

# Communicating The Code

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A resource to enable implementation of the code of practice



## Sections

1. [Introduction](#)
2. [Children and Young People at the Centre](#)
3. [Developing Outcomes](#)
4. [Engaging with Parents](#)
5. [Across the Settings and Workforce Development](#)
  - [Early Years](#)
  - [Schools](#)
  - [Post-16](#)
6. [Education Health and Care \(EHC\) Plans](#)
7. [Joint Commissioning](#)
8. [The Local Offer](#)
9. [Youth Custody](#)



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There is a wide range of other guidance available to help practitioners deliver the Reforms which Communicating the Code seeks to add to rather than duplicate. Follow [this link](#) to find additional resources and support and [this link](#) to see examples of good practice and case studies relating to the Code of Practice.

This document can also be downloaded from our website at [www.thecommunicationtrust.org.uk](http://www.thecommunicationtrust.org.uk)

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# Introduction

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The 2014 Special Educational Needs and Disabilities (SEND) Code of Practice came into force on 1st September 2014 and provides statutory guidance relating to the new Children and Families Act 2014. It outlines the new legal duties on organisations which work with and support children and young people with special educational needs and/or disabilities.

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## So What's New?

The 2014 SEND Code of Practice:

- Covers children and young people from 0-25 years of age and applies to disabled children and young people as well as those with Special Education Needs (SEN).
- Has a real focus on involving children, young people and parents in decision making.
- Has an increased focus on improving outcomes for children and young people long-term.
- States that after compulsory school age (the end of the academic year in which they turn 16) the right to make requests and decisions under the Children and Families Act 2014 applies to young people directly, rather than to their parents.
- Replaces school action and school action plus with a single category of SEN support.
- Replaces statements of Special Educational Needs and Learning Difficulty Assessments (LDAs) with a co-ordinated assessment process and the new 0-25 Education, Health and Care plan (EHC Plan).
- Has a greater focus on providing support that enables children and young people with SEND to succeed in their education and to make a successful transition to adulthood.
- Provides guidance on the joint planning and commissioning of services to enable close co-operation between education, health and social care.
- States that Local Authorities must publish a Local Offer, setting out in one place information about provision they expect to be available across education, health and social care for children and young people in their area who have SEN or are disabled, including those without EHC plans.
- States that schools must also publish a school information report online. This should outline what SEN provision the school has in place.



## What is Communicating the Code?

*Communicating the Code* gives additional information specifically in relation to children and young people with Speech, Language and Communication Needs (SLCN) to support practitioners to implement the Code of Practice well, to ensure children and young people's needs are identified and supported as effectively as possible.

*Communicating the Code* has been written specifically for people working directly with children and young people and is applicable to those working in early years, schools and post 16 settings.

It aims to:

- Summarise a number of areas in the new Code of Practice
- Highlight some key issues for SLCN in the new Code
- Identify some key strategies which may be useful in overcoming these issues
- Suggest some indicators of success
- Identify and signpost to examples of good practice, and other useful information

We have drawn on the latest evidence base, including the landmark *Better Communication Research Programme*<sup>1</sup> and have worked with partners and practitioners across the sector. We are keen to continue consulting with practitioners working with children, young people and their families to make sure all of the information we provide is current and useful. Do contactus with any further information that would be useful or to share best practice.

*Communicating the Code* aims to complement other resources and guides which are available to support the implementation of the SEND reforms through focusing on SLCN, rather than duplicate SEND guidance in general.



## Children and Young People with Speech, Language and Communication Needs

Speech, Language and Communication Needs (SLCN) is an umbrella term coined by the Bercow review in 2008. It applies to all children or young people who have difficulty with speech, language and/or communication. These difficulties could be:

- as a primary need (a Specific Language Impairment or SLI) in the absence of any other difficulties
- as part of another condition such as autism, learning difficulties, deafness or cerebral palsy
- resulting from social and/or environmental disadvantage.

There are a number of challenges in how children and young people's SLCN are described and recorded by settings and schools, as SLCN can be a primary need but is also a feature of most other areas of special educational needs. Estimates suggest that around 10% of all children have long-term and persistent SLCN.<sup>2</sup>

SLCN as a primary need is the most prevalent SEN identified by schools; however, research suggests there continues to be significant under-identification across all ages and phases, both in terms of long-term and persistent SLCN and in language delay relating to social disadvantage.<sup>3</sup>

So, a key challenge for all practitioners is ensuring that all children and young people who have SLCN are identified as early as possible.

For those with identified needs, not all have statements currently or will have EHC plans in the future. It is also highly likely that the majority of children and young people with SLCN as a primary need may fall into the SEN support category and not qualify for EHC plans. Yet their SLCN require support and intervention if they are to achieve their potential, academically, socially and also economically.

The children's workforce therefore plays a key role in identifying and supporting all children and young people with SLCN – as a primary need or as part of other SEND – so the information contained in this resource is applicable to the majority of children and young people presenting with special educational needs/disabilities.



## How to use *Communicating the Code*

*Communicating the Code* is divided into sections which can be read separately, or as part of a whole. Within different sections, there is cross referencing between sections to avoid unnecessary duplication.

The following pointers will help you to find the information you need:

- For general principles and an overview, please read the Introduction.
- To go to specific area of interest within *Communicating the Code*, use the links on the first page to skip to the relevant section.
- Each section can be downloaded individually or the entire document can be downloaded [HERE](#).

Throughout *Communicating the Code* you will see additional information highlighted.

- Text in Blue tells you a bit more about a term used in the code and adds some background information.
- Text in Orange shows you an example of the code in practice. More examples can be found in our [ExamplesBank](#).
- Text in Purple refers you to the research that backs up communicating the code.
- References can also be found at the end of each section.

There is a wide range of other guidance available to help you deliver the Reforms which *Communicating the Code* seeks to add to rather than duplicate. Follow this [link](#) to find additional resources and support. This document can also be downloaded from our website at [www.thecommunicationtrust.org.uk/communicatingthecode](http://www.thecommunicationtrust.org.uk/communicatingthecode).

Follow this [link](#) to see examples of good practice and case studies relating to SLCN and the Code of Practice. This document can also be downloaded from our [website](#).



## About The Communication Trust

The Communication Trust is a coalition of over 50 voluntary and community organisations with expertise in speech, language and communication. We harness our collective expertise to support the children's workforce and commissioners to support all children and young people's communication skills, particularly those with SLCN.

We do this by raising awareness, providing information and workforce development opportunities, influencing policy, promoting best practice among the children's workforce and commissioning work from our members.

The Trust was founded in 2007 by children's charities Afasic and I CAN together with BT and the Council for Disabled Children.



## References

1. <http://www2.warwick.ac.uk/fac/soc/cedar/better/>
2. The Communication Trust, *A Generation Adrift* (2013) P 10
3. Strand, S & Lindsay, G (2012), *Ethnic disproportionality in the identification of SLCN and ASD: 2005-2011*, Better Communication Research Programme, p28.



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# Children and Young People at the Centre

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By listening to children and young people with speech, language and communication needs, our professional practice will be enhanced, challenged and will become more targeted to the actual needs and life experiences of the children and young people we are working with. We need to increase the size of our “listening ears”.<sup>1</sup>

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## What does the Code say<sup>2</sup>?

- There is an explicit requirement for children and young people with special educational needs and/or disabilities (SEND) to be at the centre of all decision-making in regards to choice and control over the support they receive. This is the case whether the child or young person has an Education and Health Care (EHC) Plan or not.
- Children and young people should therefore be involved at all stages in the Graduated Approach of Assess, Plan, Do and Review.
- It has become law that local authorities **must** have regard to:
  - The views, wishes and feelings of the child or young person and the child's parents.
  - The importance of the child or young person, and their parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in these decisions.
- Local authorities must consider how to provide information for children and young people on their rights and entitlements in accessible formats and give sufficient time to prepare for discussions and meetings.
- The child or young person must be closely involved in deciding what support they need and the outcomes or goals they want to achieve.
- Post 16 years, the young person can make their own decisions independent of the family if they so wish.<sup>3</sup>
- Consulting with, and enabling participation of, the child or young person is part of all aspects of the SEND process and as well as informing support for the individual should also influence SEND systems such as the Local Offer and Joint Commissioning.

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### *A little more about...*

This model of engagement put forward in the SEND reforms is sometimes referred to as "person-centred planning" and relies upon effective participation with the individual at the centre. It draws on work from the World Health Organisation which proposes a wider appreciation of outcomes: that we consider a person's level of activity, participation and well-being as well as underlying difficulties.

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### *A little more about...*

"**Consulting**" should involve listening, but it is listening with a particular purpose, for<sup>4</sup>ways of seeking the views of children as a guide to action'.

**Participation** takes this involvement a step further: the literal definition of participation is 'taking part'. There are a range of degrees to which children can take part, though it is argued that: "Participation is a process not an event and empowerment is the outcome".<sup>5</sup>

The reforms call for the individual and family to participate, to be at the heart of the decision-making process about choices they can make, and the support they receive.

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## What are the Key Issues for SLCN?

For children and young people with SLCN, this renewed focus on communication skills as the foundation for successful outcomes is timely and necessary. However, enabling their participation requires careful planning and skilled practitioners.

- The very nature of their difficulties will make it harder for children and young people with SLCN to participate. This can include understanding as well as expressing their views, so ensuring their views are heard and recognised can be a very complex process. However, capturing views is no longer optional.
- Involving young children can also be challenging and will require innovative ways of working.
- Many older children and young people with SLCN will also have associated difficulties with reading and writing.
- There can be challenges in terms of time, skills and appropriate resources to ensure children and young people are able to participate.
- Preferred outcomes for children with SLCN, their parents<sup>6</sup> and the professionals working with them may vary greatly, and these need to be appropriately recognised and reflected in planning and support. Using parents as a proxy voice is also no longer acceptable. This raises challenges, however, particularly relating to a child's age: while using parents as a proxy voice for children and young people's views may no longer be seen as acceptable, this approach will need to be balanced for parents of very young children.
- There is a need for services to work holistically in capturing a shared vision of what is ultimately important for the child or young person, and to think beyond their own service parameters.

