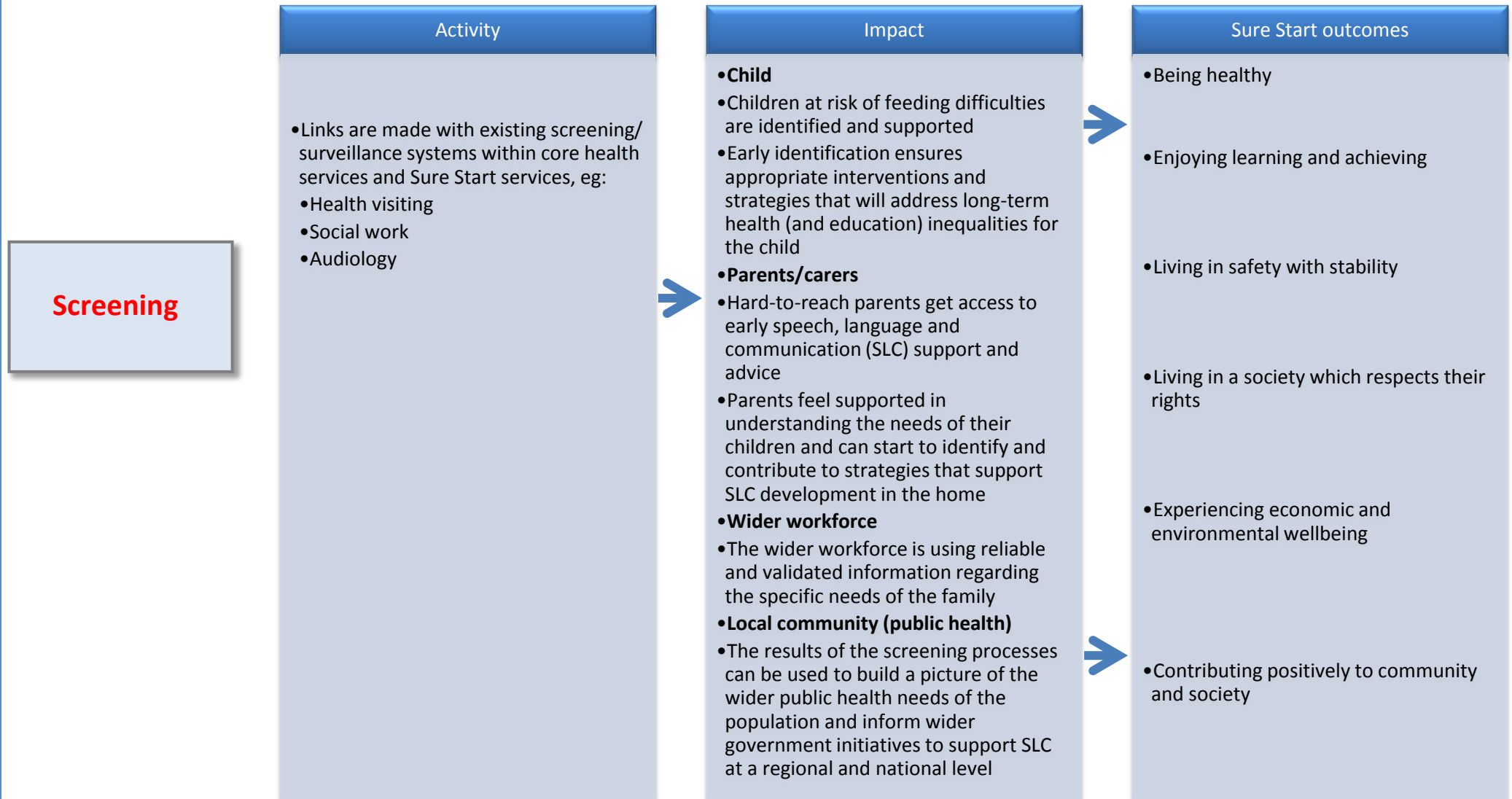
Babysign www.babysign.co.uk/

The Solihull programme available from solihullapproachparenting.com/

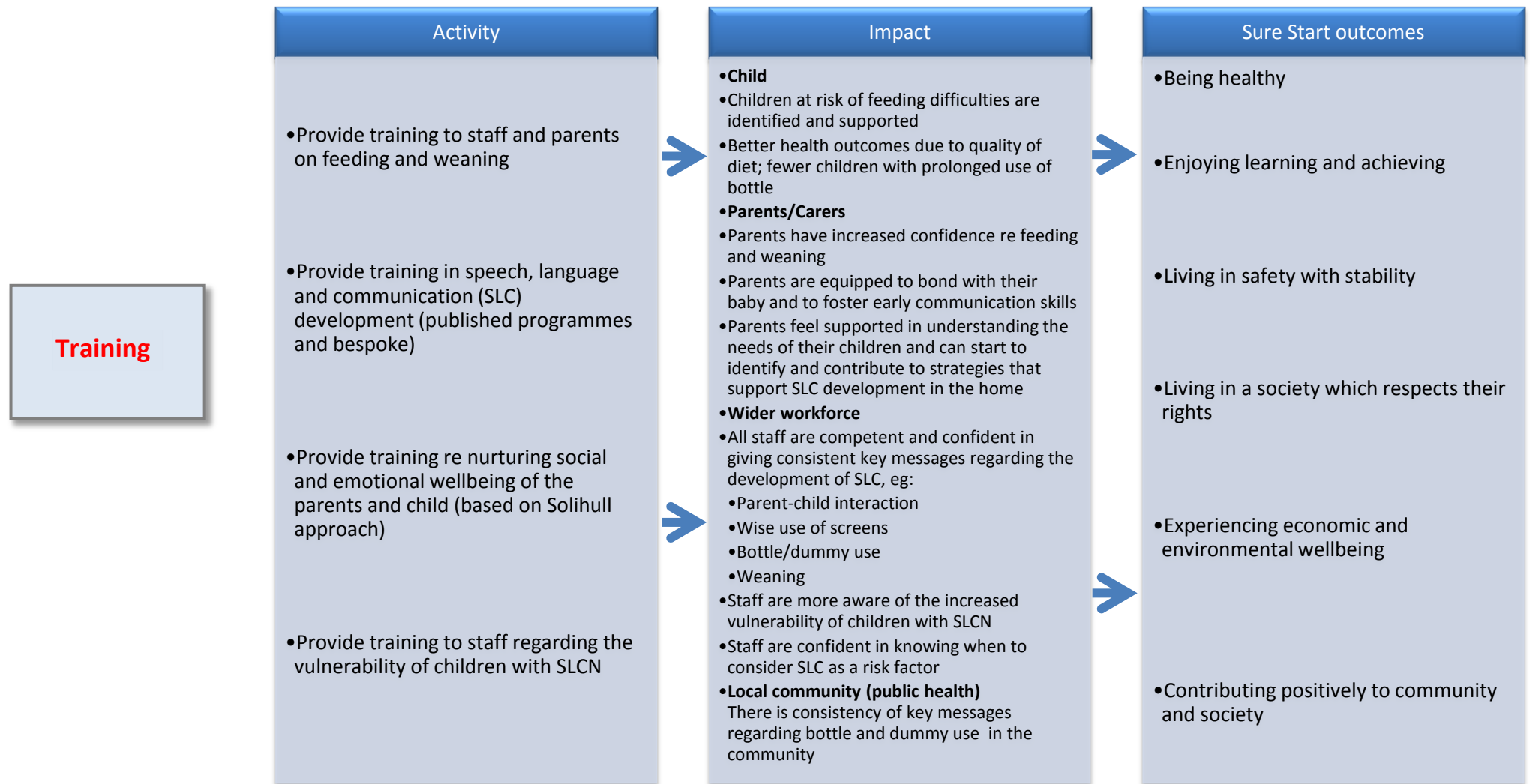
The role and impact of speech and language therapy in antenatal services



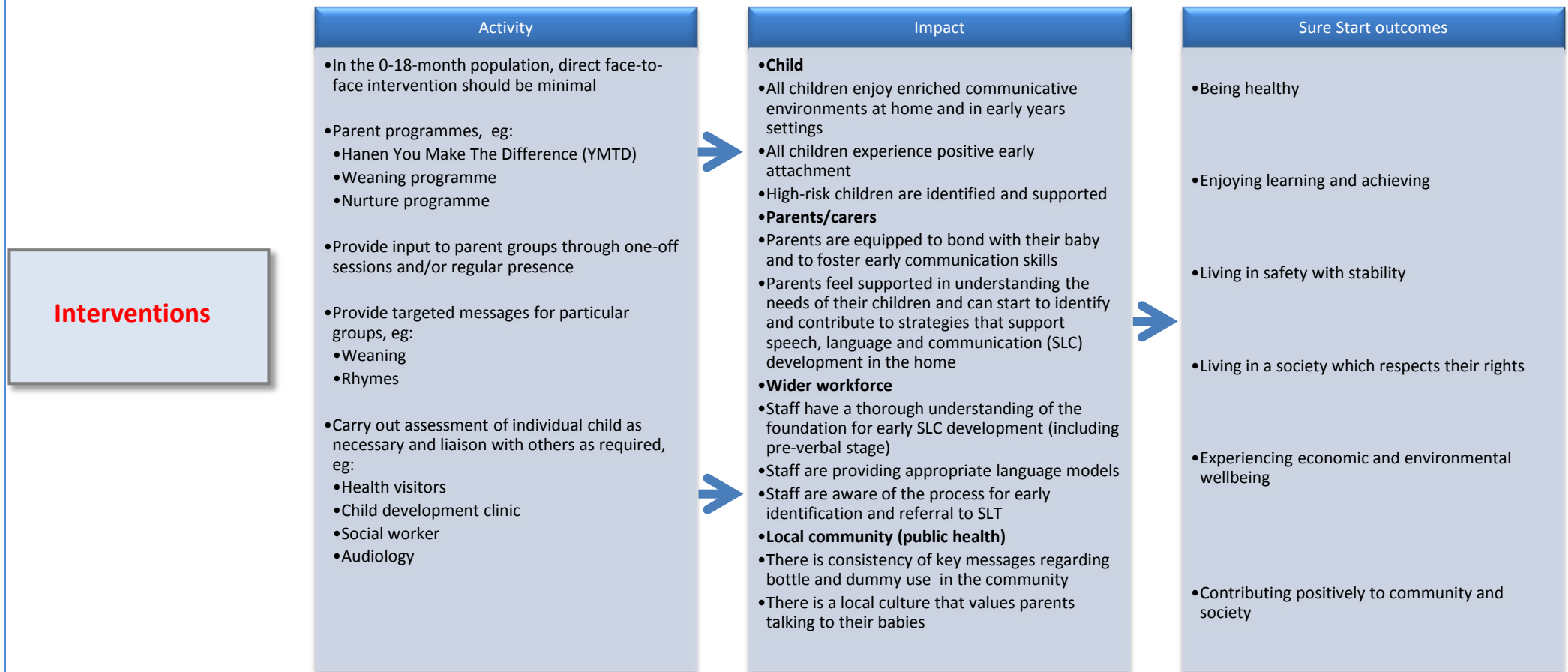
The role and impact of speech and language therapy in services for children aged 0–18 months



