

REPORT TO: Children Young People & Education Scrutiny Panel

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REPORT TITLE: Speech and Language Therapy Update

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PURPOSE OF REPORT:

Update on Speech, Language and Communication Needs (SLCN) provision for Enfield Children and Young People

1. BACKGROUND

Following the previous (February 2019) OSC paper on Speech, Language and Communication Needs (SLCN), this paper updates on:

- Current waiting times for children and young people with SLCN
- Progress on recommendations from the independent review of the school-age SLCN Service
- Progress on the Local Government Association Early Years Peer Review, which focused on SLCN
- Future intentions pertaining to the above

Local Authorities have a statutory duty¹ to work with Clinical Commissioning Groups (CCGs) in their local area to deliver the SEND Reforms. This includes provision of an SLCN service.

Provision of the SLCN Service for Enfield's school-age children and young people is primarily provided by Barnet, Enfield and Haringey Mental Health Trust (BEH-MHT). Enfield Council and Enfield CCG fund this provision jointly.

The SLCN service has been a focus for service development for the last two years, as several factors have placed additional pressure on the system, including an increase in EHCPs (driven by increased demand from within existing population numbers due to increased eligibility after the SEND Reforms). More recently, the Covid-19 pandemic has provided its own challenges around service delivery.

¹ Children and Families Act 2014, Part 3.

Independent Review of the SLCN Service

An independent review² of the school-age SLCN Service concluded that the Service was struggling to meet demand and was unsustainable in its current form. Reduction in resources alongside an increase in demand for statutory input, meant that the Service had aligned its resources to provide statutory requirements, at the expense of the early intervention and prevention work that was previously being delivered in partnership with education staff.

Recommendations given within the independent review are summarised in Appendix 1. An SLCN Steering Group was established to work on a number of these recommendations. These were analysed in terms of feasibility, and some of these are in development.

Early Years Peer Review

In December 2017, the Department for Education (DfE) launched Unlocking Talent, Fulfilling Potential³: a plan for improving social mobility through education. A key strand within this is a focus on sector-led improvement. In November 2019, to help Enfield develop its effectiveness in the provision of Early Years services, a peer review was held. This was led by the Local Government Association, with support from the Early Intervention Foundation and its focus was on SLCN.

Whilst the Early Years peer review recognised current good practice in regard to Early Help and Early Intervention in Enfield, it was noted that, *“children can get ‘lost’ because there is no clear or timely pathway for them to receive early intervention additional help (e.g. SLCN)... speech and language therapy is regarded as a good service for those who receive it in a timely way. However, waiting times for specialist services such as this can be long...”*

In response to this, several recommendations were suggested within the peer review. Key recommendations pertaining to SLCN included:

- Development of clear pathways to enable identification, support and intervention for children with all levels of SEND, including SLCN.
- Use of a consistent tool for identification of speech, language and communication needs across all settings and services through continued development of the Universal Play & Communication Assessment Toolkit (UPCAT) programme.

The peer review found that the Council was working to sustain its early years offer despite the reduced resources available. It noted that to realise the ambition to give young children the best possible start in life, there was a need for a clear Early Years vision and strategy – agreed, owned and communicated across the partnership.

² Joint Children’s Speech & Language Therapy Service Review (2020), Chris Myers

³ [Unlocking Talent, Fulfilling Potential, DfE \(2017\)](#)

An Early Years Partnership has been set up under the auspices of the Director of Education to progress all recommendations from the review.

The strategic recommendations made and progress against each are summarised in Appendix 2.

Alongside concerns emerging from the independent school-age review and the peer review, is the awareness that there are several large housing developments planned within Enfield; a percentage of these households will require SLCN intervention.

In addition to this, approximately 150 additional special school places were agreed for the academic year 2020/21, which has had a corresponding effect on the need for SLCN provision. Further special school places are planned, causing further pressure on the SLCN Service.

To ensure that special schools were able to provide assessments for children accessing new school placements in September 2020, short-term (to end March 2021) additional funding of £114,153 was allocated specifically for SLCN support. It is envisaged that this will be commissioned on a recurrent basis from April 2021.

There were concerns that the caseload had risen in a short period of time, from 750 children and young people (the maximum caseload for the number of speech and language therapists available) to approximately 900 children and young people in mainstream schools alone. This resulted in an overallocation of available resources, leading to higher caseloads than each speech and language therapist should carry.