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### Research snapshot...

Research undertaken to look at what was important to children and young people with SLCN, found that in general the child or young person did not talk about wanting to make improvements with their communication skills, but rather they wanted changes to be made to their immediate environments. They wanted people "to understand students and what helps", for adults to listen more and not raise their voices; and for peers not to tease.<sup>7</sup>

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### Research snapshot...

Themes that have emerged from research are that children and young people with SLCN are particularly vulnerable to difficulties with social acceptance, and also are more likely to have difficulties with emotional well-being. The preferred outcomes for these individuals centred on:

- the inclusiveness of the school environment
  - support around the child's emotional needs
  - addressing attitudes and knowledge of those around the child or young person and their family
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## What are the Key Strategies for SLCN?



Above all, there should be a clear assumption that children and young people with SLCN *can* take part. Alongside adults developing skills and resources to help with this, positive attitudes are crucial.

In order to find out what is important to the child or young person, what is going well and what could be better, the following points will need to be considered:

### Time is needed to

- find or develop appropriate methods and resources to enable participation
- go at the pace of the individual – try not to interrupt or fill silences
- ascertain his/her views accurately – this may well take a period of time
- analyse what has been found out, and convert it into meaningful and motivating outcomes that can be shared with the child or young person as far as possible

Skills are required to fully involve children and young people so practitioners may need ongoing training or professional development to effectively enable the child or young person's participation.

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### A little more about...

#### Principles of participation

It is important if we are to involve children and young people to ensure this is done within a framework of good practice. Though the area is still developing, the following criteria have been identified:<sup>8</sup>

- A range of methodologies are used to listen to children's views including visual and non-verbal tools
  - Children's opinions are sought about day to day matters as well as for specific consultations
  - Children receive feedback about any changes to practice which result from their involvement
  - The necessary steps are taken to ensure inclusion of children with special needs
  - A range of settings are included
  - The children and young people involved should be treated with honesty and respect, their views are valued, taken seriously and acted upon
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### An individualised approach

Each child and young person has different strengths and needs, so different strategies are required for effectively involving them. A template approach is therefore not best practice, but some key approaches to include are:

- Find out as much as you can about the child or young person's speech, language and communication needs. Observation of the individual and how he/she interacts is an essential part of this process. Use Speech and Language Therapy information if it is available. From this, pitch language at the right level. Keep spoken language simple and clear.
- Use their strengths to support the process. Using materials and activities that interest them and choosing a good time of day for them are helpful.
- Support spoken language with additional supports where possible (e.g. photos/ pictures/ meaningful objects).
- Show interest in everything the child or young person has to say.
- Acknowledge any feelings being expressed; ensure they are seen as valid. Resist providing solutions.
- For children and young people without formal communication systems as yet, it is important to build up a clear idea of what motivates them, through interaction and also discussion with parents and others who know them. Building on these interests and extending them would be a next step, as would looking at incorporating early choice-making into outcome setting.

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#### *Research snapshot...*

Research shows the progress that can be made when children and young people are actively involved in saying what is important to them. We know that listening to and valuing children's views has implications for their confidence and attitude to learning. This in turn can lead to more effective therapy.<sup>6</sup>

Also, **good participation opportunities** produce more confident and resilient young people and encourage citizenship<sup>7</sup>; participation helps in developing skills useful for debate, communication, negotiation, prioritisation and decision-making.<sup>8</sup> Children can learn how to organise their thinking and language to represent what is happening and describe this to others.

**Effective participation** can provide a sense of self-efficacy and raise self-esteem.<sup>9</sup> Researchers and practitioners have commented on the impact of listening to and involving young children on their confidence and developing self identity. This can be of particular benefit to shy or withdrawn young children.<sup>10</sup> Children themselves comment positively on the experience of being consulted.<sup>11</sup>

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### **An individualised approach (continued)**

- Be clear about what you want to find out. Talking about the future and aspirations can be difficult for any of us at any point of our lives. The best approach is to talk about the present:
  - What is going well now
  - What could be better now
  - What works best for him/her
- Check you have understood correctly. You can then use this information to support future outcomes and aspirations from this.
- Use positive language. Outcomes need to focus on the positive so questions such as those above are useful to elicit what specific achievements have resulted from an intervention or model of support. It's also harder for many children to understand negatives such as don't, isn't etc.
- Ask open questions as much as possible, for example instead of asking "do you like school?" you could ask "what do you like about school?" Give choices if the child or young person is unsure.
- Ask question words which are at the right developmental level for the individual. "How?" and "why?" questions may not be understood.
- Sum up what you think has been communicated and check with the child or young person at the end of the process.

### Make listening and consultation part of everyday practice

- Choice-making should be embedded into daily activities (e.g. offering different sandwich toppings, drinks, book choices) to increase independence and the ability to make choices.
- Ensure that any choices you are offering are informed choices (i.e. the child or young person has experience of it at least once). So, if we are asking whether a child or young person would like to go horse-riding, but he/she has never experienced it, this would not be a fair choice.
- Use pen pictures/communication passports/one page profiles as a good place to start in involving children and young people. These should as far as possible be developed with the child or young person using the strategies mentioned previously. If this is not possible, then the people who know the individual best should be involved.
- Share information with other staff, as this makes a huge difference. Young people with SLCN and their parents have told us that the people who are best at supporting and enabling their inclusion are those who understand the nature of their difficulties.

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#### *A little more about...*

The pen picture provides a summary of what matters to the child or young person and how to best support them. It is compiled from information from the individual, family and others who know him/her well.

It enables others to be aware of their strengths, interests and specific support that can help them, which can then inform involvement, planning and target setting.

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### Act on what you have found out

- It is important that children and young people know they have been heard, even if it is not possible to follow through on all their views. Consider how will you evidence their views so they know you listened and understood. This may be through involving them in outcome setting, making targets accessible to them (maybe in symbol format for example), and in writing pen pictures with them.
- Ensure that the child or young person sees the impact of their participation: that through listening to them you have thought about their interests and what is motivating for them. This information has then been translated into individualised targets and outcomes, which you have shared with them. The process is then empowering, and future participation is more likely.

## What does success look like?



From the child or young person's perspective:

- People involve me in decisions made about my life as far as possible.
- People know how to communicate with me, and make the adaptations I need to enable me to get my message across.
- I can let people know what is important to me in my life, and how to support me.
- I am involved in my person-centred review, and am supported in thinking about what information I want to share and how to share it.
- I am given information that I can understand about what is possible for my future.
- I am encouraged to make choices throughout my day.
- My views help inform local offers and joint commissioning of services.



## References



1. McLeod, S (2011), *Listening to Children and Young People with Speech, Language and Communication Needs, Who, Why and How*. J&R Press Ltd.
2. This section references the SEND Code of Practice Chapter 1, sections 1.1, 1.3 -1.9
3. SEND Code of practice Section: 8.17
4. Roulstone S & Lindsay G (2012), *The Preferred Outcomes of Children with speech, language and communication needs and their parents*, The Better Communication Research Programme
5. Roulstone S & Lindsay G (2012), *The Perspectives of children and young people who have speech, language and communication needs, and their parents*, The Better Communication Research Programme, p11
6. Owen, Hayett and Roulstone (2004) *Children's views of speech and language therapy in school: consulting with communication difficulties CLTT*
7. <http://www.dfes.gov.uk/listeningtolearn/downloads/LearningtoListen-CorePrinciples.pdf> accessed 23.4.07
8. Tansey, in Treseder P, 1997. *Empowering Children and Young People*. Save the Children Fund
9. Gilligan R, 1999. *Enhancing resilience of children and young people in public care by mentoring their talents and interests*. In Child and Family Social Work Vol. 4 No 3 pp 187 – 196
10. Clark A, Quail S, Moss P, (2003) *Exploring the field of Listening to and consulting with Young Children* Thomas Coram Research Unit DfES
11. Warwick, I., Blenkinsop, S., Aggleton, P., Eggers, M., Chase, E., Schagen, I., Schagen, S., Zuurmond, M. and Scott, E. (2004). *Evaluation of the Impact of the National Healthy School Standard*. Final Report.



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# Developing Outcomes

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Planning should start with the individual and take account of their wishes and aspirations, the outcomes they seek and the support they need to achieve them. It should enable parents, children and young people to have more control over decisions about their support.<sup>1</sup>

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## What does the Code say<sup>2</sup>?

- There is a strong emphasis on delivering better outcomes for children and young people with Special Education Needs and Disabilities (SEND).
- Outcomes should be set for every child and young person on the Special Education Needs (SEN) register, whether they have an Education and Healthcare (EHC) Plan or not.
- Outcomes must be SMART, (i.e. Specific, Measurable, Achievable, Realistic and Time-bound) which means they should be clear and progress against them can be measured.
- Outcomes should be developed and agreed with parents and the child or young person and be valued by and meaningful to all.
- The Code is also calling for some blurring of boundaries between professionals to enable a shared vision of more holistic outcomes, which look at the child or young person's whole life.

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### *A little more about...*

There can be different definitions of what is meant by "outcome" but simply put, an outcome is what is achieved by an individual, or by an intervention or group of interventions. The outcome is the end result of what happens; it is why something is being done. Therefore, describing what is going to happen and how often is not an outcome.

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### *Research snapshot...*

Previous research has highlighted the lack of shared vision between stakeholders, with families and students generally playing no role in developing outcomes, and with outcomes selected that hold little interest or importance to the individual.

Work carried out by The Better Communication Research Programme and the Council for Disabled Children in particular, demonstrates that higher-level outcomes prioritised by children, young people and parents were emotional well-being and involvement in community and social life.

Relationships with friends and family were a priority for children and young people, and gaining independence appeared to be a more important outcome for parents. Academic outcomes were valued by parents as a route to economic independence.<sup>3</sup>

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## What are the Key Issues for SLCN?

