

Dear colleague,

The Communication Trust very much welcomes this call for evidence and the commitment of the RCPCH and BACCH to find out more about innovative practice and services. The Communication Trust is a coalition of over 50 not-for-profit organisations. Working together we support everyone who works with children and young people in England to support their speech, language and communication.

We're taking this opportunity to submit this short letter to ask that in reviewing the practice examples that are received in response to this call for evidence, the RCPCH and BACCH workforce project team considers the importance of speech, language and communication and children with speech, language and communication needs (SLCN).

The impact of children's speech, language and communication skills on their later academic achievements, behaviour, mental health and social relationships is well evidenced and this impact can be particularly significant in areas of social disadvantage. It is argued that the current high levels of speech and language delay and the impact this can have for wider health and education outcomes for children and young people should be recognised as a "public health issue requiring a public health response" (Law 2006). A recent report from the National Children's Bureau highlights that children from the most deprived areas in England don't achieve as well in terms of their school readiness (i.e. their Early Years Foundation Stage Profile results) as those from the least deprived areas. The report highlights the need to learn from areas that are doing better, despite high levels of deprivation.¹

All community practitioners play a vital role in identifying children who might be struggling to develop their speech, language and communication skills and are in a very important position to support children and their families at the earliest possible time, therefore minimising future negative impacts. This is especially important for those practitioners providing a universal service to families who might otherwise be hard to reach.

Health visitors in particular, are in a position to identify children with SLCN and to support parents with maximising their children's speech and language development, to get them school ready and have the skills they need to enable them to learn, achieve and enjoy life. The health review at 2 provides an excellent opportunity for health visitors to talk with parents about their child's development. Where possible, this review will be integrated with a child's progress check from

¹ National Children's Bureau (2015), *Poor Beginnings: health inequalities among young children across England Appendix: Area summaries* - http://www.ncb.org.uk/media/1228324/poor_beginnings_area_summaries.pdf

their early education setting, but there are plenty of instances where children aren't accessing this support – lots of parents aren't aware of and taking up their free early education place for their 2 year old. It's therefore essential for health visitors to be aware of typical speech, language and communication development and to be able to share messages about the importance of language and communication development with parents, which has been shown to have effective outcomes for children.² This becomes even more crucial for those working in areas of high deprivation and where children may not yet be accessing early education and where we know children are often at higher risk of experiencing language delay. Where children are attending an early education setting, health visitors and other community practitioners still play a vital role and can really support health and education services working together to benefit both the child and the family.

It's essential that the children's health workforce in the community feel confident and able to provide advice to families to support all children's speech, language and communication development, but also to be able to identify where children are not developing their skills as expected and support families with accessing additional help that their child may require. We have encouraged colleagues in our Consortium and in our Local Champions network to submit relevant examples of good practice for supporting children's speech, language and communication in this way. We very much hope that the project team will welcome the learning these approaches can bring, and also scrutinise other examples received to see how they support children and families to develop strong speech, language and communication skills and crucially, how to access help when children may be struggling with this central element of their development.

The Communication Trust would be very happy to discuss any of the issues raised here further and also to support the RCPCH and BAACH teams in any way that's useful to ensure the resource to support workforce planning for community paediatric services provides a clear focus on the importance of children's speech, language and communication for later education and health outcomes.

Yours faithfully,

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² Smith, C., Gibbard, D. (2011) 'Baby talk home visits: Development and initial evaluations of a primary prevention service' *Child Language Teaching and Therapy* 27 (1) 68-83