

Closing the gap on speech, language and communication in the early years: Local case studies Doncaster

This case study explores the local views on approaches taken to successfully reduce the gap between socio-economically disadvantaged children and their peers on speech, language and communication indicators in the early years. Doncaster was one of five local authorities identified as having made progress in closing this gap over the period 2016–2018. The case study is based on desktop research, interviews and a focus group meeting with a cross-section of individuals involved in overseeing and delivering provision relevant to early language development.

These speech, language and communication case studies have been produced by the Early Intervention Foundation (EIF) as part of our work to support the delivery of the Department for Education's Social Mobility Action Plan. To read more about our project, including how local authorities were selected and the research methodology, see: <https://www.eif.org.uk/resource/closing-the-gap-on-speech-language-and-communication-in-the-early-years-local-case-studies>

Summary

Doncaster is a metropolitan borough in South Yorkshire. Its Early Years Foundation Stage Profile outcomes in Communication and Language have improved for children eligible for free school meals over a number of years, so that in 2018 the Communication and Language gap between children eligible for free school meals and all other children nationally was significantly narrower than the national gap. No known demographic changes contributed to the improved outcomes.

This case study identifies a number of factors which appear to have been important in narrowing the language gap.

Strategic leadership

Leaders in Doncaster have shown a consistent commitment to improving developmental outcomes for the borough's youngest children. There has been continuity in the commitment to the early years and early intervention not only in the executive, but also at the political level. Strategic plans emphasise birth to age 5; underpinning commissioning arrangements include a focus on communication and language, and articulate clearly both the impact of poor language skills on a wide range of long-term outcomes and the specifics of environments that best support language development.

Integrated working

Doncaster has integrated a number of 0–5 services into a single management structure. Early years improvement and inclusion advisers work with Family Hub workers in localities, alongside midwives and health visiting teams. The role of community nursery nurses in the health team has been instrumental in joining up the offer to families and to early years settings. Every PVI setting has an identified community nursery nurse with whom they meet termly to discuss children's progress.

A focus on the family

Doncaster has ensured that its Family Hubs have retained their ability to provide universal as well as targeted support, and 'conception to 2' input to disadvantaged families before children enter settings. Universal groups are run by the community nursery nurses and the early years workers based in the hubs. A local authority Early Years Inclusion Officer has a specific role to support the groups with the communication and language aspect of their offer.

Between 2005 and 2018, the local authority invested in an extensive programme of training for practitioners across agencies, focused on how to help parents use book-sharing to develop their children's language. The training was provided by an independent speech and language therapist. At the same time the local authority funded a scheme providing a monthly book in the post for every child aged 0–5 whose family enrolled.



Early identification and support

Doncaster has developed clear, codified systems for identifying speech, language and communication needs early and providing follow-on support. A single Integrated Progress Check at age 2–2.5 years identifies children who may need additional help with language and communication. The progress of children causing concern is discussed at the termly liaison meetings between settings and their designated community nursery nurse, with next steps for the child and family identified. Progress is monitored and the community nursery nurse may repeat the Ages and Stages assessment if appropriate.

Children may also be discussed with the area SENDCO at the termly 'inclusion conversation' meetings which are held in all PVI settings. Settings can apply for an Early Intervention Allowance to enhance a plan for a child with a period of targeted adult support.

Professional development

The in-depth training provided in Doncaster through the book-sharing initiative has helped to develop a workforce highly skilled in how to promote children's language development in the setting and through support for parents. Childminders receive specific pre-registration training on communication and language; some act as 'communication champions' and provide peer-to-peer support. Moderation training has been another important aspect of local professional development; free training is provided termly not only to Reception teachers but to all those working with 0–5s, covering each development band in the prime areas of learning. As a result, practitioners across agencies develop a secure and detailed understanding of child development, including speech and language development.