To assuage the lack of provision, ongoing additional funding from the High Needs Block of £150k pa was agreed to fund 3 x full time therapists. This will ensure that the SLCN Service is able to meet its statutory obligations in mainstream schools.

All funding is aligned to the findings of the High Needs Block review, which stated that “investing in speech and language, and other early intervention services will help improve outcomes for children and reduce package costs in the future.”

Furthermore, this will ensure that the statutory elements of the Service are well positioned to deliver effectively as early intervention options are developed, as outlined below in Section 4 of this report.

2. CURRENT WAITING TIMES FOR THE SPEECH AND LANGUAGE SERVICE

Early Years Speech and Language

The Early Years Speech and Language Service is maintaining waiting times compliance for a first appointment within 13 weeks and submission of statutory assessments within six weeks.

However, requests for statutory advice are now required for younger children, from the age of two years. Therefore, a larger proportion of children receive the specialist interventions specified within their EHCP prior to starting school. This equates to 182 children in 2019-20 – compared with 108 children in 2018-19 – on active caseloads for two years longer than originally envisaged.

Mainstream Schools Speech and Language

Waiting times have mainly affected mainstream schools' speech and language interventions.

Current staff capacity is 7.9 WTE. This will shortly increase to 10.9 FTE; funding for an additional 3.0 FTE posts was agreed in October 2020, and these are now in the recruitment process.

April – October 2020: Monthly KPI Compliance

CCS039/40: Statutory assessment within six-week timeframe

CCS041: Routine health assessments within 13-week timeframe

The service has not met the six-week statutory timeline for statutory advice submission. We are however, beginning progress on the 13-week list, with a positive trend predicted.

Table 1: Percentage of assessments (CCS039/040/041):

CCS039	Monthly	School Age Therapy - Percentage of complex referrals seen within six weeks.	Green =>75% Amber = 65-74% Red = <64%	31.25%	0.00%	3.45%	10.00%	7.69%	33.33%	33.33%
CCS040	Monthly	School Age Therapy - Percentage of urgent referrals assessed within six weeks.	Green =>75% Amber = 65-74% Red = <64%	31.25%	0.00%	3.45%	10.00%	7.69%	33.33%	33.33%
CCS041	Monthly	School Age Therapy - Percentage of routine referrals seen within 13 weeks	Green =>75% Amber = 65-74% Red = <64%	76.47%	50.00%	100.00%	75.00%	40.74%	66.67%	70.83%

The usual number of requests for statutory advice is 15 – 20 per month, an exception being during Covid-19, when requests reduced to 5 – 15 per month.

Table 2: Number of children seen for statutory assessments, with number of children on the waiting list as the denominator (CCS039/040):

Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Oct 20
16/128	31/119	29/96	10/77	13/83	9/76	9/71

Table 3: Number of statutory requests received (CCS039/040):

Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Oct 20
7	8	10	16	6	4	15

Allocation of extra time during lockdown enabled staff to target the backlog of assessments through virtual platforms, increasing from the baseline of 12 per month. Now the service is back in schools, the extra allocation has concluded.

Currently, 1.00 WTE from a total of 7.9 WTE is allocated to carry out 12 statutory assessments per month. This has reduced to nine assessments recently due to class closures /children isolating.

Table 4: Waiting Times for Statutory Assessments (CCS039/40):

Up to 6 wks	Up to 20 wks	Up to 30 wks	Up to 40 wks	Total
13	31	20	7	71

Following staff recruitment, 1.5 WTE will be directed to clear the backlog at a rate of 18 cases per month. This capacity will also continue to target 180 statutory assessments per academic year to manage the current trend.

Table 5: Waiting List for Routine Health Pathways (CCS041):

Up to 6 wks	Up to 20 wks	Up to 30 wks	Up to 40 wks	Total
15	5	2	7	29

The backlog is being steadily cleared with a positive trajectory. Assessments need to include a school- and class-based assessment. These had been delayed during the pandemic, but there is a plan for backlog clearance to be completed by May 2021.

Table 6: Delivery of statutory EHCP interventions:

Sep 2017	Sep 2018	Sep 2019	Sep 2020	Predicted Sep 2021
535	694	890	1007	1242-1250

Once additional posts have been recruited, 9.4 WTE therapists will have capacity to deliver 1150 EHCP interventions.