- The nature of Speech, Language and Communication Needs (SLCN) for many children and young people may raise issues for ensuring they are effectively involved in developing and evaluating outcomes. These issues and strategies to support them are outlined in more detail in the section on children and young people at the centre.
- Preferred outcomes for professionals, parents, children and young people with SLCN may vary considerably and this may require changes in how settings think about outcomes and targets.
- For parents, often what is most important is an increase in knowledge about, and attitudes towards SLCN of those around their child. Also, parents want their children to develop meaningful communication that increases their ability to be accepted, included and independent. So practitioners need to ensure that outcomes selected are functional, for everyday life.
- In terms of children and young people with SLCN, research literature shows that they generally tended not to identify themselves as someone with SLCN and outcomes around communication were not identified as important to them per se.
- The child or young person's focus was often more on how the environment could support them better through becoming more inclusive, and through a better understanding of their needs.
- Also, due to the nature of some SLCN, children and young people may find it particularly difficult to consider future aspirations apart from in very broad terms.
- Within the process, the child or young person should be involved in deciding what is important for them in their lives and what they would like to improve; it is then important to develop outcomes focusing on equipping them to achieve this.

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### *For example...*

Settings may be used to linking targets to attainment e.g. "Sam will be able to count 1 to 10" without needing to factor in why this is important to Sam right now, and how this will be important to him in the future.

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## What are the Key Strategies for SLCN?

- There may be a need to think differently about how you decide on outcomes. The Code of Practice sets out a new way of working in terms of involving children and young people in outcome-setting, and requires a new way of thinking. Outcomes can be arrived at creatively, and no longer need to be tied to educational or developmental objectives.
- It's important for children and young people to be able to see the smaller steps towards achieving their longer term aspirations for outcomes. Make sure that it's clear how working on communication skills will help them towards other outcomes.
- Keep a long-term view. What are we trying to achieve with the child or young person, and why? Keep a focus on functional life skills for the future, and steps to achieve this.
- Look at ways to ensure your setting is as communication-supportive and as inclusive as possible. The knowledge, attitudes and inclusiveness of the environment should be considered when setting goals.
- Children and young people with SLCN are at risk of social and emotional difficulties. Ensure that emotional needs also receive attention.
- Use general good practice in supporting children and young people with SLCN, such as using visual support, keeping information short and clear, removing distractions, etc.
- Involve the child or young person as much as possible in setting his or her own outcomes. This will require settings to consider how best to go about this depending upon the learning level and communication needs of the individual. Therefore the approach needs to be highly individualised (see the section on children and young people at the centre).
- Draw together information from what the child or young person has told you (through consultation), or from detailed observation and discussion with people who know them well.

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### Research snapshot...

"Practitioners working with these children need to consider carefully how any short term targets position a child on the road to eventual independence and social inclusion."<sup>4</sup>

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### Research snapshot...

The Better Communication Research Programme found that outcomes for children and young people with SLCN valued most were around: time for fun and laughter; feeling supported by those around them; and support with difficult emotions such as sadness and anger. They also valued support with building friendships, and other people monitoring their own behaviour, by not teasing, interrupting or shouting at them.<sup>5</sup>

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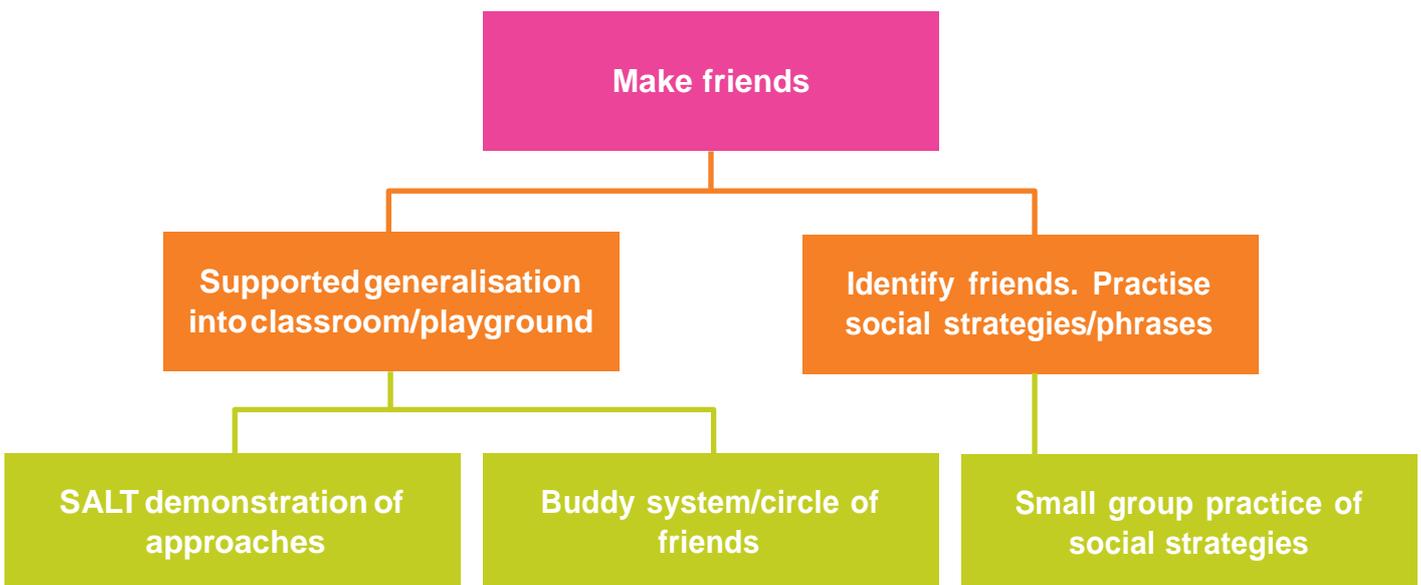
- Often it is easier for the child or young person to talk about the present and what they value now than to talk about future projections. The practitioner can then use this information as clues for putting together relevant outcomes.
- Check that the information you have gathered is correct. You could go back with potential outcomes in an accessible format (e.g. using symbols if appropriate) for the child or young person to consider or choose between.
- There may be professional development needs to support developing outcomes for SLCN. A number of additional resources can be found [here](#).

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*For example...*

It could be, for example that a child or young persons' top outcome is to "make more friends", and this then needs all involved professionals to consider together, how this can be best achieved, and what role each should play in working towards this outcome, for example: *see diagram below*

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## What does success look like?



For the child or young person:

- I have been directly involved, as far as possible, in deciding what is important for me.
- I am motivated by what I am working to achieve.
- I am included and involved in the process.
- My outcomes are useful for me in my life right now and in the future.
- School and home are involved in supporting me in achieving these outcomes.



## References



1. SEND Code of practice Section 9.21
2. SEND Code of practice Sections: 9.21 – 9.26
3. SEND Code of practice Section: 8.17
4. Roulstone S & Lindsay G (2012), The perspectives of children and young people who have speech, language and communication needs, and their parents, BCRP
5. Roulstone S & Lindsay G (2012), The preferred outcomes of children with speech, language and communication needs, and their parents BCRP



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# Engaging with Parents

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...it is in the child's best interests for a positive dialogue between parents, teachers and others to be maintained...<sup>1</sup>

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## What does the Code say<sup>2</sup>?

- There is a new focus on parental and family involvement.
- Local authorities must have regard to:
  - The views, wishes and feelings of the child or young person, and the child's parents.
  - The importance of the child or young person, and the child's parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions.
- Approaches should be much more family-centred with family needs driving training requirements. The Code calls for a localised approach to workforce development.
- Services need to collect evidence of the child or young person's outcomes that can be shared with parents.

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### **Research snapshot...**

Studies over the past 20 years have highlighted that substantial numbers of families have reported a 'constant battle' with the multiplicity of agencies and professionals involved, the lack of co-ordination between different agencies and the burden of multiple contacts.<sup>3</sup>

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## What are the Key Issues for SLCN?

- In general, the pathfinder areas found from their work that different ways of working are called for. This is likely to mean in the first instance that settings and local authorities need to ensure parents are aware of the importance of their role in the reforms. It will require settings to ask parents to consider in preparation for meetings, what is going well for their child right now, and what could be better.
- The children's workforce need skills around working with parents of children with Speech, Language and Communication Needs (SLCN), such as active listening and person-centred planning – to draw out what outcomes are valued by parents and families, and how these can be incorporated into targets for the setting.
- Priorities for parents of children and young people with SLCN include key people in their child's life to become more knowledgeable, tolerant and supportive of their child's needs<sup>4</sup>, which again is likely to require a focus on ongoing workforce development.
- Parents of children and young people with SLCN value outcomes related to increased independence and inclusion of their children and recognise the vital role that communication skills play in the achievement of these skills. It will be important for practitioners to show parents how small steps will lead to these longer term outcomes.

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### *A little more about...*

In September 2011 the government appointed 20 pathfinder sites to test out the ideas in the original SEND green paper. These sites, made up of 31 local authorities, were tasked to develop and trial: an integrated assessment process; a single, joined up 'Education, Health and Care Plan'; and personal budgets across education, social care and health, and adult services as appropriate for children and young people from birth to 25 years.

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- There may be a range of obstacles to achieving parental engagement: some parents may have specific needs themselves, including SLCN, and may need personalised approaches to access information, and to make choices to do with their child. Some parents may find the process daunting. Settings need to identify obstacles and how to overcome them.
- Different approaches and levels of support for parents may be required at different points in the child or young person's educational journey.
- Meaningful engagement with parents and families takes time and energy and this needs to be factored into a setting's approach.
- Staff may be unfamiliar or unconfident in using approaches such as person-centred planning, particularly in relation to SLCN.
- Parents may be at different stages in their understanding or acceptance of their child's SLCN, which requires sensitive and responsive support from staff.

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#### *For example...*

Parents are likely to require most support during times of transition: such as when difficulties are first identified; from nursery/childminder to reception; on entry into school; during the development of an EHC plan if this is required; and on transition out of school. Settings need to consider these transitions and arrangements they have in place in terms of supporting parents.

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## What are the Key Strategies for SLCN?

There are a number of general strategies for supporting practitioners to work effectively with parents of children and young people with Special Educational Needs and Disabilities (SEND). This may include: recognising the importance of support at home, skill-sharing with parents and effective key-working. There is more information about these generic approaches available on the [TCT website](#).