Take-up and quality of early education

Doncaster has had higher take-up of funded places for 2-year-olds than the national average since 2015, with an above-average percentage in good or outstanding provision. Agencies work together to encourage families to take up places. Family Hub staff keep a spreadsheet of contacts showing progress in reaching each family whose child is eligible, recording the reason if they choose not to take up the offer. The local authority early years team are able to provide substantial support to help settings improve practice where it is less than good.

The local context

Doncaster is a metropolitan borough in South Yorkshire. Coalmining was formerly a major industry and pit closures in the 1970s and early 1980s caused some economic difficulties; the town then developed a strong service industry. Overall levels of disadvantage in the early years are just above the national average and EAL levels below average. Polish is the most commonly spoken language for EAL learners, followed by Romanian and Kurdish.

KEY STATS Doncaster



The 0–5 child population is 22,165, against a national local authority average of 26,822.



The percentage of 4–5-year-olds eligible for free school meals is above the national average (16% compared to 14%)*. The local authority is ranked 29th out of 151 local authorities on the Index of Multiple Deprivation.*



The percentage of 4–5-year-olds who have English as an Additional Language is below the national average (11% compared to 19% nationally)*.



At 2–2.5 years, the percentage of children at or above the expected level in language on ASQ is below regional and national averages. But by age 5, overall Communication and Language outcomes are above national levels, and the gap between children eligible for free school meals and all other children nationally is smaller than average: a gap of 9.4 percentage points compared to a gap of 12.2 percentage points nationally.

* 2019 data

The borough has been identified as a social mobility coldspot and has a DfE-funded Opportunity Area. Its focus is on Key Stage 2 rather than early years, as that is where the attainment gap is greatest.

The borough works with one co-terminous clinical commissioning group (CCG). Health visiting services are commissioned by the local authority from the Rotherham, Doncaster and South Humber NHS Trust. Speech and language therapy services are commissioned by the CCG from Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust. There are 11.93 full-time equivalent speech and language therapists/therapy assistants in the Doncaster team, which represents a ratio of 5,845 children aged 0–19 per speech and language therapist/assistant. The team are now only commissioned to provide a specialist service; in the years leading up to this case study they were also able to provide training and preventative early years services.

There are 406 active early years registered providers in the borough of which 263 are childminders. 3.4% of funded provision for 2-year-olds is in schools and 96.6% in PVI settings. The local authority has no maintained nursery schools. Two-thirds of primary schools have a nursery class.



Critical success factors in narrowing the language gap

- ✓ Strategic leadership
- ✓ Integrated working
- ✓ A focus on the family
- ✓ Early identification and support
- ✓ Professional development
- ✓ Take-up and quality of early education

The context for EYFSP improvements for disadvantaged children

In 2016, 73.8% of children eligible for free school meals (FSM) in Doncaster achieved the expected level of development in the Early Years Foundation Stage Profile (EYFSP) for Communication and Language. In 2018, this figure was 74.7%. The gap between children known to be eligible for FSM and all other children nationally was 2.8 percentage points smaller than the national gap.

Doncaster's improvements in Communication and Language over the 2016–2018 period were specific to children eligible for free school meals; Communication and Language outcomes for non-eligible children remained static, although above national levels.

Looking at the gap between children eligible for free school meals and all other children, it is specifically in Communication and Language where Doncaster does well compared to the national picture. The 2018 gaps in overall Good Level of Development, Literacy or Mathematics were also smaller than national gaps, but only marginally so.

No known demographic changes contributed to the improved outcomes.

The speech, language and communication issues

Interviewees described the main speech, language and communication issues in the borough as about the need to help parents understand and recognise their role as their child's primary educator. They spoke about the quality of parent–child interactions, with parents often being

'in a hurry' and not always giving children time to respond to questions, or commenting on what the child has said. These trends are seen across all social groups, but are more prevalent in disadvantaged areas.