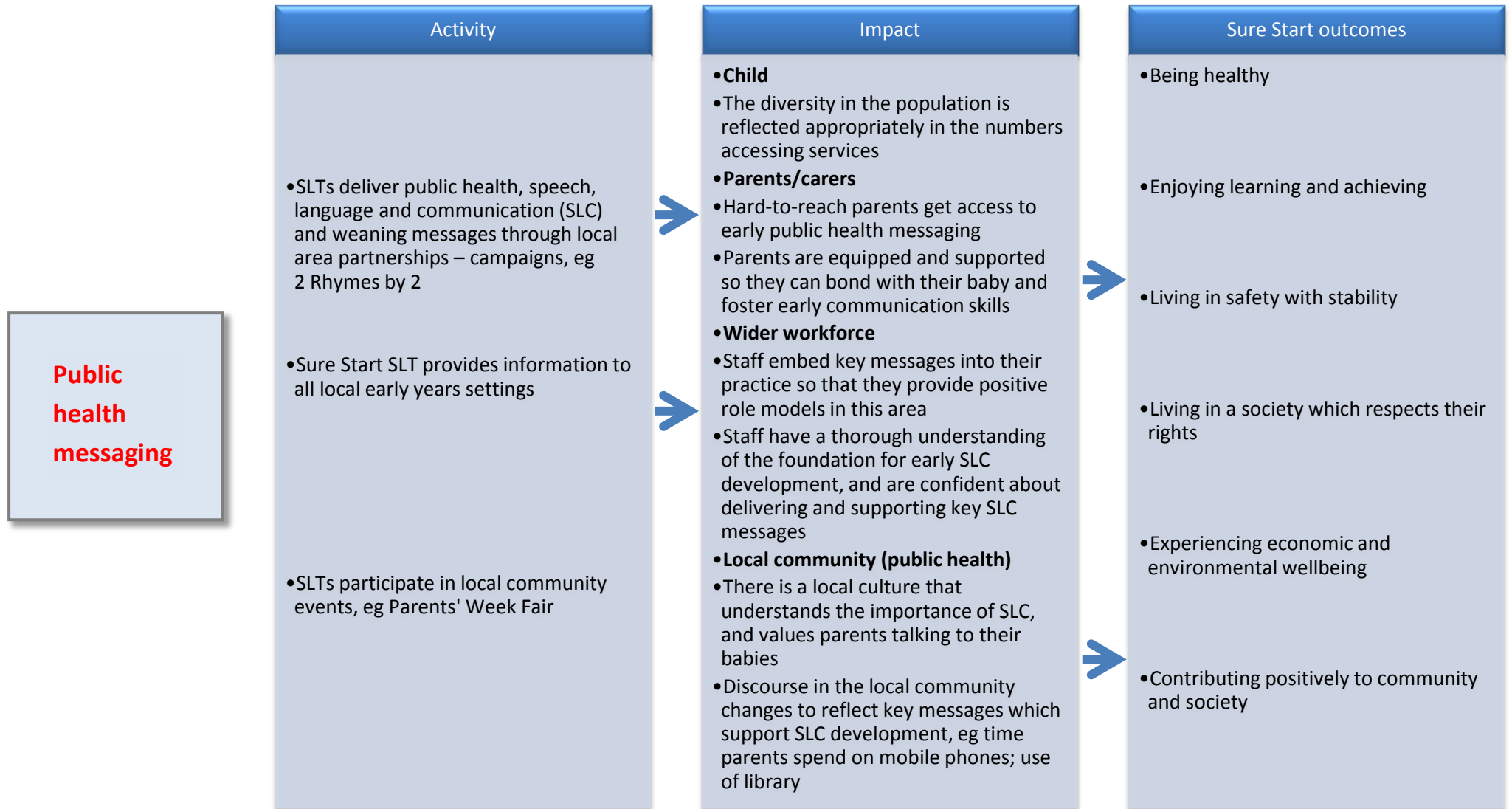
The role and impact of speech and language therapy in services for children aged 0–18 months



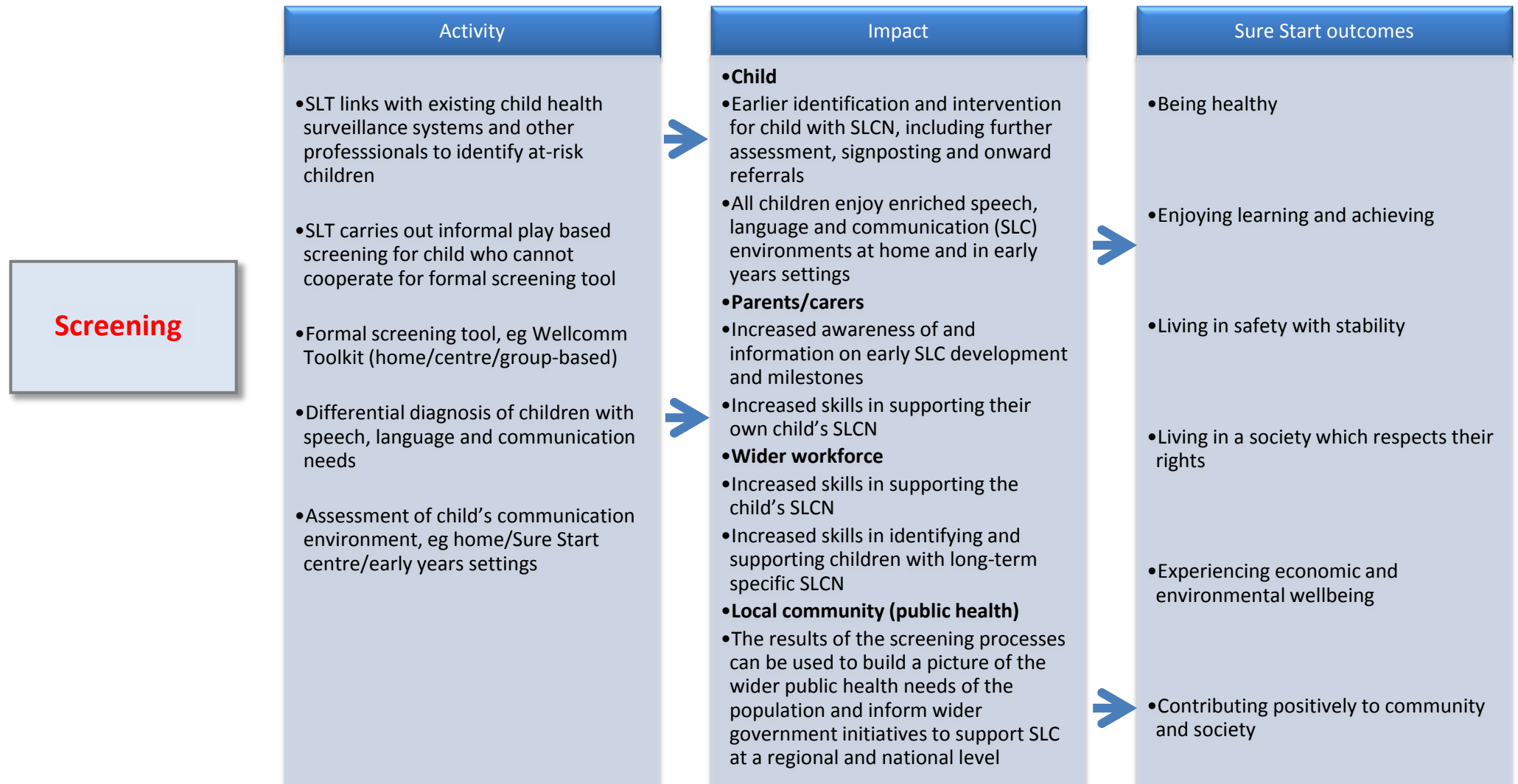
The role and impact of speech and language therapy in services for children aged 0–18 months