More specifically in relation to SLCN:

- Staff need to be skilful in identifying where parents are in terms of their understanding and acceptance of their child's SLCN as this is pivotal to effective engagement with parents. This can be a very emotional journey, and it is important that parents have the opportunity to discuss their feelings and explore their thoughts about their child and his/her future. Some parents will need more support from settings than others, which has time implications for the setting. Involving specialists, such as Speech and Language Therapists to help with this and ensure a shared understanding may be very important.
- There is often a lot of jargon associated with SLCN. Practitioners need to ensure that information and discussions are clear and jargon free.
- Settings should work out the approaches to supporting a child's SLCN that will work best for their parents. there should be flexibility according to what parents need. This is likely to vary between parents and also change over time.
- Staff may require training on person-centred planning approaches for children and young people with SLCN, and how to effectively engage with parents. A number of additional resources can be found on our [website](#).

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### *For example...*

**Approaches may include** workshops on aspects of communication, home visits to meet with parents, meetings focusing on communication, inviting parents to training, and setting up good methods of sharing information such as home-setting books or regular phone calls.

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### *A little more about...*

**Engagement** means to involve people in a way that makes them know their contributions are valued. **Participation** means being part of the decision-making process and actively influencing change. The Reforms call for parental participation which means families need to see themselves as integral to the support around their child, and also sharing responsibility for decision-making.<sup>5</sup>

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### *Research snapshot...*

Pathfinder areas have emphasised the need for a blending of skill-sets: that all staff working with families with SEN or disabilities need the knowledge, understanding and skills to provide effective support during the planning and delivery process, and that in this process there is likely to be some blurring of professional roles.

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## What does success look like?



From the parent's perspective:

- The people who support my child know him or her well. I feel that they like my child and want the best for him/her. I feel they are knowledgeable, tolerant and supportive of my child; understand what interests him/her and what is important to my child.
- I contribute to decisions about my child – through reviews and also the partnership I have with the setting my child is in.
- I am informed of choices for my child, and am supported in understanding the choices.
- My child has targets around increasing his/her independence and communication skills that we can also focus on at home.
- My child's education and experience reflects what matters to them – it is personalised.



## References



1. SEND Code of Practice Section:1.7
2. This section references the SEND Code of Practice: Chapter 1, section 1.1
3. Sloper, P. (1999) *Models of service support for parents of disabled children: What do we know? What do we need to know?* Child: Care, Health and Development, 25, 85-99.
4. *The perspectives of children and young people*, The Better Communication Research Programme
5. NNPCF, Contact a family and pathfinder champions co-production workshop materials; *Engagement and participation of children, young people, parents and carers – version 5*, October 2014, Appendix 5



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There is a wide range of other guidance available to help practitioners deliver the Reforms which Communicating the Code seeks to add to rather than duplicate. Follow [this link](#) to find additional resources and support and [this link](#) to see examples of good practice and case studies relating to the Code of Practice.

This document can also be downloaded from our website at [www.thecommunicationtrust.org.uk](http://www.thecommunicationtrust.org.uk)

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# Early Years

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It is particularly important in the early years that there is no delay in making any necessary special educational provision.

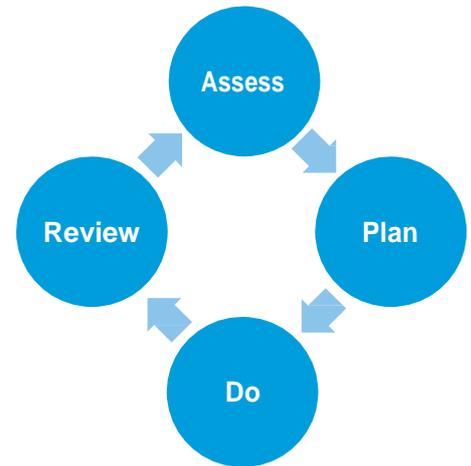
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## What does the Code say<sup>2</sup>?



The general principles contained within the code are that:

- When a child is identified as having Special Educational Needs (SEN), settings should take action to remove barriers to learning and put effective special educational provision in place.
- This SEN support should take the form of a four-part cycle of: assess-plan-do-review. This is known as “the graduated approach” and replaces school action and school action plus, early years action and early years action plus categories. All settings should adopt this approach.
- Provision should be needs-led



Specifically for early years, the Code of Practice calls for:

- All early years’ providers to have arrangements in place to support children with Special Educational Needs and Disabilities (SEND). These arrangements should include a clear approach to identifying and responding to SEN.
- Early years providers must provide information for parents on how they support children with SEN and disabilities and they should regularly review and evaluate the quality and breadth of the support they offer or can access for children with SEND.
- Parents need to be informed if special educational provision is being made for a child
- When a child is aged between two and three, early years practitioners must review progress, including speech, language and communication development and share this with parents. The review must identify strengths and areas for concern.
- All those who work with young children should be alert to emerging difficulties and respond early. In particular, parents know their children best and it is important that all practitioners listen and understand when parents express concerns about their child’s development. They should also listen to and address any concerns raised by children themselves.

The Code of Practice is clear about the need for early identification of SEN as best practice:<sup>3</sup>

- The benefits of early identification are widely recognised – identifying need at the earliest point, and then making effective provision, improves long-term outcomes for children.
- Children with more complex developmental and sensory needs may be identified at birth. Health assessments such as the hearing screening test, which is used to check the hearing of all new-born babies, enable the very early identification of a range of medical and physical difficulties. Health services, including paediatricians, the family's GP and Health Visitors, should work with the family, support them to understand their child's needs and help them access early support.



## What are the Key Issues for SLCN?

- There are substantial challenges for the children's workforce in terms of: being able to identify Speech, Language and Communication Needs (SLCN); knowing how to provide optimal universal support for speech, language and communication; as well as being skilful in involving children with SLCN and their parents within the graduated approach.
- There may be issues in accessing support from other agencies and services, in terms of identifying and supporting SLCN, as well as in accessing training and Continuing Professional Development (CPD) support.
- Practitioners need to be aware of their own role in identifying and supporting SLCN, and build up confidence in doing this.
- Practitioners and settings need to have skills in evaluating progress and know what good and expected progress looks like for children with SLCN.
- Settings may not be fully aware of what constitutes a communication supportive environment, yet this forms the foundation on which to build additional support for children with SLCN.
- There may be a lack of confidence in recognising, planning and delivering appropriate interventions for different SLCN.

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### Research snapshot...

- The importance of language in the early years is well-evidenced.
  - Language development at 2 years can often predict children's performance on entry to primary school<sup>4</sup> and is also linked to outcomes into adulthood.<sup>5</sup>
  - Children with poor language skills at 5 years are at substantial risk of low achievement at 7 years and beyond.<sup>6</sup>
  - Narrative skills at 3-6 years are a powerful predictor of literacy skill at 8-12 years.<sup>7</sup>
-

## Identifying SLCN in the early years

- Identification of children with SLCN is crucial, yet often complex and we know that many are being missed in the early years.
- The early years workforce therefore has a vital role in identifying SLCN early, but some practitioners may not have accessed training, resources or support to be able to do this accurately.
- The early years are often the point of identification or diagnosis for many children with SLCN which marks a time of huge anxiety for parents in many cases. Early years workers in pre-schools, children's centres, childminders and Health Visitors, play a key role in supporting parents at this time, and signposting to specialist services.
- Up to 50% of children in areas of social disadvantage are likely to have delayed language as they enter school.<sup>8</sup>

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### *Research snapshot...*

Research shows that early years practitioners may only accurately identify 50% of children with SLCN. Parent reports and practitioner views are not enough, and children are often missed.<sup>9</sup>

Over 60% of early years teachers reported they lacked confidence in their ability to meet children's language needs.<sup>10</sup>

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### *A little bit more about...*

**Delayed speech, language and communication** occur across all socio-economic groups; however there is a strong association with social disadvantage. In some areas, the scale of delays can raise particular challenges for effective identification.

Because the language levels of so many children are lower than those we would typically expect, practitioners and settings may underestimate the incidence of language delay purely because it is so common in their setting. Practitioners' expectations of what good language development looks like can shift to a much lower level and inadvertently set too low a benchmark for expected language development.

This makes identification difficult, as practitioners compare children within their setting rather than against typical developmental norms.

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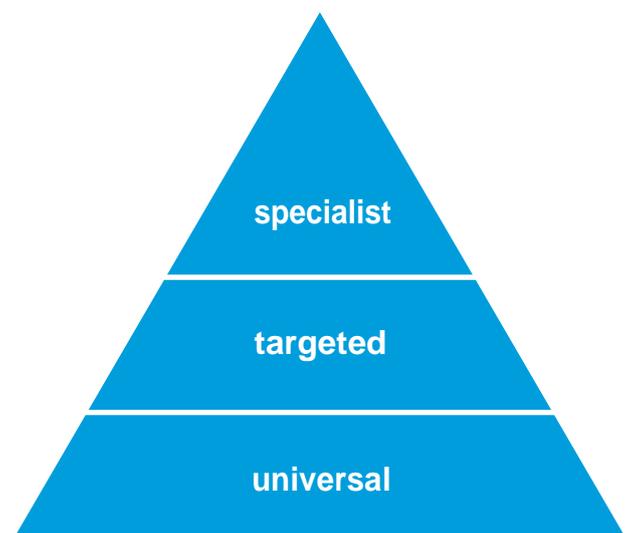
## What are the Key Strategies for SLCN?

Describing support for SLCN using the terms ‘universal’, ‘targeted’ and ‘specialist’ has become common over recent years. These terms were used, for example, to identify different evidenced approaches to supporting SLCN as part of the Better Communication Research Programme.<sup>11</sup> However, how these terms are used or represented in different areas may vary in practice.

Here, when we talk about universal support, we mean the support that should be available to all children to promote speech, language and communication development; and to enable effective early identification of children who may be struggling.

We use targeted support to describe additional or different support or intervention for children who are struggling with elements of speech, language and/or communication; this may be individual or group support.

The specialist level includes individualised assessment, intervention and support from specialist practitioners such as Speech and Language Therapists in order for the child to make progress.