The progress of EAL learners is an issue for the borough. This group underachieve on Communication and Language in the EYFSP compared to EAL learners nationally. However, since this underachievement is also present in Doncaster across all areas of learning (not just in language), it is felt that assessments may be unreliable. Work is underway to provide training on profiling EAL learners, for example considering reasonable adjustments and using a child's home language in assessing most Early Learning Goals.

Similar assessment issues may be affecting outcomes on the Ages and Stages health visitor assessment at age 2, where children's Communication and Language outcomes are below national and regional averages, but above average in the other ASQ areas assessed. The recent Public Health England training has helped practitioners understand the importance of parents making judgments about their child's understanding and use of their home language rather than English – and indeed helped them promote wider messages to families about continuing to use the language in which they are most confident with their child, even raising this with parents in the antenatal period.

Boys in Doncaster underachieve compared to girls in aspects of communication and language, although not significantly against national outcomes. Cultural issues may be relevant here; interviewees described the 'strong and silent' male ethos in the local community.



Challenges and how they have been overcome

Challenge 1: Reaching families who may not readily engage with services.

- ✓ Increasing membership of Family Hubs by locating the services there that families naturally engage with, such as midwives and health visitors.

Challenge 2: Making the Integrated Review at age 2 work on the ground.

- ✓ Establishing a multi-agency steering group to problem-solve issues.
- ✓ Putting in place a clear system of accountabilities for all partners.

Strategic leadership

The people

Leaders in Doncaster have shown a consistent commitment to improving developmental outcomes for their youngest children.

The local authority has been on an improvement journey since 2015, when its children's services were in intervention and an Independent Social Care Children's Trust was set up at arm's length from the council. A new Director of Children's Services was appointed; six months ago he became Chief Executive. Interviewees noted the strategic direction he brought and still brings: 'He is very clear about early intervention, very clear about early years development, very clear about integrated working, very clear about systems thinking, very clear about place and that drives everything we do.' The current DCS also came to Doncaster

in 2015 and has held Assistant Director roles which have always included early help and early intervention, Children's Centres and early years provision.

There has been continuity in the commitment to the early years and early intervention not only in the executive, but also at the political level – from Doncaster's mayor, now in her second term, and from the lead cabinet member for children who has been in post for a similar period. A former teacher, she 'understands about child development, champions children 100% and has driven changes from the top' (Director of Children's Services).

The Director of Public Health is equally committed to children's developmental and educational outcomes. He brings a real understanding of the importance of communication and language as one of the wider determinants of health. 'Our social model of health is about re-connecting people with others', he notes. 'Most of health and wellbeing is about social connection and that's an interesting lens when you think about communication.'

Part of the Public Health grant has been allocated as a £5m wider determinants budget, which helps to fund Family Hubs as well as work on Domestic Abuse and the local authority's contribution to child and adolescent mental health.

Strong leadership, grounded in the realities of families' lives, is also evident in the local authority's Head of Early Intervention and Localities. She is described as 'unusual in that she is equally at home arguing the toss with directors and politicians about where we should invest, and with parents and on the frontline with staff. And I think that's what you need – you need people who are at home around the board table but also out on the frontline' (Director of Public Health).

The plans

Doncaster has since 2015 developed a set of nested plans and partnership structures. The Children and Young People's Plan has as priorities that 'children have the best start in life' and 'to ensure that children are school ready'. Under this sits a Starting Well Strategy, which aims to ensure that children from birth to 5 have access to the right health and education support. Its detailed delivery plan describes the way integrated systems will support child development and high-quality early years provision.

These plans are important. As the Director of Children's Services noted: 'It is hard to protect any early intervention provision ... that is not saying we are not committed to it. We are absolutely 100% committed. If austerity keeps on biting and we keep on needing to redirect into statutory child protection services there will always be a threat. What I would say is that the difference in Doncaster is all of our strategies are pointing to early intervention and locality based integrated working. And so when we get into really difficult conversations about early intervention services and funding for them there are plans and strategies in place ... We can't have it in the borough plan and not deliver against that.'