An increase in staffing of 0.4 WTE for every 50 children is required, considering termly and half-termly interventions. For example, looking at the September 2021 (Table 6) predictions,

- 1242 cases would require 9.85 WTE staff
- 1250 cases would require 10.25 WTE staff

Progress with recruitment

Nationally, the pool of potential candidates is extremely limited. Most new graduates will have already secured employment, so it is a challenging time to fill graduate vacancies. SLT has recently been added to the Home Office Shortage List; this will attract overseas applicants in the future.

- A 0.6 WTE locum has been secured to start at the beginning of January 2021.
- A 1.0 FTE overseas candidate is undergoing Home Office approval.
- A Twitter campaign has been launched, with adverts posted on the Clinical Excellence Networks.

Adverts for recruitment closed on 27/11/20. Three candidates have been shortlisted, with interviews scheduled for 16/12/20.

The service is working at full capacity to manage the historical trend in statutory assessment requests increasing by 10% each year, and corresponding increases in EHCP. These have seen EHCPs with SLCN increasing by 28% in 18-19 and a further 13% in 19-20. All staff have been over-allocated in the interim, to mitigate the gap.

The additional workforce will allow current demand for statutory assessments and EHCP provision to be met, but would not enable resources to extend to meet further increase in numbers.

3. RECOMMENDATIONS

It is requested that the Committee notes this report for information; any comments are welcomed.

4. NEXT STEPS

Commissioners met with the Leader, Chief Executive and Directors in late 2019 and it was agreed that there should be a dual focus on ensuring that statutory provision was performing well and, going forward, that early intervention programmes were developed to give Enfield its own unique offer.

With the statutory requirements now improving through a combination of reconfiguration and sourcing of additional funding, commissioners met with various academic organisations to begin to develop an early intervention programme.

A group consisting of LA commissioners, SEN team and health provider has developed a proposal for consideration of investment in a Speech, Language and Communication Hub (SLaCH). This would be multi-disciplinary to support the associated additional needs of children who present with a primary need of speech, language and communication difficulties. The model primarily supports education settings but includes a strand of intervention enabling work with families to encourage them to become familiar and aware of techniques that will help them work independently with their children.

The proposal is based on the concept of an invest to save model, aligned to the Council's MTFP, incorporating a system of intensive, enabling and maintained provision. Initial investment would support schools in delivering the model, followed by support by a centralised SLCN Hub to embed and maintain the model.

The SLaCH programme would be staffed by an integrated workforce comprising specialist teachers, speech and language therapists, educational psychologists and occupational therapists. This team would support with identification, strategies, embedding of the offer and integration within the education setting. It is envisaged that the programme would offer an accreditation to schools that are able to deliver.

The model has four strands:

1. Training in identification
2. Targeted interventions using evidence-based resources for the development of Language Understanding, Language for Thinking, Expressive Language, Oral Language and Language Use.
3. Parent and carer focused training and support
4. Implementation of school-led SLCN specialist practitioners and a whole-school-based training programme

Currently, the number of EHCPs is rising approximately 10% every year. An initial reduction of 2% in the number of EHCPs is the target to allow the SLCN Service to deliver a sustainable service, whilst also ensuring that children and young people receive intervention for their SLCN as soon as possible. The model can be integrated into the work of the SEN Panel to ensure that it provides an alternative option to the statutory process where appropriate.

Appendix 1

Summary of recommendations given within the independent Speech, Language and Communication Needs review, 2019

	Recommendation	Progress
1	Invest additional resources into the Children's SLT workforce to manage the increase in demand for statutory assessment within required timescales until the following recommendations come to fruition (approx. two years from commencement).	<p>This was referred to the LA's review of the High Needs Block and raised at the SEND Partnership Board.</p> <p>Details are provided in (2) above, of the work undertaken to identify and cost additional resources required to meet this requirement.</p>
2	Release any Speech and Language Therapist time in Additionally Resourced Provisions (ARPs) not allocated to working with children with SLCN as a primary need in their EHCP, to work across that school.	Subsequent work by commissioners and the provider identified that there was no unallocated time.
3	Consider an 'Invest to Save' scheme to recruit a Speech and Language Therapist to develop and implement a structure to upskill education staff on the universal and targeted offer in mainstream schools.	<p>The LA engaged with University College London (UCL) to develop a programme of early intervention, aimed at all schools and early years settings, supporting the ambition of the Leader of the Council for an innovative way forward.</p> <p>This work was put on temporary hold in March due to the pandemic, which saw some staff furloughed and potential funding streams halted. Discussions started again in mid-July with a view to potentially tailoring the project to support schools in a potentially different 'post-Covid' environment.</p> <p>Since this time, further discussions have taken place within a working group, and a proposal is currently underway for BEH-MHT and educational settings to work together to extend Early Intervention services, helping to sustain the SLCN Service whilst supporting families to work with their children independently. Further details are in (4) above.</p>
4	Compare full-service costs including overhead allocation, with similar areas in London such as Barnet and Haringey.	There are ongoing discussions, but this is proving difficult, as other LAs are unable to share data (particularly financial) at a granular level, which