- It's important that good universal support for speech, language and communication is in place. Research shows that it is the quality of adult-talk that affects children's participation and interaction and embedding this within an appropriate curriculum is important.
- It is very important to understand your roles and responsibilities in relation to identifying and supporting SLCN in young children.
- Ensure you're confident and can effectively gain the views of young children and their parents. There's some more information on this in the sections on children and young people at the centre and engaging with parents.
- Make sure you're clear on the process of undertaking further assessment and gaining support for young children with SLCN, as this will vary across settings.
- Develop effective ways of working with other professionals such as Speech and Language Therapists. Is there training you can access for example?
- To help with identification, it may be useful for your setting to develop a profile in terms of what numbers of SLCN would be expected here.
- Develop ways of engaging with parents to support their child. During this time parents may require additional support because of anxiety around the identification of needs, and to support the child with transitions (into nursery/school for example).
- Develop systems to support transitions and to share information, particularly on speech, language and communication between practitioners, e.g. Health Visitor to early years staff; early years staff to reception teacher. Admissions meetings to enable this, and for parents to share what works for their child are very helpful.
- Ensure you are able to put into place approaches to monitor and track the progress of children with SLCN. They may need progress, particularly in areas they find most difficult, to be broken down into much smaller steps.
- Use good practice in relation to child-centred outcomes. Studies have shown that even very young children can be involved in saying what is important to them (See the section on developing outcomes).

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#### *For example...*

If we know from research that 5-7% of children are likely to have specific difficulties with language and communication. Is this what you are seeing?

In an area of social disadvantage the number is likely to be much higher, and could be up to 50% of the intake having delayed speech and language skills. How are you currently identifying these needs?

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## What does success look like?



Within our setting:

- We know how to identify numbers of children with SLCN in our area.
- We have good systems in place to monitor progress, and clear intervention programmes linked to this.
- We have practitioners with a sound knowledge of speech, language and communication development.
- We've identified any workforce development needs and have good ongoing professional development plans in place around SLCN.
- We know how to access specialist support, and utilise this effectively.
- We engage with parents effectively to support language development in the home setting.
- We have good systems in place around transitions, to support children moving into nursery or into school well.



## References



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2. Code of Practice 6.44: 5.2:5.6:5.38
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4. Roulstone et al (2011), *Investigating the role of language in children's early educational outcomes research report* DfE – RR134
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8. The Communication Trust *A Generation Adrift*, (Jan 2013) P14
9. C4EO *Grasping the Nettle: Early Intervention for children, families and communities*
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11. J Law, W Lee, S Roulstone, Y Wren, B Zeng & G Lindsay (2012), "What works"; *Interventions for children and young people with speech, language and communication needs*, Better Communication Research Programme, p21



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The Communication Trust has an area dedicated to Early Years where you can find links to Early Years resources as well as free resources to help you understand and implement the Code of Practice.

You can find them at:

[www.thecommunicationtrust.org.uk/early-years](http://www.thecommunicationtrust.org.uk/early-years)

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# Schools

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Good classroom organisation to maximise language development needs to be complemented by the fine tuning of oral language interactions by staff.

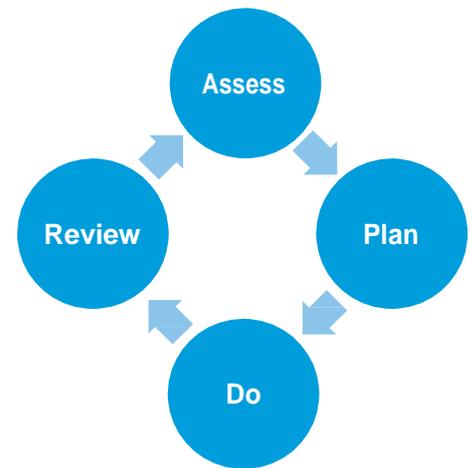
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## What does the Code say<sup>2</sup>?



The general principles contained within the code are that:

- When a child or young person is identified as having Special Educational Needs (SEN), schools should take action to remove barriers to learning and put effective special educational provision in place.
- This SEN support should take the form of a four-part cycle of: assess-plan-do-review. This is known as “the graduated approach” and replaces school action and school action plus, early years action and early years action plus categories. All settings should adopt this approach.
- Provision should be needs-led



Every maintained school must produce a SEND Information Report on their website in which it is outlined how the school will meet the needs of children and young people with special educational needs and/or disabilities (SEND). (This is the way that schools input to the Local Offer.) This report must include:

- Information on the kind of SEND provided for.
- Policies for identifying children and young people with SEND and assessing their needs.
- Arrangements for consulting parents of children and young people with SEND and involving them in their child’s education.
- Arrangements for consulting children and young people with SEND and involving them in their education.
- Arrangements for assessing and reviewing children and young people’s progress towards outcomes. This should include the opportunities available to work with parents, children and young people as part of this assessment and review.
- Arrangements for supporting children and young people in moving between phases of education and in preparing for adulthood.
- Approaches to teaching children and young people with SEND.
- How adaptations are made to the curriculum and work is differentiated.

In addition, there are a number of other factors for schools included within the new Code of Practice:

- Teachers are responsible for their students' progress including when they receive additional interventions, and including where students access support from teaching assistants or specialist staff.
  - All schools have duties under the Equality Act 2010 towards individual disabled children and young people. They must make reasonable adjustments, including the provision of auxiliary aids and services for disabled children, to prevent them being put at a substantial disadvantage.
  - Parents need to be informed if special educational provision is being made for a child or young person.
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## *What are the Key Issues for SLCN?*

There are substantial challenges for the children's workforce in terms of: being able to identify Speech, Language and Communication Needs (SLCN); knowing how to provide optimal universal support for speech, language and communication; as well as being skilful in involving children and young people with SLCN and their parents within the graduated approach.

- There may be issues in accessing support from other agencies and services, in terms of identifying and supporting SLCN, as well as in accessing training and continuing professional development (CPD) support.
- Practitioners need to be aware of their own role in identifying and supporting SLCN, and build up confidence in doing this.
- Practitioners need to have skills in evaluating progress and know what good and expected progress looks like for children and young people with SLCN.
- Schools may not be fully aware of what constitutes a communication supportive environment, yet this forms the foundation on which to build additional support for children and young people with SLCN.
- There may be a lack of confidence in recognising, planning and delivering appropriate interventions for different SLCN.

More specifically for schools:

- In the new Code of Practice, the teacher is held responsible for the progress made or not made,<sup>3</sup> for reviewing regularly what is happening for the child or young person, and putting any changes in place. However, teachers often report a lack of confidence in understanding communication development, and from this identifying need and supporting children and young people with SLCN. This can become even more difficult the older children become.
- Children and young people with SLCN continue to be under identified or misidentified in our schools.<sup>4</sup>
- Schools often feel they lack expertise in putting interventions for children and young people with SLCN into place.
- Young people with SLCN in secondary education are particularly vulnerable to peer teasing and issues around social acceptance at this time so social and emotional development are areas which should be monitored and may be particularly important in preparing outcomes for some pupils.
- The availability of services and specialist support such as Speech and Language Therapy varies geographically and also tends to decrease as children get older. The profile of children's language changes over time, but we know that 10% of children and young people have persistent SLCN, and for 1% this is severe.<sup>6</sup> By profiling over time we can capture this need to inform commissioners, and improve provision across all areas and particularly for secondary-aged students with SLCN.

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#### *Research snapshot...*

Research demonstrates that we would expect 5-7% of children and young people to have specific difficulties with speech, language and communication. However, PLASC data from schools identifies:

Of the 7.7 million children enrolled in state-funded primary, secondary, and special schools, only 138,900 are identified as having SLCN; this equals an overall proportion of 1.8%.<sup>5</sup>

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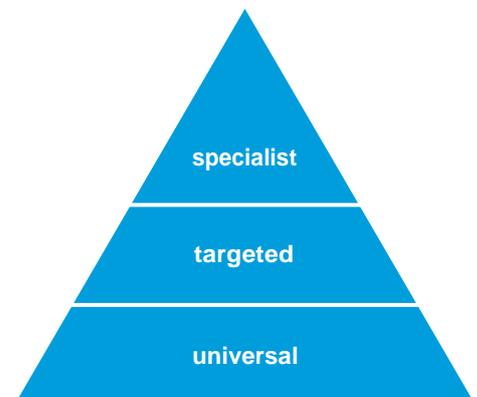
## What are the Key Strategies for SLCN?

Describing support for SLCN using the terms 'universal', 'targeted' and 'specialist' has become common over recent years. These terms were used, for example, to identify different evidenced approaches to supporting SLCN as part of the Better Communication Research Programme. However, how these terms are used or represented in different areas may vary in practice.

Here, when we talk about universal support, we mean the support that should be available to all children and young people to promote speech, language and communication development; and to enable effective early identification of children who may be struggling.

We use targeted support to describe additional or different support or intervention for children and young people who are struggling with elements of speech, language and/or communication; this may be individual or group support.

The specialist level includes individualised assessment, intervention and support from specialist practitioners such as Speech and Language Therapists in order for the child or young person to make progress.



- Developing good universal practice for speech, language and communication is important. There are a number of useful tools for doing this including the *Communication Supportive Classrooms tool for reception and KS1*.
- It is very important to understand your roles and responsibilities in relation to identifying and supporting SLCN.
- Knowing where to go to find out information about typical speech, language and communication development is really useful. This will help identify school aged children who are not developing as expected. There are a number of free resources to help you do this, for example: *Universally Speaking* and *www.talkingpoint.org.uk*. There may also be locally developed guidance available to you too, as well as commercially available resources.
- Remember, language skills continue to develop throughout adolescence. Secondary schools also need to consider how to support young people with SLCN reach their potential.