The Starting Well strategy acted as a guide and blueprint for the Healthy Child Programme when its commissioning moved to the local authority. As the Director of Public Health noted: 'It was a signal to the provider of these services that we were not interested in health visiting for health visiting's sake ... it is about health visiting for outcomes.'

The specification for the Early Help service includes a focus on communication and language, making clear that 'the primary aim of Doncaster's early help service is to close the gap between disadvantaged children and their peers in relation to three interdependent and reinforcing domains: development and school readiness (including communication and language); social and emotional development and physical health (including key indicators

such as tooth decay and obesity) and harm (including avoidable injuries).’ The specification sets out ‘a priority to provide services which support the acquisition and improvement of speech, language and communication skills’. It also demonstrates a deep understanding of the impact of poor communication and language skills on a wide range of outcomes: ‘educational success throughout life, and the self-regulation competencies associated with employment and a lower risk of criminality or mental ill-health’.

The specifics of the home learning environment that support language development are also clearly understood and articulated: ‘The quality of home learning is a substantial determinant of children’s future attainment. Working with parents as ‘co-educators’ can have a real impact on a child’s future development ... key concepts include communicating and modelling language; showing, explaining and demonstrating; exploring ideas, encouraging and questioning; providing a narrative for what they are doing and facilitating and setting challenges.’

Integrated working

Doncaster took early steps to integrate a number of 0–5 services into a single management structure, and to develop multi-agency locality working.

There is a single local authority Early Intervention team with three elements:

- A team of 16 Early Years Inclusion officers - four in each locality, each managing a Portage Home Visitor, an Area SENDCO and a SEN support worker. All have a dual role in supporting both quality in early years settings/Family Hubs and SEND work.
- 12 Family Hubs delivering ‘early help’ (now for the 0–25 age range but still with a focus on 0–5). Each locality has a Family Hub manager and an Early Years coordinator who manage the Early Years Development workers and volunteers. These practitioners deliver services in partnership with midwives and community nursery nurses in the health visiting team
- An Early Help Team of practitioners working with children and young people 0–25 and their families.

From 2014 a decision was taken to align council and health services for children geographically into neighbourhoods. This is felt to have been important in helping to narrow disadvantage gaps because it reduced unnecessary duplication and enabled more effective communication between health, care and education professionals.

“The real beauty of 2015 to 18 is that we were looking at integration and an integrated pathway and health visitors working side by side with early years practitioners and Children’s Centre practitioners ... all starting to face more and more into localities and this is what has made the difference.”

Director of Children’s Services

The role of community nursery nurses was described as instrumental in joining up the offer to families – and to settings. When the council took over commissioning of the Healthy Child Programme, a greater skill mix was introduced to a health visiting team, which had become a

‘quite top-heavy service’. Community nursery nurses were appointed with a distinct role in the locality arrangements – for example, co-running groups in the Family Hubs, and liaising with other early years practitioners working with a child and family. To this end, every PVI setting in Doncaster has an identified community nursery nurse with whom they meet termly.

Health visitors are very much ‘out there’ in the localities. They no longer run baby clinics, for example; outside of the mandated contacts, families know they can easily access advice and support when they come to universal groups in the Family Hubs.

Locality team meetings are held regularly. This has helped people to understand one another’s roles, and share resources and ideas. An example is work on assessing children’s development. Through moderation meetings, practitioners from different backgrounds have been able to reach a shared view of where children are and should be at different stages. A locality team manager described how she ‘walked into a meeting the other day ... and in that meeting ... we had the Early Years team in there and the health team and ... and someone from a nursery. They were just sharing photographs and tips and tools, and it was just wonderful ... moderation and assessments together so they are getting a joint impression of what children are like, so that we are all talking the same language.’