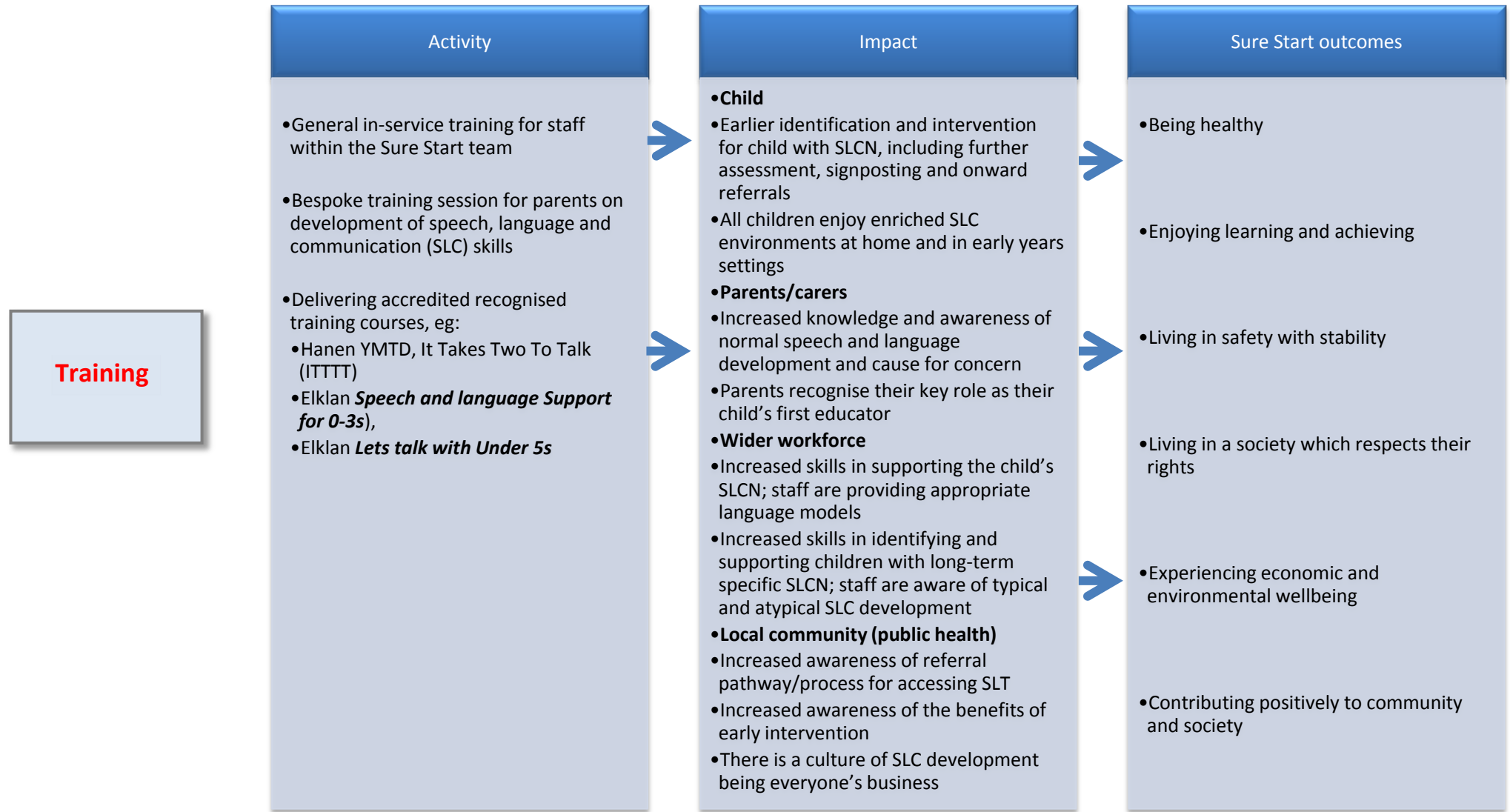
The role and impact of speech and language therapy in services for children aged 0–18 months



The role and impact of speech and language therapy in services for children aged 18 months – 2 years



The role and impact of speech and language therapy in services for children aged 18 months – 2 years



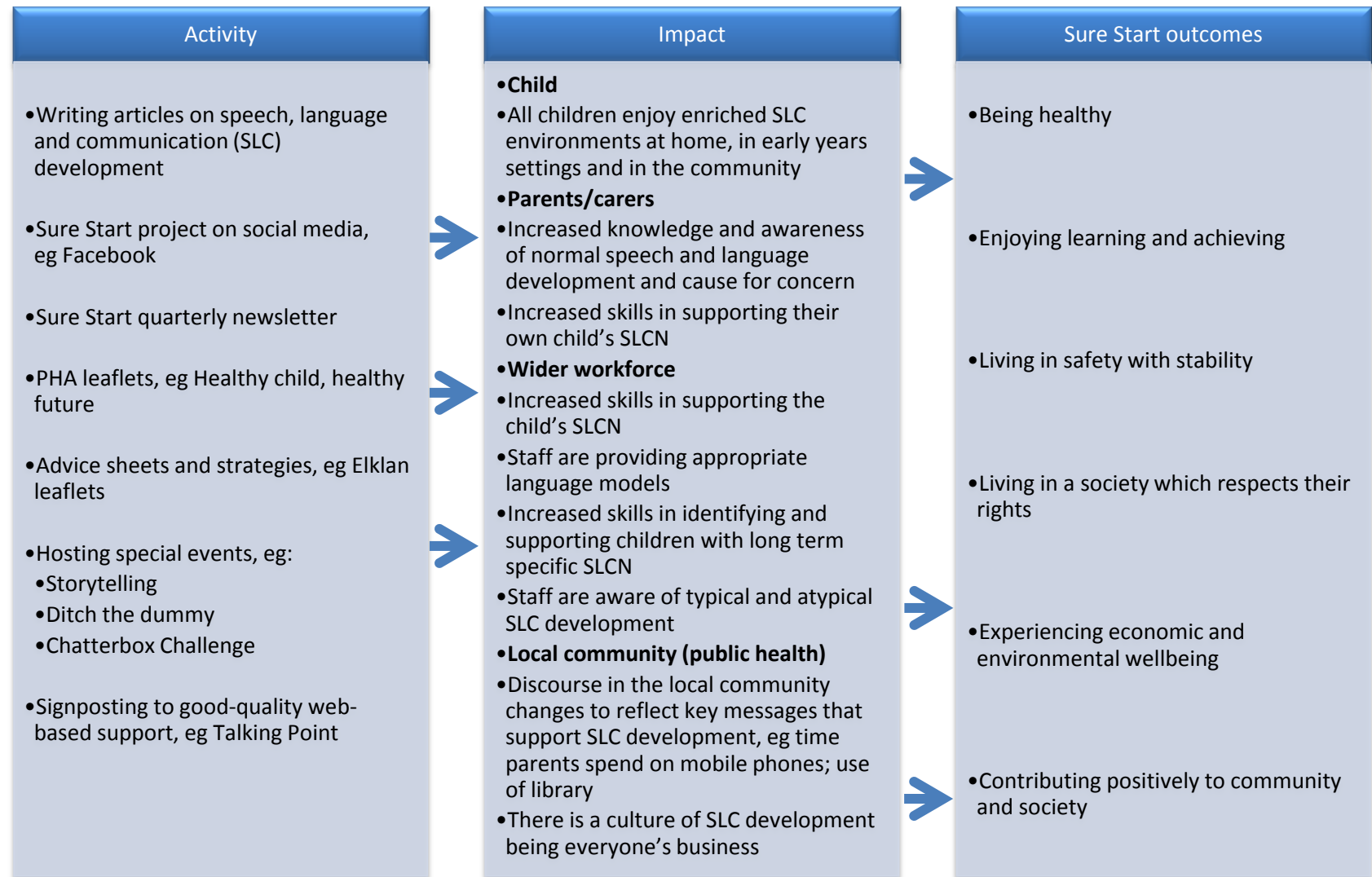
The role and Impact of speech and language therapy in services for children aged 18 months – 2 years