- Find useful tools and resources to enable you to effectively identify SLCN. There are a number of useful tools available to do this, for example [Universally Speaking 5-11 and 11-18. The Progression Tools \(available across age ranges up to 18\)](#) can help with identification but also provide a clear means of monitoring progress.
- Make sure you're clear on the process of undertaking further assessment and gaining support for pupils with SLCN, as this will vary across schools
- Develop effective ways of working with other professionals such as Speech and Language Therapists and ensure you know when and how to refer to local Speech and Language Therapy services. The [Talking Point](#) website also has a link to an advice line for individual telephone consultations, and can signpost to local services.
- Develop ways of engaging with parents to support their child. Parents may require additional support because of anxiety around the identification of needs, if there is a diagnosis and to support the child with transitions (from primary to secondary school for example).
- Develop systems to support transitions and to share information between practitioners.
- Ensure you're confident and can effectively gain the views of pupils with SLCN and their parents, see the sections on [engaging with parents and children](#) and [young people at the centre](#) for more tips on how to do this.
- Be aware of different pressures on the student at different ages in terms of verbal skills required. For example, pupils transitioning to year 7 may benefit from specific teaching of vocabulary likely to be used in class in secondary school. Focus on supporting access to learning.
- Ensure you are able to put into place approaches to monitor and track progress of pupils with SLCN. They may need progress to be broken down into much smaller steps, particularly in areas they find most difficult.
- Be aware that SLCN can often change over time. It's vital to regularly review a pupil's SLCN as part of the assess-plan-do-review cycle.

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### *For example...*

A student with social communication difficulties may not require targeted support at key stage 1. However, by key stage 2 as the language used within the classroom becomes more abstract, and difficulties navigating friendships becomes more apparent, then school targeted support becomes beneficial for good outcomes.

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- Use good practice in relation to child-centred outcomes for children and young people with SLCN. There are some strategies to help with this in the developing outcomes section.
- Find out what your professional development needs are and look for ways to gain further professional development in this area. For settings, it's really useful for a professional development plan that includes communication and SLCN to be in place. The Speech, Language and Communication Framework (SLCF) can be used to gauge practitioner knowledge and plan training to meet any gaps.
- Utilise evidence to select appropriate interventions to support children and young people. The What Works database of evidenced interventions can help you do this.
- Placing support for pupils with SLCN within a whole school strategy around communication led by the senior leadership team of the school is best practice for providing universal good practices to inform teaching and support for all students. The Communication Commitment can help schools across all phases to review practice and set in place an action plan for the school.

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### **Research snapshot...**

The Better Communication Research Programme (BCRP) found that it was essential to monitor and profile children over time particularly at key transition points (entering school; year 3; year 7; year 10). This is because children's needs change over time, but also the linguistic challenge becomes even greater as a child moves through education.

The curriculum already by year 1 relies almost exclusively on verbal skills, and these demands increase exponentially further up the school. <sup>8</sup>

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## What does success look like?



Within our setting:

- We know how to identify numbers of children with SLCN in our area.
- We have good systems in place to monitor progress, and clear intervention programmes linked to this.
- We use evidence well to inform interventions for SLCN.
- We have practitioners with a sound knowledge of speech, language and communication development.
- We've identified any workforce development needs and have good ongoing professional development plans in place around SLCN.
- We know how to access specialist support, and utilise this effectively.
- We engage with parents effectively to support language development in the home setting.
- We have good systems in place around transitions, to support children moving into nursery or into school well.



## References



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8. G Lindsay, J Dockrell, J Law, S Roulstone, (2012), *Improving Provision for Children and Young People with speech, language and communication needs*, The Better Communication Research Programme, p7



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# Post-16

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College should be ambitious for young people with SEN.<sup>1</sup>

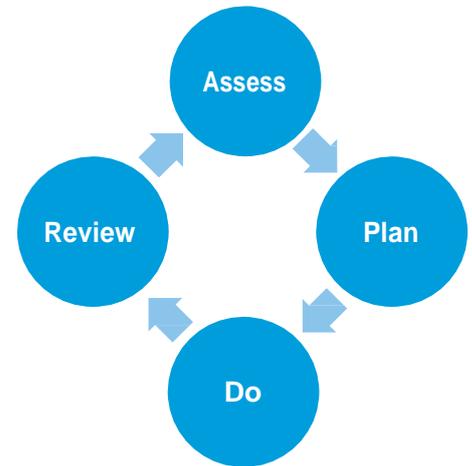
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## What does the Code say<sup>2</sup>?



The Code now applies to children and young people aged between 0 and 25 years, and so has implications for the further education (FE) sector.

- When a child or young person is identified as having special educational needs (SEN), settings should take action to remove barriers to learning and put effective special educational provision in place.
- This SEN support should take the form of a four-part cycle of: assess-plan-do-review. This is known as “the graduated approach” and replaces school action and school action plus, early years action and early years action plus categories. All settings should adopt this approach.
- Provision should be needs-led.



The requirements around identifying need at FE level are less detailed than in other phases. Section 7.11 outlines that:

- Some needs may emerge after a student has begun a programme. Teaching staff should work with specialist support to identify where a student may be having difficulty because of SEN.
- However, once a student has been identified as having a learning difficulty or disability that calls for special educational provision, the college must use its best endeavours to put appropriate support in place.
- Young people should be supported to participate in discussions about their aspirations, their needs and the support that they think will help them best.
- Support should be aimed at promoting student independence and enabling the young person to make good progress towards employment and/ or higher education, independent living, good health and participating in the community.
- Chapter 8 of the Code of Practice outlines in more detail requirements relating to transition, including the importance of sharing information well.



## *What are the Key Issues for SLCN?*

- There are substantial challenges for the workforce in terms of: being able to identify SLCN; knowing how to provide optimal universal support for speech, language and communication; as well as being skilful in involving and young people with SLCN and their parents/carers within the graduated approach.
- There may be issues in accessing support from other agencies and services, in terms of identifying and supporting SLCN, as well as in accessing training and continuing professional development (CPD) support.
- Practitioners need to be aware of their own role in identifying and supporting SLCN, and build up confidence in doing this.
- Practitioners and settings need to have skills in evaluating progress and know what good and expected progress looks like for children and young people with SLCN.
- Settings may not be fully aware of what constitutes a positive communication supportive environment, yet this forms the foundation on which to build additional support for children and young people with SLCN.
- There may be a lack of confidence in recognising, planning and delivering appropriate interventions for different SLCN.
- This is a key time for young people with SLCN and research shows often the time things go wrong with transitioning. This may relate to anxiety about the move, as well as support systems that had been in place falling away. In a climate of funding changes also, it is often not clear to schools or families what post- school provision is, and what choices are available.
- The key change from the reforms here is that now young people post 16 can make decisions independent of their family if they so wish. This has implications for practitioners being certain of young people's capacity in this regard.

- From year 9 there should be an increased focus on future plans in annual reviews for young people, and on their aspirations. Yet, talking about the future can be especially difficult for young people with SLCN because in order to do this you need both the language and cognitive skills to conceptualise the future and to formulate ideas. Abstract concepts for young people with SLCN such as “growing up”, “in the future” and “when you’re an adult” are often very difficult to understand because the individual has no experience of these concepts to link the words to.
- It can be challenging for young people with SLCN to acquire skills for work and for life. Their needs can impact on all aspects of learning, social interaction and self-esteem. Good language skills and communication are vital work skills any yet often taken for granted. A focus on supporting young people’s continued communication development is essential in post-16 institutions but few colleges offer specialist support for young people with SLCN. Yet, research points to the positive impact that such support can have on psychosocial<sup>3</sup> outcomes and on successful transitions to employment or further training.<sup>4</sup>



## What are the Key Strategies for SLCN?

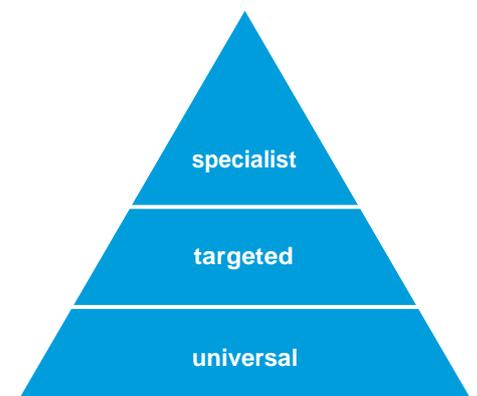
Describing support for SLCN using the terms 'universal', 'targeted' and 'specialist' has become common over recent years. These terms were used, for example, to identify different evidenced approaches to supporting SLCN as part of the Better Communication Research Programme.<sup>5</sup> However, how these terms are used or represented in different areas may vary in practice.

Here, when we talk about universal support, we mean the support that should be available to all young people to promote speech, language and communication development; and to enable effective early identification of children who may be struggling.

We use targeted support to describe additional or different support or intervention for all young people who are struggling with elements of speech, language and/or communication; this may be individual or group support.

The specialist level includes individualised assessment, intervention and support from specialist practitioners such as speech and language therapists in order for the young person to make progress.

- It is very important to understand your roles and responsibilities in relation to identifying and supporting SLCN.
- Find out what your professional development needs are and look for ways to gain further professional development in this area. For settings, it's really useful for a professional development plan that includes communication and SLCN to be in place *The Speech, Language and Communication Framework (SLCF)* can be used to gauge practitioner knowledge and plan training to meet any gaps.
- Ensure you're confident about gaining the views of young people with SLCN and their parents. This is important for setting person-centred outcomes but also often young people are able to say what helps them, and what strategies others should use. See section on children and young person at the centre for things to consider. To enable participation, young people with SLCN require accessible language to be used with them and a sufficient allocation of time for the process. Time is likely to be required for the young person to process questions in order to formulate a response.



- Find useful tools and resources to enable you to effectively identify SLCN. There are a number of useful tools available to do this, for example *Universally Speaking 11-18. The Progression Tools* can help with identification but also provide a clear means of monitoring progress. Be aware that young people with SLCN may have become very adept at masking their difficulties, this can be the case especially with difficulties understanding spoken language. Look out for indicators such as waiting for you to rephrase open questions to closed question, and overreliance on others' nonverbal communication to read the situation.
- Post-16 settings should consider how they support young people with SLCN effectively, what good practice looks like for them at a universal level, and what support they can offer at a targeted level. This provision should include ongoing staff training around communication skills and knowing how to access specialist support.
- Develop effective ways of working with other professionals such as Speech and Language Therapists. Locally, they may also be able to offer useful staff training, or signpost to such training.
- This is a time of change for the individual, so the practitioner's task is to make concepts around the future more concrete and meaningful so that they can be understood.
- Choice-making also needs to be informed. This is true for a young person at any age, but particularly in the context of future life decisions, and a young person making decisions independently. The young person needs to experience any potential options, preferably a number of times.
- Helping the young person to prepare for new stages in their lives is essential for smooth transitions.
- Sharing information between school, parents and FE provision is key, particularly information about language levels and communication methods.