Doncaster’s integrated provision was praised in a recent Ofsted/CQC SEND inspection: ‘Support for children in the local area aged 0 to 5 years is cohesive and coherent. Frontline practitioners in early years services show a clear commitment to improving health, education and care provision for young children with SEND. Partnership working is contributing to better outcomes for this group of young children.’

A focus on the family

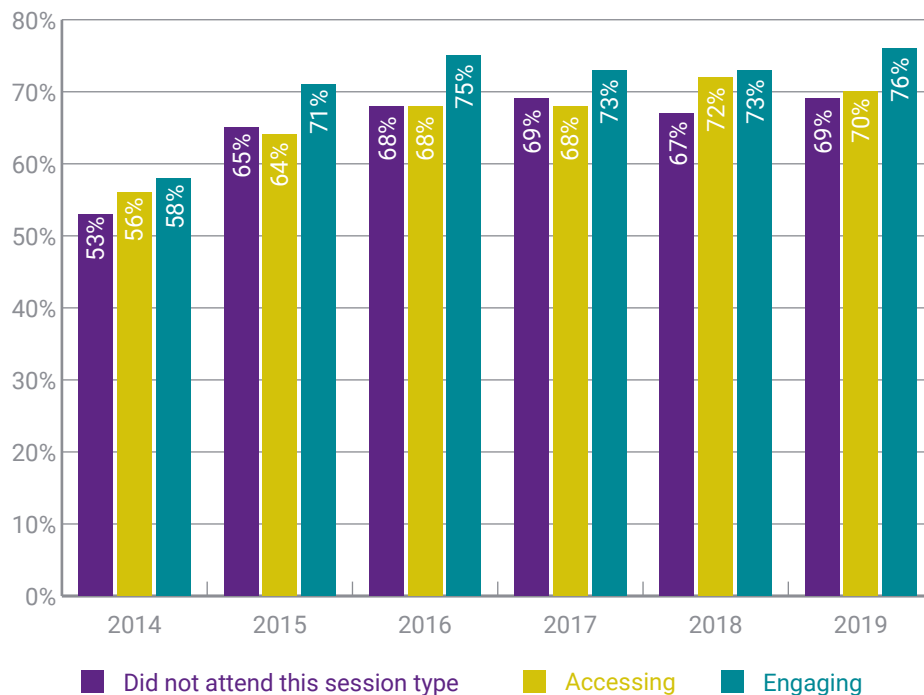
Universal groups with a language focus

Doncaster’s Family Hubs are able to provide universal as well as targeted support for families; the Early Help service’s specification requires ‘a non-judgmental universal gateway which provides opportunities to offer targeted support through maintaining children within universal services whilst helping those most at risk and proportionate to their need’. Interviewees saw this as very important in encouraging families to engage with services. The Hubs are also able to provide ‘conception to 2’ input to disadvantaged families before children enter settings.

Universal groups are run by the community nursery nurses and the early years workers based in the hubs. An local authority Early Years Inclusion officer has a specific role to support the groups with the communication and language aspect of their offer. The focus of groups varies, but there is always exploration of how speech, language and communication can be woven in, as ‘the golden thread that runs through everything’.

The impact of the universal groups is regularly evaluated by tracking children’s EYFSP outcomes. Families are classified as ‘engaging’ (attending Family Hubs three times or more within any given year prior to the EYFSP assessment), ‘accessing’ (attending once or twice), or ‘not attending’. Although the data is not perfect and will necessarily be complicated by other factors in the types of families who engage with services, trends show better EYFSP Good Level of Development (GLD) outcomes for those who engage and better outcomes for those who engage early (four to five years before their EYFSP assessment). The type of session families attend are categorised, as ‘employment support and childcare’, ‘health and development’, ‘relationship support’ and so on. Analysis shows a notable impact of engaging in health and development themed sessions with a 2016–19 three-year average six-percentage-point advantage in EYFSP GLD for those engaging over those not attending sessions of this type.