Interventions

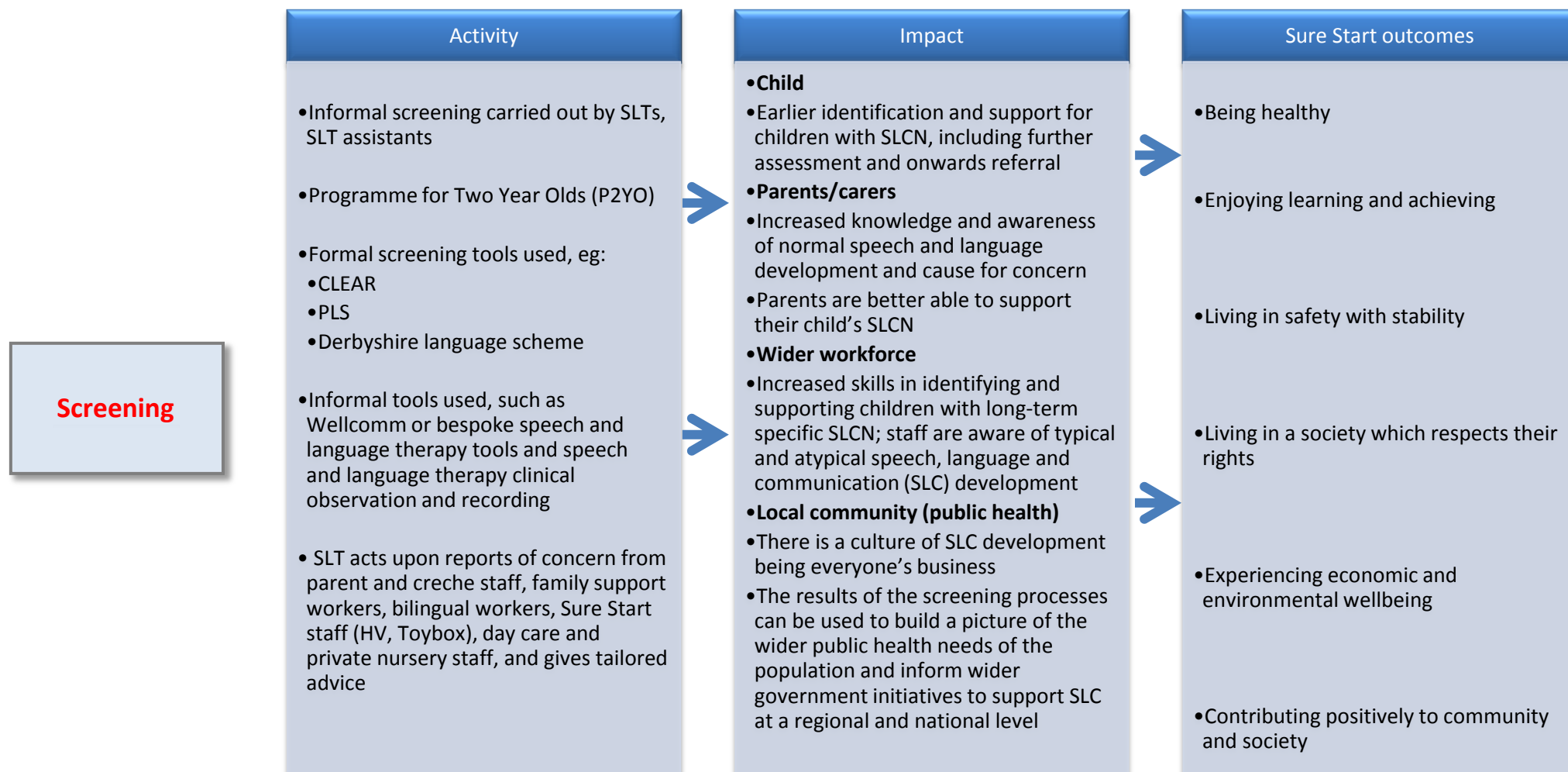
Activity	Impact	Sure Start outcomes
<ul style="list-style-type: none"> • In the 18 month – 2 year population, direct face-to-face intervention should be minimal • Assessment of individual child as necessary and liaison with others as required, eg: <ul style="list-style-type: none"> • Health visitors • Child development clinic • Social worker • Audiology • General advice to staff/parents 	<ul style="list-style-type: none"> • Child <ul style="list-style-type: none"> • All children enjoy enriched speech, language and communication (SLC) environments at home and in early years settings • Parents/carers <ul style="list-style-type: none"> • Increased knowledge and awareness of normal speech and language development and cause for concern • Increased skills in supporting their own child's SLCN • Wider workforce <ul style="list-style-type: none"> • Increased skills in identifying and supporting children with long-term specific SLCN • Staff are more aware of typical and atypical development and strategies to support children's SLC • Local community (public health) <ul style="list-style-type: none"> • Increased awareness of referral pathway/process for accessing SLT • Increased awareness of the benefits of early intervention • There is a culture of SLC development being everyone's business 	<ul style="list-style-type: none"> • Being healthy • Enjoying learning and achieving • Living in safety with stability • Living in a society which respects their rights • Experiencing economic and environmental wellbeing • Contributing positively to community and society

The role and impact of speech and language therapy in services for children aged 18 months – 2 years

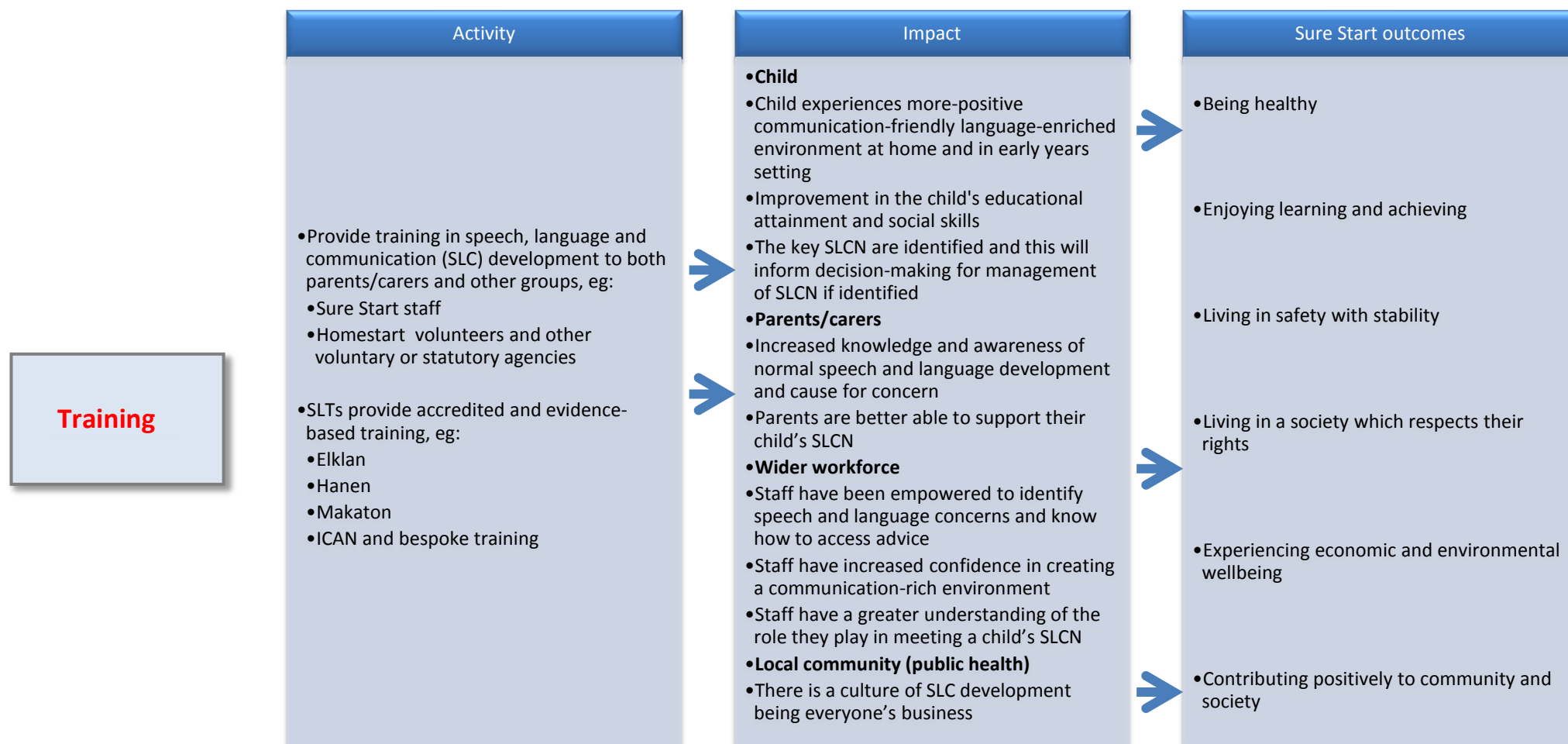
Public health messaging



The role and impact of speech and language therapy in services for children aged 2–3 years