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#### *For example...*

"Growing up" could be illustrated by collecting together photos of the young person at different ages and arranging them on a timeline. The practitioner could talk about different skills acquired at different ages as a way to introduce the concept of future skill development.

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#### *For example...*

FE settings need to know:

- Any behavioural support or transition systems in place (e.g. "traffic light system", importance of using now/next symbols)
  - Levels of understanding of the student and how to assist with this (e.g. importance of "thinking time", using visual supports)
  - About any augmentative systems that the student uses (use of signing, or symbol communication systems) – and to arrange for staff to be trained prior to the student attending
  - About any alternative communication systems in use (VOCAs, iPads, PECS etc), and how to programme/provide new words, build on a student's use of these, embed into college life and ensure access to these systems.
-

- It is good practice for future settings to spend time with the student and staff in the school, meet with parents, and observe what works prior to the transition. Also, schools and post-16 settings who use pen pictures/communication passports can help greatly in sharing salient information on what is important to the young person.
- Enabling participation remains a key objective at this stage, alongside promoting independence and functional living skills. Communication skills are integral to success. As with schools, post-16 settings need to consider how they are ensuring young people can participate in decision-making (see [schools](#) information), and participate in setting their own meaningful outcomes. This is true whether the young person has an Education and Healthcare (EHC) plan or not. The setting must demonstrate SEN support provided and its effectiveness in order to remain within funding rules.<sup>6</sup>
- FE settings may play a key role in preparing a young person for employment. It is important that young people with SLCN are given the same opportunities as others, but dependent on the individual's needs, they may require personalised support to manage applications, interviews, awareness of different language registers, social language skills and so on.

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#### **Research snapshot...**

The Better Communication Research Programme (BCRP) found that it was essential to monitor and profile children over time particularly at key transition points (entering school; year 3; year 7; year 10). This is because children's needs change over time, but also the linguistic challenge becomes even greater as a child moves through education.

The curriculum already by year 1 relies almost exclusively on verbal skills, and these demands increase exponentially further up the school.<sup>8</sup>

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## What does success look like?



This is what success looks like for the practitioner:

- Universal communication practices are in place to benefit all young people.
- We know how to access targeted support and specialist support for our students, and how to use Speech and Language Therapy services effectively to benefit our students with SLCN.
- We use personalised approaches to find out what matters for our students with SLCN, what is going well, what could be better, and to set meaningful targets together.
- Person-centred reviews take place for each young person with SEND in our setting, and lead to positive change for the individual and family.
- We work in partnership with parents, to share skills, information and decide on joint outcomes.
- Our curriculum is person-centred, and we use this to inform our SEN information report.
- We have good transition systems in place, we prepare our students well, and we share information effectively with other settings.
- Choice-making is embedded within our daily practice.
- We have a programme in place for ongoing workforce development.



## References



1. SEND Code of Practice section 7.4
2. SEND Code of practice section 6.44, 7.11, 7.13, 8.27
3. Anson L (2009) *Life Outcomes in adults with childhood histories of severe and complex communication difficulties who attended a special residential school*: Unpubl PhD Sheffield Uni
4. Dawn House *transition case study* at <http://www.transitionsupportprogramme.org.uk>
5. J Law, W Lee, S Roulstone, Y Wren, B Zeng & G Lindsay (2012), "What works"; *Interventions for children and young people with speech, language and communication needs*; Better Communication Research Programme, p21
6. SEND Code of Practice chapter 7: 7.25-7.26



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There is a wide range of other guidance available to help practitioners deliver the Reforms which Communicating the Code seeks to add to rather than duplicate. Follow [this link](#) to find additional resources and support and [this link](#) to see examples of good practice and case studies relating to the Code of Practice.

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# Education and Health Care Plans

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Good plans make a strong link between aspirations, needs, outcomes and provision, so it is clear how provision from ... agencies actually meets identified needs and outcomes.<sup>1</sup>

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## What does the Code say<sup>2</sup>?

- Education Health and Care (EHC) Plans are legal documents that set out the education, health and social care support a child or young person with special educational needs (SEN) requires when their needs exceed resources available to mainstream early years providers, schools and post-16 institutions.
- They replace statutory assessments and statements of SEN and (for older students) Learning Difficulty Assessments.
- They differ from statements in that EHC plans do not necessarily cease when a young person leaves school, and can be continued when a young person is in college, undertaking an apprenticeship, or not in education, employment or training. EHC plans can be continued up to the age of 25 years.
- They also aim to bring together any education and/or health and/or care requirements children/young people may have into one plan.
- The assessment process should be well coordinated and result in timely, well informed decisions.
- Timescales are substantially shorter than the previous statementing process with the entire process, from the point where a statement is requested until the final EHC Plan being issued, taking no more than 20 weeks.
- The plan should be focused on the outcomes the child or young person wants to achieve, and set out in detail how services will work together to support these outcomes. It should also specify how any personal budget is to be used to deliver some or all of the provision set out in the EHC Plan.

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### *A little more about...*

#### **EHC process**

This information supports the flow chart on page 154, section 9.44 of the Code of Practice

#### **Beginning an assessment**

If it is felt that a child or young person's special educational needs or disability cannot be well provided for within current provision, then a local authority can begin a statutory assessment to see if an EHC plan is required. Any individual involved with a child or young person (parent, professional or young person themselves at 16 years onwards) can request an assessment, but the local authority will first establish whether an assessment is warranted, and may request information about a child or young person at this point.

#### **Statutory assessment**

When carrying out a statutory assessment of SEN the local authority must seek advice and information from education, health and social care professionals with a role in relation to the child or young person and this information must be provided in a clear and specific written submission.

All professionals involved should focus on the needs and preferences of the child or young person and their family, and support them to be actively involved and to make informed decisions regarding the assessment process. From the date of request for information, all agencies contacted will be given 6 weeks to provide reports.

#### **Developing an EHC plan**

If from this assessment process, it is agreed that a plan is required then the local authority will use this information to develop an EHC Plan. This will set out details of the education, health and social care provision required by the child or young person and who is responsible for securing it. It is seen as best practice that the plan is written at a multi-agency meeting with the family and child or young person present. In practice, SENCOs may bring a draft copy to the meetings to provide a format to work from. Outcomes should also be agreed at the meeting.

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- Local authorities are required to secure the special educational provision specified in an EHC plan. There is also a new duty on Health for the responsible commissioning body to arrange the health care provision specified in an EHC plan.
- In terms of communication support, the provision of alternative communication systems (AAC) would come under Health (rather than Education), and involve NHS England rather than Clinical Commissioning Groups (CCGs).

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#### Reviewing EHC Plans

Local authorities must review EHC plans at least once per year. This is to assess whether the provision specified is still appropriate and whether progress is being made toward achieving the outcomes. All reviews from year 9 onwards must include a focus on preparing for adulthood. Information on the number and content of EHC Plans should also be used to inform the review of the joint commissioning arrangements by providing clear information about provision and outcomes relating to children and young people with SEN in each area.

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## What are the Key Issues for SLCN?

- The aspirations of the child or young person should drive the process; this links to the inherent difficulties in capturing this information where there are speech, language and communication needs (SLCN) and with very young children. There is more information in the section on developing outcomes on ways to do this.
- Many of the issues for EHC planning for children and young people with SLCN are very similar to those faced by other areas of special educational needs and/or disabilities (SEND) generally. For example, time and resource issues.
- SLCN may be overlooked because often children and young people in receipt of EHC plans have a variety of educational and medical labels used to describe their needs. The focus may be on a primary diagnosis (e.g. cerebral palsy, severe learning difficulties), and an impairment, rather than how this impacts upon the individual and their needs.
- Similarly, an impairment model which focuses on diagnosis, e.g. autism, can lead to a less individualised, 'one-size fits all' approach and as a consequence, inappropriate interventions.
- There is concern that children and young people with specific learning impairments (SLI) may not qualify for plans, despite ongoing difficulties in accessing the curriculum and learning.
- The emphasis is on provision led by a child and young person's needs, so it is important for services to set out what the child and young person needs, rather than what they as a service can currently provide. If there is a current mismatch between need and provision, the local authority should flag this up to commissioners, and if agreed as reasonable and necessary, then arrangements for increased provision should be made.

If increased provision is not agreed then commissioning partners should engage the dispute resolution process which is set out in their joint commissioning arrangements (JCA). Within the JCA there should also be information on how EHC Plans will be delivered, including responsibilities for funding arrangements between partners.

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### *A little more about...*

**Reasonable** is a legal definition defined in case law as what an average person would ask or do (what a reasonable man would do).

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## What are the Key Strategies for SLCN?

- Staff skills and processes to support involving children and young people with SLCN throughout the EHC plan process are essential. There is more information on this the section on developing outcomes.
- Again, a focus on the needs of the child or young person and identifying current barriers to learning is vital. This is a social model rather than impairment-based model and fits with what we know works for SLCN: looking holistically at the support around the child or young person and a personalised approach to support and interventions.
- Allied to this, practitioners need to be skilled in person-centred planning. The section on children and young people at the centre has more information on this.
- Allocating sufficient time to request and collate information to develop and review plans is essential. Time is required to find out what is going well for the child or young person with SLCN and what could be better. Parents should also be encouraged and supported where possible to think before meetings about what is important for them in relation to their child.
- Pen pictures can be developed for the review, or at the review, so that all present have a shared idea of important strategies and what is most important to the individual.
- Effective joint working across professionals is essential.
- In this way the focus is on outcomes – and the Royal College of Speech and Language Therapists suggests families should be pursuing outcomes rather than services.