PERCENTAGE REACHING A GOOD LEVEL OF DEVELOPMENT WHO ATTENDED A HEATH & DEVELOPMENT THEMED SESSION



Book-sharing

Between 2015 and 2018 Doncaster invested in a large-scale book-sharing project to improve outcomes in speech, language and communication. An independent speech and language therapy consultant was contracted from the start to provide a consistent, multi-agency training offer on speech, language and communication for all practitioners working in early years.

At the same time the local authority engaged with the Imagination Library book-gifting scheme, which provided a monthly book in the post for every child aged 0–5 whose family enrolls. By the middle of 2018 3,676 children had ‘graduated’ from the scheme at age 5. Overall take-up by parents was 68.5%. Children in particular groups were targeted and take-up carefully monitored; 80% of funded 2-year old-children in PVI settings and 95% in schools took part, along with 75% of children eligible for the Early Years Pupil Premium, 95% of Looked After children, and almost half of Gypsy, Roma and Traveller children.

Interviewees all felt that this initiative had made a significant contribution to Doncaster’s improved speech, language and communication outcomes, emphasising that this was not simply a result of the book provision; as one interviewee explained: ‘although the Imagination Library is book-based ... the book is a vehicle, the way in to communication and language’. The most important element, according to the speech and language therapist involved, was ‘the work we did behind the scenes agreeing what to do with the books that children were getting and how they were being used in the family. It was also about the book chatter sessions we developed and how they used the books in the Family Hub. This was a huge piece of work and by working with everybody we managed to do it.’ The multi-agency element of the training was noted as valuable, bringing different professions together, bringing schools and PVI settings together, and enabling school-based practitioners to learn from Family Hub practitioners.

One aspect was training for Early Years Development Workers in the Family Hubs, which aimed to improve the quality of their delivery within the group sessions they offered in the Hubs, specifically around speech and language. The evaluation of the project found important changes in practice; the Hubs used the Imagination Library books as core resources in the groups they ran, and generic 'Stay and play' sessions were often refocused, for example as 'Book Chatter, Book Play', or 'Let's tell a story'.

The impact on disadvantaged children who may not have books at home was noted by interviewees, and the impact on boys of having something concrete they could bring in and share. 'It really helped to shift the language that the boys were using in their preschool room,' said one nursery manager.

The programme was evaluated by parent/carer survey and against EYFSP outcomes. The percentage of parents reading with their children five or six times a week went up from 49% before enrolment to 83% after. 75% of parents surveyed reported that their child's vocabulary had increased. The percentage of children achieving at least the expected level in communication and language on the EYFSP increased by 3.3 percentage points between 2015 and 2017. Outcomes in Literacy also improved, with children eligible for FSM outperforming their national peers.

The Imagination Library work ended in 2018; it was described as 'a casualty of austerity'. Nevertheless, interviewees noted its legacy – a skilled workforce as a result of the well-embedded training, and a habit of working together across settings and agencies. They observed that funded projects like this give people time and a focus on working together, 'kick-starting' long-lasting partnership relationships.'

“Having the freedom to do small scale and symbolic initiatives (like the Imagination Library) that aren't going to change the world by itself but trying to identify one or two things that they can all buy into is really important. Imagination Library was bought into by Health Visitors and midwives.”

Director of Public Health

A few settings have continued with book-gifting. A teacher told us: 'In our school we acknowledged the importance of the book-sharing as a vehicle to reach families. We have kept it going because it was working so well. Not every child gets a book every month, but at the end of a year they will all have received four books. The children get the books and then the parents come in and do an activity morning with the children – we model to them how to read a story and demonstrate how reading a book can encourage a conversation about it.'