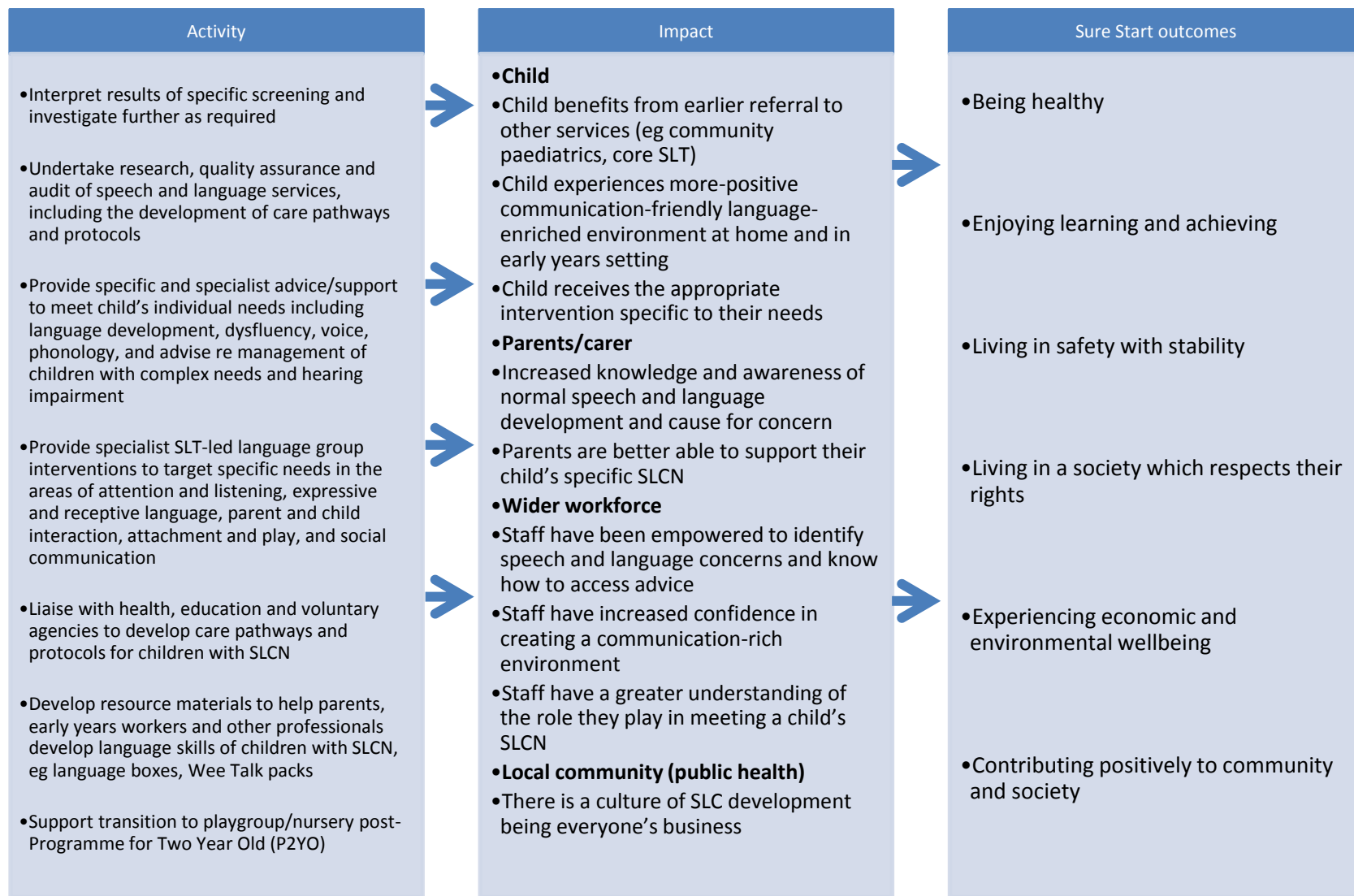


The role and impact of speech and language therapy in services for children aged 2–3 years

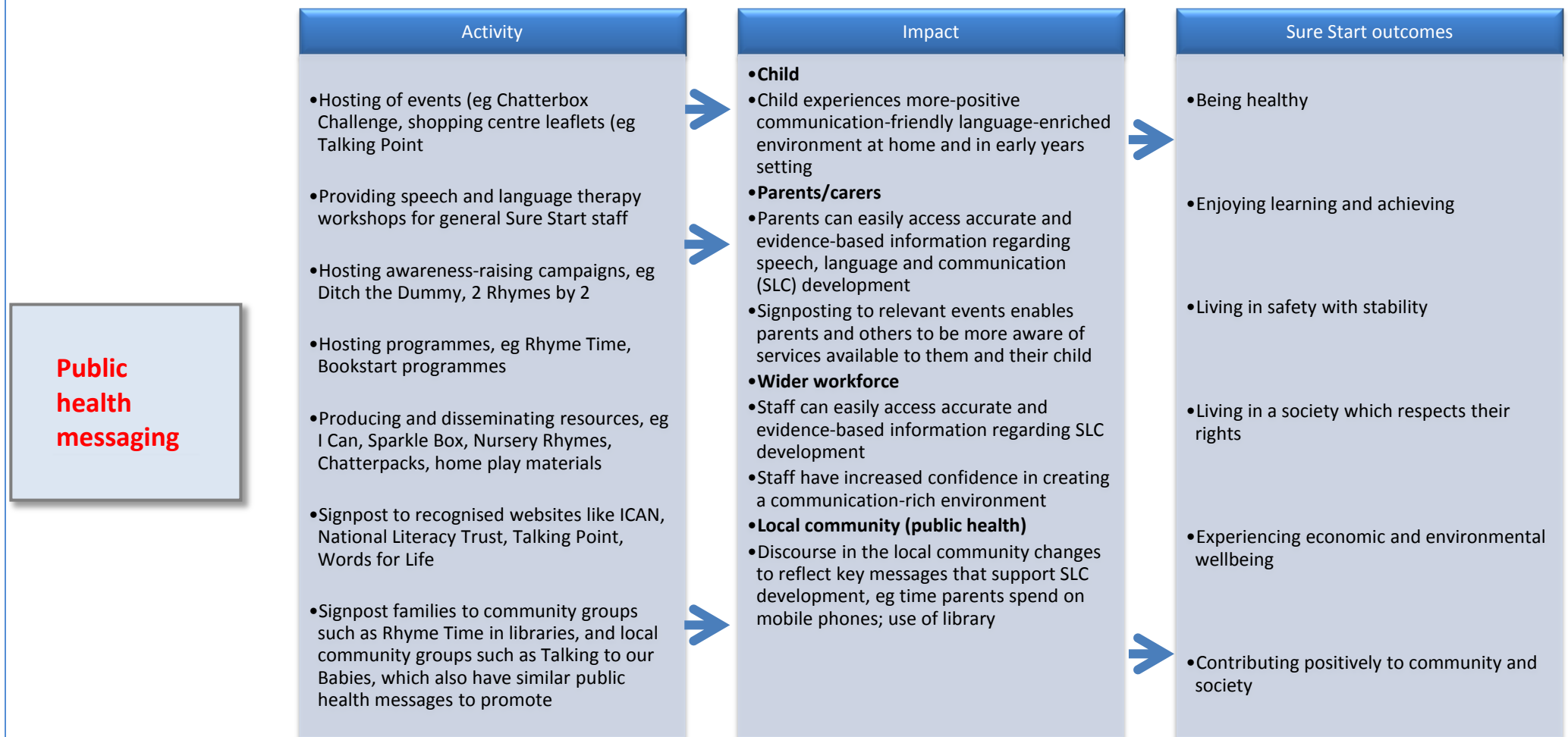


The role and impact of speech and language therapy in services for children aged 2–3 years