		would make comparisons relevant.
5	Undertake a Speech and Language Therapy admin review.	BEH-MHT administrative support function has been reviewed to maximise staff clinical capacity deployment to full effect
6	Review current information regarding the Speech and Language Therapy service CYP and parents can expect and what parents can do to help address their child's SLCN. Embed approaches, e.g. Hanen and Positive Beginnings, into intervention pathways.	Points 6 & 7: An updated pathway for Early Years was developed in late 2019 and a new triaging service was subsequently rolled out from February 2020, with the LA providing additional resource through its Children's Centre contract for SLCN-focused interventions and wider workforce skills development. Plans were also developed to train Children's Centre staff to provide good practice interventions for children with social communication needs on the pre-diagnostic Autism pathway. This was again temporarily suspended from March with the move to virtual services.
7	Review and simplify Speech and Language Therapy referral processes, including pathways from the Early Years SLT Service, once above recommendations are actioned.	Positive Beginnings sessions are being planned for delivery once groupwork becomes viable (hopefully no later than the start of Spring Term).
8	Progress work with North Central London to agree Out of Area reciprocal arrangements.	The CCG were involved in discussions, but this came a halt during the CCG merger/Covid-19. This will be discussed in the near future.
9	Develop a joint strategic plan for SLCN across Enfield.	Previous directors at the LA and CCG requested that a SLCN-specific strategy was not pursued; instead it was considered that this should be part of the wider SEN strategy and plan.
10	Develop a new detailed Service Specification for Speech and Language Therapy, replacing Key Performance Indicators (KPIs) with outcome measures, and consider monitoring separately to the block contract.	This was written by LA commissioners and completed by January 2020, with in principle agreement from the CCG. The revised specification was due to be entered into the block contract during CCG-led negotiations; however, this process was cancelled with the onset of the pandemic and rolled-over to 2021.
11	Consider developing Speech, Language & Communication Apprenticeships.	An Apprenticeship scheme is not currently available for Speech and Language professional training
12	Explore funding opportunities to introduce a Designated officer for SEND.	This was a CCG requirement as it is a statutory legislative obligation. A DCO is now in post.

Appendix 2

Summary of recommendations given within the LGA Early Years Peer Review

	Recommendation	Progress
1	<p>Complete the planned establishment of a multi-agency Early Years Partnership Board with a clear remit to develop and implement an Early Years vision and strategy, monitor progress and to provide whole system leadership across Enfield. Direct reporting from this Board to the Health and Wellbeing Board would be helpful.</p>	<p>The board has been established and had its first meeting in September 2020. From this sub-groups were established to look at:</p> <ol style="list-style-type: none"> 1. Data gathering and use 2. SEN 3. Children's Centres 4. Best Start in Life
2	<p>Use the data that is available across the partnership in the development of the Early Years Strategy and ensure clear monitoring of progress at senior levels</p>	<p>In addition to the group focusing on early years data, a dashboard for SEN data is in development.</p>
3	<p>Further engage parents/carers in the design, development and evaluation of strategy, plans and services</p>	<p>Parent representation on the SEND Partnership and Early Years Partnership Boards established.</p>
4	<p>Develop clear pathways to enable identification, support and intervention for children with all levels of SEND, including SLCN</p>	<p>A mapping exercise has been carried out and a draft pathway for early years services is being developed.</p>
5	<p>Clarify the purpose of children's centres and the balance between the aim for a universal offer and the targeting of limited resources at those in greatest need</p>	<p>A sub-group has been established to address this and will report back in January.</p>