Early identification and support

Doncaster has developed clear systems for identifying speech, language and communication needs early and providing follow-on support. A great deal of work has been done to bring together assessment systems at age 2. Commissioning of the Health Visiting Services includes the delivery of an Integrated Progress Check jointly with early years settings;

parents are asked to share with settings the Ages and Stages (ASQ) assessment they have completed with the health visiting team, and if this does not happen the setting can request the report via the health visitors' single point of contact phone line. The progress of children causing concern is discussed at the termly liaison meetings between settings and their designated community nursery nurse in the health visiting team, with next steps for the child identified. Progress is monitored by the setting and the community nursery nurse may repeat the ASQ if appropriate.

“The integrated review has really helped because the parents are coming in and they are sharing the data. It used to be your little red book and the EYFS weren't joined up. But now we have seen a real shift as the PVI settings are identifying early and are able to get the help straight away. We are all talking to each other and the parents can see we are all on the same page.” Nursery manager

Children may also be discussed with the area SENCO at the termly 'inclusion conversation' meetings which are held in all PVI Settings. The locality area SENCO may then help the setting plan for the child and 'will have an overview of that child and they can then follow that child through', together with health partners.

Settings can apply for an Early Intervention Allowance, in order to enhance an agreed plan for a child with a period of targeted adult support. Funding for the allowance comes from the local authority high-needs budget, applies to the whole 0–5 age range, and is available to all providers including childminders and schools. Settings normally use the funding to provide additional staffing. The predominant need for which the allowance has been allocated is speech, language and communication.

“We have less lost children... in the past we might have lost some of those valuable years and the family might have needed help but not received it” Nursery manager

The systems for early, targeted support are doing their job in reducing the need for more specialist services. The speech and language therapy manager reported that the service had seen a year-on-year increase in all referrals except those for 0–5s with speech, language and communication not associated with another condition, and attributed this difference to the work of partner services and early years settings.

Where children are appropriately referred to the Speech and Language Therapy service but do not attend appointments, there are systems in place to follow this up with the family. Health visitors and speech and language therapists all use the same SystmOne software, which informs the health visitors via a task if a child 'was not brought'. The community nursery nurse or health visitor then contacts the family to support them to attend if the service is still needed.

Ofsted/CQC have commented on the effectiveness of Doncaster's provision in the local authority's SEND inspection: 'The needs of children aged 0 to 5 years are identified early and swiftly. This is because early childhood health programmes and working relationships between health, care and education colleagues are well established. Professionals have a good understanding of each other's roles, they share information, and coordinate support effectively. A prime example of this is the way in which the health visiting service delivers the Healthy Child Programme in which families access a range of universal services from the antenatal period onwards. This helps to identify any additional needs that children have.'

Professional development

The sustained training provided in Doncaster through the book-sharing initiative is felt by interviewees to have developed a workforce highly skilled in how to promote children's language development in the setting and through support for parents. Key was the form of training: not just being asked to 'go on another course', which interviewees noted often meets resistance from practitioners, but instead being able to develop an ongoing relationship with the speech and language therapy training provider, who worked alongside them to build trust, engaging them over time with information, mentoring and follow up meetings.

Another important aspect of local professional development has been moderation training, offered not just to Reception teachers but to all those working with younger children – including health practitioners. Free moderation training is provided termly for each development band in the prime areas of learning, supported by a bank of resources which practitioners can take away and use as a basis for staff discussions in the setting. What this means is that practitioners across agencies develop a secure and detailed understanding of child development, including speech and language development.

Since childminders are the mainstay of Doncaster's early years provision, the local authority has developed specific professional development systems to support them. There are childminder networks which meet regularly in localities, and childminder lead practitioners who are champions for speech, language and communication and provide peer-to-peer support. In the years before the period covered by this case study, a six-week pre-registration training course for childminders was provided by the local authority; now it has been adapted to add a seventh session dedicated solely to communication and language.

Take-up and quality of early education

Doncaster has had higher take-up of funded places for two-year-olds than the national average since 2015. An above-average percentage of these children were in good or outstanding provision in 2014–18. In 2018, 99% were in good or outstanding provision.