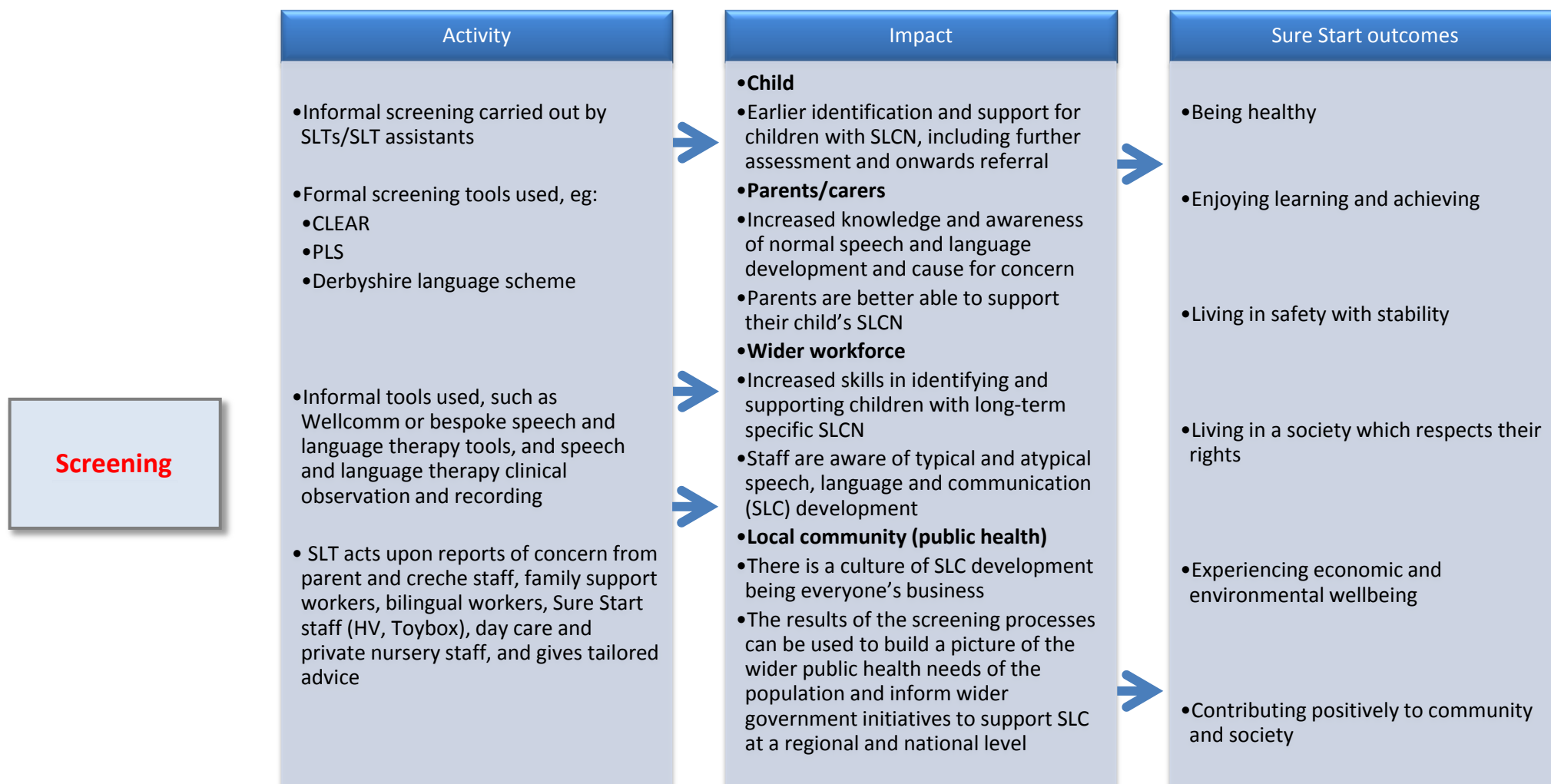
Interventions



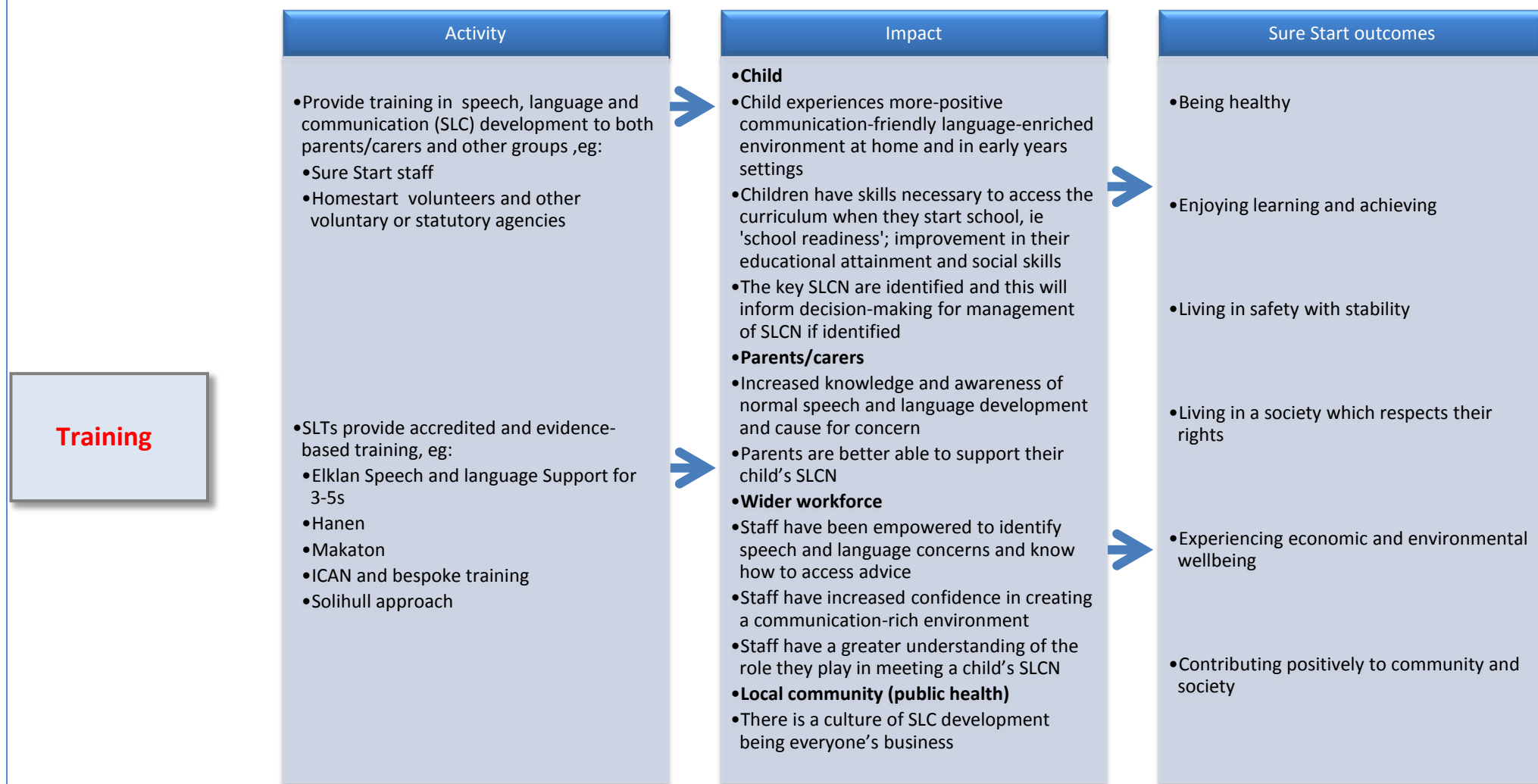
The role and Impact of speech and language therapy in services for children aged 2–3 years



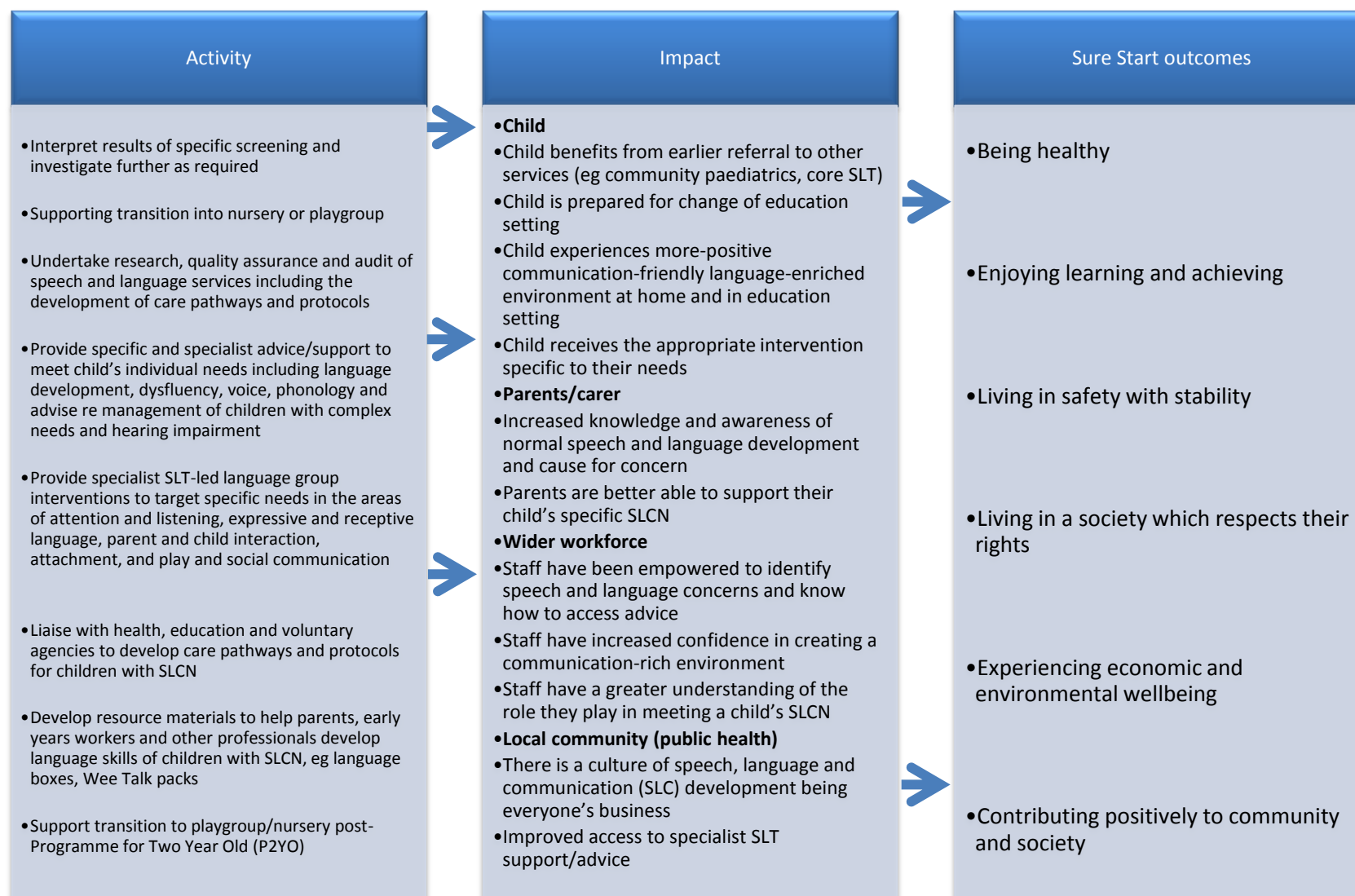
The role and impact of speech and language therapy in services for children aged 3–4 years



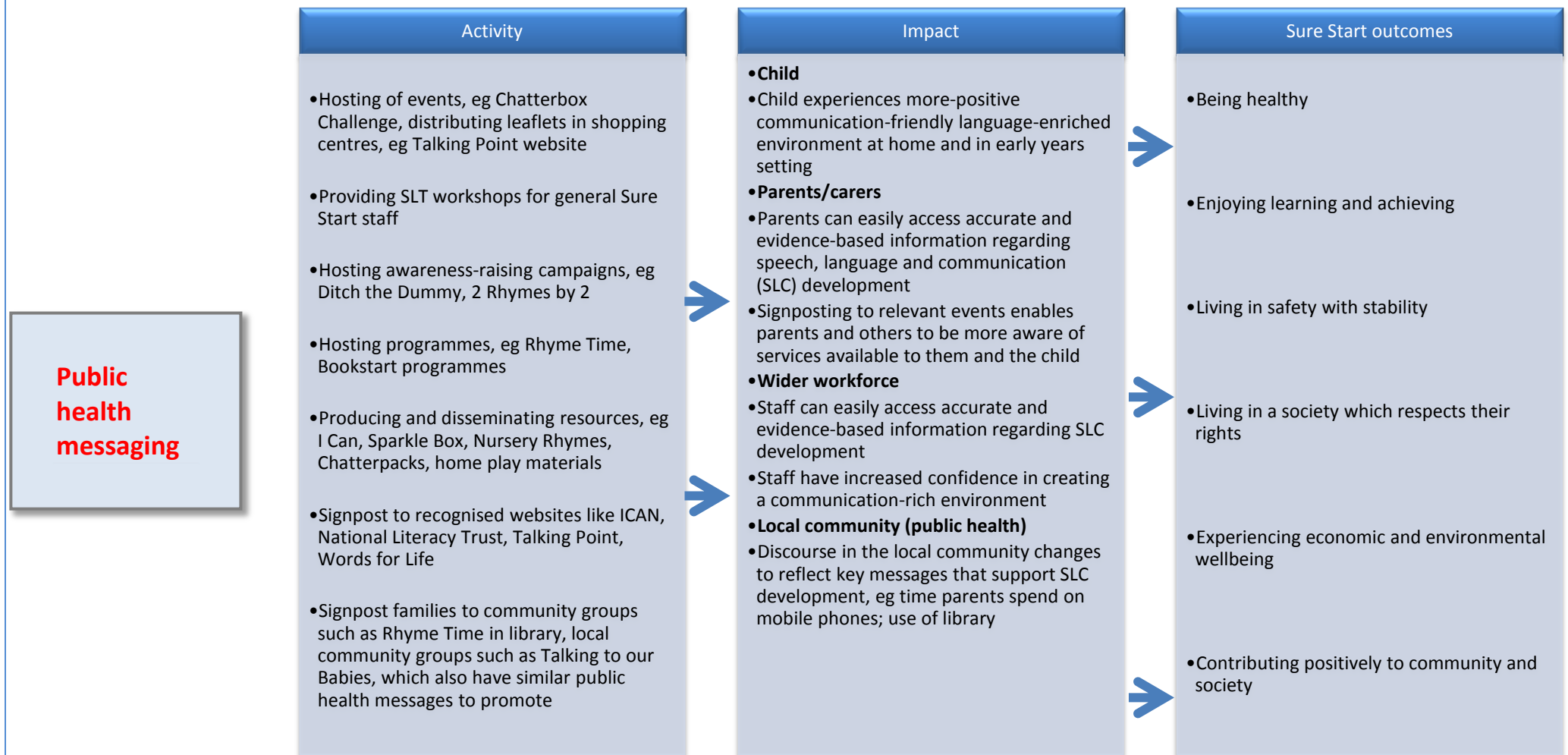
The role and impact of speech and language therapy in services for children aged 3–4 years



The role and impact of speech and language therapy in services for children aged 3–4 years



The role and impact of speech and language therapy in services for children aged 3–4 years



Data sources

The following table suggests data sets currently being collected, which may provide useful benchmarking information for use as outcome indicators.

Screening
<ul style="list-style-type: none"> Percentage of children with SLCN against normal population (7-10% vs 50% in deprived communities) Percentage of population accessing Sure Start services Children and Young People's Strategic Partnership (CYPSP) data sets– cypsp.org Sure Start Play including parental questionnaires and evaluations of speech and language service Number of children on child protection register WellComm and informal and formal SLC screening results Universal screening info from the Healthy Child, Healthy Future programme Statistics for referrals to core SLT services Statistics for referrals to other health and social care services, Sure Start services and community groups Individual and family case studies
Training
<ul style="list-style-type: none"> Sure Start staff evaluation of SLT service Sure Start Play records Monitoring of children on entry and exit to programme for two year olds (PFTYO) Bottle and dummy use Reading habits Quantity and severity of referrals to core SLT Number of parents/Sure Start staff/early years staff attending training Number of parents/Sure Start staff/early years staff obtaining certification
SLT interventions and public health messaging
<ul style="list-style-type: none"> Language development of children on entry into nursery school Statistics for referrals to core SLT services Number of transition reports completed Number of home visits completed Number of direct child contacts, eg to provide individual advice or programme Number of parent contacts to provide specific advice or programme Use of libraries by children aged under 4 years

Tools and approaches currently being used to measure change in children's language skills

Tool	Age range	Administration Who?	Administration How?	Administration When?	Technical standards Standardised	Technical standards Validity	Technical standards Sensitivity/ specificity*	Integral Intervention planning	Integral Progress analysis	Cost
Wellcomm	6 months – 6 years	Health professionals and childcare/ education staff	Observation Picture stimuli Activities/tasks	Any time in the given age range	NO	Validated against the Reynell Developmental Language Scales (RDLSIII) Strong validity with 0.899 positive correlation (With 0= no correlation and 1.0 = highest correlation)	High sensitivity identified ranging between 88% and 100% in the various age sections Specificity 58.5%	YES Intervention planning and activities directly linked to assessment results	YES Progress analysis achieved via re-screen following intervention	£320 for the complete toolkit (Manual, Rule and question book, Picture test book & Big Book of Ideas)
Sure Start Language Measure	23–27 months	Health professionals, but usually SLT	Parental report Word count on parental report	23-27 months	YES On 1,290 UK children aged 16-30 mths	-	-	NO	NO Assessment at one point in time only	Available online
BRISC (Bristol Surveillance of Children's Communication)	12 months – 7 years	Health professionals and education staff	Parental report Picture stimuli	When considering making a referral to SaLT	NO	No evidence of validity studies	No evidence	NO criteria for referral to specialist-level service only	NO	Available online

REEL (Receptive Expressive Emergent Language assessment)	Birth – 3 years	Speech and language therapist	Parental report Observation		YES US data only	Validated against the <i>Developmental Assessment of Young Children</i> , the <i>Early Language Milestone Scale-Second Edition</i> , and the <i>Cognitive Abilities Test - Second Edition</i>	Not known.	NO Assessment information/ results only	Can be repeated	Could not find UK supplier \$56 for manual
WILSTAAR (Ward Infant Language Screening Test Assessment Acceleration & Remediation)	8–10 months	Health visitor undertakes initial screen, at risk followed up by speech and language therapy	Parental report Observation	Between 8 and 10 months	NO	No evidence of validity studies, but linked with the REEL (see above)	Not known	YES Prescribed programme for infants identified at risk following screen		Not in print in recent years
Universal Assessment of Neurodevelopment	One-off assessment at 30 months	Health visitors	Parental report Picture stimuli	At 30 months	NO	Ongoing validity studies, based in Glasgow University	Sensitivity at 87% and specificity at 67% in predicting ongoing difficulties	NO Indicator of future need/risk only	NO Used as a predictor of future neuro-developmental difficulties 1 to 2 years later	Items available separately from different sources, rather than as pack
The Communication	Series for 3 –	Education,	Observation	Anytime between 3	NO	No evidence of	No	Information can help	Can be repeated, but	£29.99 for 3-year

Trust's Speech, Language and Communication Progression tools	18-year olds	childcare staff	Test questions	years and 18 years		validity studies	evidence	staff to group children by ability. No integral intervention	no direct comparison between scores	screening tool £101.97 for pack of all 4-18 year screening tools
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External evidence sources

These references provide an evidence base for the speech and language therapy interventions included in this document. They are listed according to the activity headings and are also referenced by application to age group.

Evidence	Antenatal	0–18 months	18 months – 2 years	2–3 years	3–4 years
Screening					
<ul style="list-style-type: none"> Seager E & Abbot-Smith K. Can early years professionals determine which preschoolers have comprehension delays? A comparison of two screening tools. <i>Child Language Teaching and Therapy</i> 2016; 33 (1): 67-79. Available from: journals.sagepub.com/doi/abs/10.1177/0265659016650977 Early years staff can accurately assess the language comprehension of 2-year-olds if provided with a tool that gives specific instructions on administration, but current frequently used procedures (EYFS:UCCS) are not fit for this purpose. The WellComm had good-to-acceptable levels of sensitivity and specificity, and significantly correlated with the Preschool Language Scale. 				Y	
<ul style="list-style-type: none"> Berkman ND, et al. <i>Screening for speech and language delays and disorders in children age 5 years or younger: a systematic review for the U.S. Preventive Services Task Force</i>. Rockville, MD: Agency for Healthcare Research and Quality, 2015. Available from: www.ncbi.nlm.nih.gov/books/NBK305674 Studies examining the ASQ in children ages 2 years, 3.5 years and 4.5 years reported comparably low sensitivity at all three ages (ranging from 50% to 59%), and better specificity for the 2- and 3.5-year-old samples (95% and 92%) than for the older sample (79% and 83%). Comparisons indicated that sensitivity and specificity of the toddler and preschool CDI versions were fairly close, suggesting that the CDI is robust in its ability to detect a language delay across the toddler and preschool years. 		Y	Y	Y	Y
<ul style="list-style-type: none"> Canadian Agency for Drugs and Technologies in Health. <i>Screening tools compared to parental concern for identifying speech and language delays in preschool children: a review of the diagnostic accuracy</i>. Ottawa: CADTH, 2013. Available from: www.cadth.ca/screening-tools-compared-parental-concern-identifying-speech-and-language-delays-preschool-children No health technology assessments, systematic reviews, meta-analyses, randomised controlled trials or non-randomised studies were identified regarding the effectiveness of screening tools compared to parents' expressions of concern to detect speech and language delays in preschool children. 		Y	Y	Y	Y
<ul style="list-style-type: none"> Kasper J, et al. Population-based screening of children for specific speech and language impairment in Germany: a systematic review. <i>Folia Phoniatr Logop</i> 2011; 63(5): 247-63. PubMed: 21304231. Available from: www.ncbi.nlm.nih.gov/labs/articles/21304231 			Y		