A 'golden ticket' is sent to parents/carers if their child is eligible for 2-year-old funding. Family Hubs play a key role in publicising the offer early through their universal groups; once they receive the data on which families are eligible they 'do lots of getting out there, door-knocking, talking to people and work hard to engage people'. Hub staff keep a spreadsheet of contacts showing progress in reaching the family and recording the reason if they choose not to take up the offer.

Where families make this choice, as in some minority ethnic groups, such as Gypsy Roma families, every effort is made to encourage the family to attend groups in the Hubs instead.

Currently, there are nine primary schools in Doncaster that offer two-year-old funded provision on-site. Recognising the need for staff to develop new skills to meet the needs of these very young children, the local authority offers specific support and guidance, with a particular focus on language development.

The local authority early years team are able to provide substantial support to help settings improve practice. Two officers work with childminders post-registration until their first Ofsted inspection. 'Getting to Good' group training is offered to settings with Ofsted 'Requires Improvement' judgments. The programme includes a range of workshops and training on early language developed by the external speech and language therapy consultant who was involved in the book-sharing project. Part of the package is a Reflective Audit Tool which is jointly undertaken with the provider. The audit generates recommended actions and leads to a plan that will later be jointly reviewed.



Innovations in Doncaster

- ✓ Combining book-gifting with a sustained multi-agency training programme on how to use shared reading as a vehicle for language development.
- ✓ The use of birth to 5 moderation training across agencies to help practitioners develop a deep understanding of developmental progress in language.
- ✓ Developing and codifying systems to monitor over time the progress of children identified as delayed in language at their 2-year review.

The future

There is a strong sense of energy and a wish to improve further in Doncaster. As one interviewee said: 'It doesn't stand still here, we are always pushing forward through new strategies.'

Recent developments that interviewees felt will help them continue to narrow the gap include:

- Joint work with other South Yorkshire local authorities, funded by the DfE's Early Outcomes Fund, which has included developing a regional speech, language and communication needs skills framework and undertaking a regional workforce skills audit, putting in place a regional 'train-the-trainers' programme to create a sustainable speech, language and communication needs training team, and implementing a new approach to commission and deliver interventions.
- A Doncaster 'First 1001 Days' Place Plan, launched in 2018 and providing for the first time a multi-disciplinary performance framework for education, health and care for their work with the conception to age 2 group.
- A '100 Doncaster things to do before you are 11' online resource to support family interaction, in the form of key messages along with infographics, videos and links to further information loaded onto a timeline.
- Work with schools to identify communication champions who will attend termly training with the Speech and Language Therapy service, and coordinate and oversee provision which the school can make from its own resources for children with lower-level speech, language and communication needs.

Interviewees also identified factors that present risks to continued progress:

- Very high caseloads and recruitment difficulties in the Speech and Language Therapy service. The current Doncaster CCG spend on its Speech and Language Therapy service places it in the bottom 25th percentile of spend nationally.¹
- The ongoing difficulty in reaching children in families who are not visible to services – the 8% who do not receive a 2–2.5-years health visitor review, the 15% who do not engage with Family Hubs, the 18% who do not take up 2-year-old provision. Brexit has been a major issue in Doncaster and some Eastern European families have pulled back from their involvement in Family Hubs as a result. Other families choose not to engage for different reasons. It is hoped that new data-sharing agreements will overcome GDPR issues so that health partners can more readily share information on the ‘unknown children’, and enable them to be reached.



¹ Based on local service data and national data from the Children’s Commissioner’s 2019 report ‘We Need to Talk: Access to Children’s Speech and Language Therapy’.

Glossary

CCG: Clinical Commissioning Group

EHCP: Education, Health and Care Plan

EYFS: Early Years Foundation Stage

EYFSP: Early Years Foundation Stage Profile

FSM: Free school meals

PVI: Private, voluntary and independent



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