Evidence	Antenatal	0–18 months	18 months – 2 years	2–3 years	3–4 years
<ul style="list-style-type: none"> Law J, et al. Predicting language change between 3 and 5 years and its implications for early identification. <i>Pediatrics</i> 2012 Jul; 130(1): e132-e137. PubMed: 22689865. Available from: www.ncbi.nlm.nih.gov/pubmed/22689865 					
<ul style="list-style-type: none"> Larson AL. Language screening for infants and toddlers: a literature review of four commercially available tools. <i>Communication Disorders Quarterly</i> 2016; 38 (1): 3-12. Available from: journals.sagepub.com/doi/abs/10.1177/1525740115627420 Four language screening instruments for children under 36 months of age: the Early Language Milestone Scale (ELM Scale-2; Coplan, 1993), The Capute Scales: Cognitive Adaptive Test/Clinical Linguistic and Auditory Milestone Scale (CAT/CLAMS; Accardo & Capute, 2005), the Language Development Survey (LDS; Rescorla, 1989), and the MacArthur Communicative Development Inventories (CDI; Fenson et al, 1994) Researchers and practitioners should carefully consider how language screening tools relate to the population they work with. Each tool in this review has drawbacks in terms of sample characteristics, gold standard comparison tools or lack of data on sensitivity and specificity. Despite these concerns, the tools that were identified can, and should, be useful for a variety of reasons. 		Y	Y	Y	
Training					
<ul style="list-style-type: none"> Law J, et al. <i>Effectiveness, costing and cost effectiveness of interventions for children and young people with speech, language and communication needs (SLCN)</i>. London: DfE, 2012. Available from: www.gov.uk/government/publications/effectiveness-costing-and-cost-effectiveness-of-interventions-for-children-and-young-people-with-speech-language-and-communication-needs-slc 					
<ul style="list-style-type: none"> McDonald, et al. Increasing early childhood educators' use of communication-facilitating and language-modelling strategies: Brief speech and language therapy training. <i>Child Language Teaching and Therapy</i> 2015; 31(3): 305-322. Available from: journals.sagepub.com/doi/abs/10.1177/0265659015588203 Brief SLT training for early childhood educators can lead to increased use of some interaction strategies that help children's communication skills develop. 				Y	Y
<ul style="list-style-type: none"> Nottinghamshire Sure Start Children's Centres 'Home Talk' service: supporting two-year-olds with delayed language skills and their parents/carers. Available from: tinyurl.com/hjs674a A parent-implemented intervention for two-year-old children with delayed language development involving a series of home visits by a children centre worker. Health visitors identified the children and the speech and language therapy service provided the training. This intervention was evaluated with 16 families before the intervention, immediately after and at four-month follow-up, by measuring expressive vocabulary, pragmatics and parental stress. Twelve of the children's language skills developed at an accelerated rate and had caught up with age expectations by three years of age. Five were identified as having SLCN and were referred to specialist services. 				Y	

Evidence	Antenatal	0–18 months	18 months – 2 years	2–3 years	3–4 years
<ul style="list-style-type: none"> Girolametto L, et al. Training day care staff to facilitate children’s language. <i>American Journal of Speech-Language Pathology</i> 2003; 12: 299–311. The Learning Language and Loving It programme increased early years practitioners’ use of communication-facilitating strategies and children’s talkativeness and participation in conversation. 				Y	
<ul style="list-style-type: none"> Flowers, et al. Promoting early literacy skills: Effects of in-service education for early childhood educators. <i>Canadian Journal of Speech-Language Pathology and Audiology</i> 2007; 31: 6–18. 			Y	Y	Y
<ul style="list-style-type: none"> The Learning Language and Loving It programme increased early years practitioners’ use of abstract language and the frequency of children’s verbal responses to this abstract language in a book-sharing activity. 			Y	Y	Y
<ul style="list-style-type: none"> Girolametto L & Weitzman E. It takes two to talk—the Hanen program for parents: Early language intervention through caregiver training. In: McCauley R & Fey M (Eds.). <i>Treatment of language disorders in children</i>. Baltimore, MD: Brookes Publishing, 2006. See more at: www.thecommunicationtrust.org.uk/projects/what-works/intervention.aspx?targetgroup=0&agerange=1&deliveredBy=0&focustier=0&format=0&evidenceRating=0&ID=69#sthash.7ddJAc8p.dpuf [Please note: you need to register to view this page] 		Y	Y	Y	Y
<ul style="list-style-type: none"> Carter AS, et al. A randomized controlled trial of Hanen's 'More Than Words' in toddlers with early autism symptoms. <i>Journal of Child Psychology and Psychiatry</i> 2011; 52: 741-752. DOI: 10.1111/j.1469-7610.2011.02395.x. See more at: www.thecommunicationtrust.org.uk/projects/what-works/intervention.aspx?targetgroup=0&agerange=1&deliveredBy=0&focustier=0&format=0&evidenceRating=0&ID=70#sthash.8YfMioNf.dpuf [Please note: you need to register to view this page] 		Y	Y	Y	Y
<ul style="list-style-type: none"> Elklan - Communication Friendly Settings. The Communication Trust, 2017. Available at: www.thecommunicationtrust.org.uk/projects/what-works-training/training-database/elklan-communication-friendly-settings/ [Please note: you need to register to view this page] Elklan A key component of <i>Talking Matters</i> was the accredited ‘Speech and Language Support for 0-3s’ course. file:///C:/Users/alisonmccullough/Downloads/Final_Elklan_Evaluation_Report_2017_University_of_Sheffield.pdf 		Y	Y	Y	Y
<ul style="list-style-type: none"> Law J & Pagnamenta E. Promoting the development of young children’s language. <i>Bulletin</i> 2017; 777: 12-15. 	Y	Y	Y	Y	

Evidence	Antenatal	0–18 months	18 months – 2 years	2–3 years	3–4 years
SLT interventions					
<ul style="list-style-type: none"> Johnson R & Wilson H. Parents' evaluation of understanding your child's behaviour, a parenting group based on the Solihull Approach. <i>Community Practitioner</i> 2012; 85(5): 29-33. Available from: solihullapproachparenting.com/wp-content/uploads/delightful-downloads/2015/11/Johnson.-R-and-Wilson-H.-Parents-evaluation-of-UYCB-2012.pdf 		Y	Y	Y	Y
<ul style="list-style-type: none"> NICE. <i>Solihull Approach Parenting Group</i>. London: NICE, 2009. Available from: www.nice.org.uk/sharedlearning/solihull-approach-parenting-group 		Y	Y	Y	Y
<ul style="list-style-type: none"> Bickford-Smith A, Wijayatilake L, Woods G. Evaluating the Effectiveness of an Early Years Language Intervention. <i>Educational Psychology in Practice: theory, research and practice in educational psychology</i> 2005; 21(3): 161 – 173. Available from: www.thecommunicationtrust.org.uk/projects/what-works/intervention.aspx?letter=M&ID=37#sthash.lb82GYkF.dpuf [Please note: you need to register to view this page] 		Y	Y	Y	
<ul style="list-style-type: none"> Millard SK, Edwards S & Cook FM. Parent-child interaction therapy: Adding to the evidence. <i>International Journal of Speech-Language Pathology</i> 2009; 11: 61-76. Available from: www.thecommunicationtrust.org.uk/projects/what-works/intervention.aspx?letter=P&ID=68#sthash.M9izjwvc.dpuf 				Y	Y
<ul style="list-style-type: none"> Flippin M, Reszka S & Watson LR. Effectiveness of the Picture Exchange Communication System (PECS) on communication and speech for children with autism spectrum disorders: A meta-analysis. <i>American Journal of Speech-Language Pathology</i> 2010; 19: 178–195. Available from: www.thecommunicationtrust.org.uk/projects/what-works/intervention.aspx?letter=P&ID=54#sthash.QBsWnSU9.dpuf [Please note: you need to register to view this page] 		Y	Y	Y	Y
<ul style="list-style-type: none"> Law J, et al. 'What Works': Interventions for children and young people with speech, language and communication needs. London: DfE, 2012. Available from: www.gov.uk/government/uploads/system/uploads/attachment_data/file/556912/DFE-RR247-BCRP10.pdf Fifty-seven interventions currently in use with preschool and primary school children. 				Y	Y
<ul style="list-style-type: none"> Law J & Pagnamenta E. Promoting the development of young children's language. <i>Bulletin</i> 2017; 777: 12-15. 	Y	Y	Y	Y	

Evidence	Antenatal	0–18 months	18 months – 2 years	2–3 years	3–4 years
Public health					
<ul style="list-style-type: none"> Law J & Pagnamenta E. Promoting the development of young children’s language. <i>Bulletin</i> 2017; 777: 12-15. 	Y	Y	Y	Y	
<ul style="list-style-type: none"> Law J, et al. <i>Effectiveness, costing and cost effectiveness of interventions for children and young people with speech, language and communication needs (SLCN)</i>. London: DfE, 2012. Available from: www.gov.uk/government/publications/effectiveness-costing-and-cost-effectiveness-of-interventions-for-children-and-young-people-with-speech-language-and-communication-needs-slcN 		Y	Y	Y	Y
<ul style="list-style-type: none"> Smith C, et al. An evaluation of an integrated model of speech and language therapy in public health practice for early language development. <i>Child Language Teaching and Therapy</i> [First published 16 November, 2016] Available from: journals.sagepub.com/doi/pdf/10.1177/0265659016674763 		Y			
General references					
<ul style="list-style-type: none"> Fuller A. Speech and language therapy in Sure Start Local Programmes: a survey-based analysis of practice and innovation. <i>International Journal of Language and Communication Disorders</i> 2010; 45(2): 182- 203. 					
<ul style="list-style-type: none"> Gibbard D & Smith C. A transagency approach to enabling access to parent-based intervention for language delay in areas of social disadvantage: A service evaluation. <i>Child Language Teaching and Therapy</i> 2016; 32(1): 19- 33. 					
<ul style="list-style-type: none"> Melhuish E, Belsky J, Leyland AH & Barnes J. Effects of fully established Sure Start Local Programmes on 3 year old children and their families living in England: a quasi-experimental observational study. <i>The Lancet</i> 2008; 372(9650): 1641- 1647. Available from: www.thelancet.com/journals/lancet/article/PIIS0140-6736(08)61687-6/abstract 					

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