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### *For example...*

Key questions that are useful to ask parents whilst writing the EHC plan or at the review are:

- What do you want your child to be able to do in 12 months that he/she can't do now?
  - What support do you need to achieve this?
  - What services or people do you think are best placed to help with this support?
-

## What does success look like?



A good EHC Plan should:

- Clearly represent the views of the child or young person.
- Set out the needs and aspirations of the parents and family for their child.
- Follow a logical sequence, and clearly demonstrate how the outcomes selected and provision relate directly back to what is working well for the individual now, and what will work well in the future.
- Have a long-term focus, and include outcomes around independence and functional life skills.
- Set out clearly the roles and responsibilities of everyone involved.



## References



1. Letter to SEND lead officers from DfE dated 15.9.14,  
[www.education.gov.uk](http://www.education.gov.uk)
2. SEND Code of Practice Chapter 9



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# Joint Commissioning

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Speech and language therapy must be treated as special educational provision where it 'educates or trains' a child unless there are exceptional reasons for not doing so.

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## What does the Code say<sup>2</sup>?

A major element of the reforms in the new Children & Families Act (2014) is the requirement that Education, Health and Social Care work together effectively to improve outcomes for children and young people with Special Educational Needs and/or Disabilities (SEND). The Code of Practice gives flexibility to agencies to decide how to make this system work at a local level, and to design local services to fit the needs of the population. However, there are some key requirements:

- In every Local Authority there must be Joint Commissioning Arrangements (JCA) between the Local Authority (LA) and the relevant Clinical Commissioning Groups (CCGs).
- The Local Authority must also make arrangements with NHS England to agree joint commissioning arrangements for disabled children and young people with Special Educational Needs (SEN) who require specialist services commissioned directly by NHS England. This would include securing equipment for augmentive and alternative communication (AAC).

The Joint Commissioning Arrangements must set out the following:

- The Education, Health and Social Care provision reasonably required by local children and young people with SEND aged 0-25 years, both with and without EHC plans. This should draw upon local information and data.
- How this provision will be secured and by whom.
- What advice and information about Education, Health and Social Care provision is available, and who is responsible for providing this advice.
- How children and young people with SEND are identified.

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### *A little more about...*

**Clinical commissioning groups (CCGs)** are NHS organisations set up under the Health and Social Care Act (2012) to organise the delivery of NHS services in England. They include all of the GP groups in their geographical area. The aim of this is to give GPs and other clinicians the power to influence commissioning decisions for their patients.

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### *A little more about...*

**Reasonably required** is a legal definition defined in case law as what an average person would ask or do (what a reasonable man would do). This principle contained within the code has not yet been tested in a court of law therefore it is difficult to know how the definition of a reasonable request will be tested.

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The JCA must also include arrangements and responsibilities for securing outcomes and personalised services for children and young people aged 0-25 with SEND, specifically:

- Securing Education, Health and Care assessments;
- Securing the Education, Health and Care provision specified in EHC plans; and
- Agreeing personal budgets.

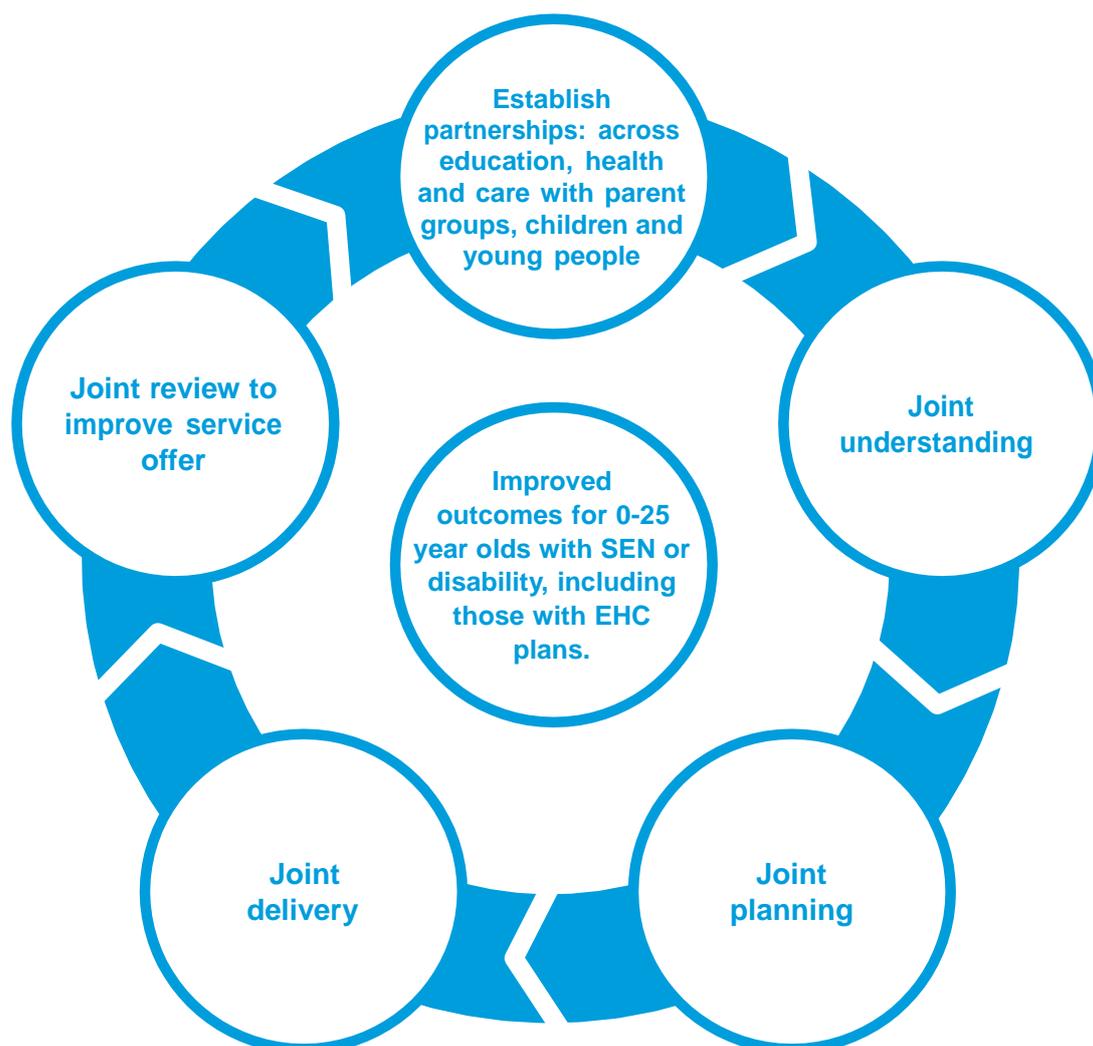
The joint commissioning processes must underpin the Local Offer- the Local Offer will present the outputs of joint commissioning publicly. See the section on the [Local Offer](#) for more information.

There is also a requirement that children, young people and their families are engaged at a strategic level in commissioning decisions. Local Authorities, CCGs and NHS England must develop effective ways of engaging with their communities including children, young people and their families so that commissioning decisions on services for those with SEND are shaped by users' experiences, ambitions and expectations.

To do this, local partners need to develop a shared vision together for children and young people with SEND and their families, and to formulate a clear plan for how to achieve this. This will require a thorough understanding of needs and how they are currently met by Education, Health and Social Care provision, and the identification of current gaps in the provision.

Commissioning also requires flexibility to monitor the changing needs of the local population. There needs to be clear mechanisms to assess if the available provision is improving children and young people's outcomes.

The Code of Practice follows a joint commissioning cycle based around the principles of joint understanding, planning, delivery and review.





## What are the Key Issues for SLCN?

- The commissioning of Speech and Language Therapy has been largely determined by local arrangements between the health service, local authorities and also individual schools in some instances. This has led to different levels of service available according to who is locally responsible for providing the service.
- Children and young people with Speech, Language and Communication Needs (SLCN) can easily fall through the gaps in provision. There is strong evidence that children with SLCN are under identified or misidentified. In some areas local policy and practice isn't enabling consistent identification of all children with SLCN; children and young people are being missed.
- Another issue is that, as Speech and Language Therapy (SLT) is deemed part of special educational needs provision, rather than a health provision, this places a duty on local authorities to take a lead in providing SLT. However Speech and Language Therapists are more generally employed by the NHS, so there is a need for the NHS to support this provision as part of the Joint Commissioning Arrangements.

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### **Research snapshot...**

A key finding from the Better Communication Research Programme (BCRP) is that many children and young people with SLCN will not be eligible for EHC plans despite difficulties with accessing the curriculum. Health and education need to work together to design and commission needs-led local services that consider universal as well as targeted and specialist approaches to improving children and young people's communication skills.<sup>4</sup>

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### **Research snapshot...**

Research shows that early years practitioners may only accurately identify 50% of children with SLCN. Parent reports and practitioner views are not enough, and children are often missed.<sup>5</sup>

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## What are the Key Strategies for SLCN?



- Commissioners need to look at the best use of Speech and Language Therapy expertise in supporting the children's workforce. Good practice under this model would be to enable appropriate Speech and Language Therapy commissioning at universal and targeted levels, as well as at the specialist level.
- Schools need to consider and understand models that enable effective and cost efficient allocation of resources to support SLCN, including use of specialists within the classroom, through effective training and professional development, targeted interventions and direct specialist support.
- Speech and Language Therapy should be a major focus of the JCA. This is because most children and young people in receipt of an EHC plan are likely to have some level of SLCN, because of the role of speech, language and communication across a wide range of SEND. Speech and language specialist input will be vital in assessing need and formulating a plan to address those needs.
- There is clear evidence available around the prevalence of SLCN and where geographically there are highest levels of need. By checking identified need against the estimated prevalence, local authorities can gauge levels of under-identification presently, and put in place systems to address this. Services can then be commissioned based on a more accurate view of need. It is important that Commissioners look at a needs-led model rather than an impairment based model.

## What does success look like?



From a practitioner's point of view:

- Our Local Authority has forged good connections across health, education and social care.
- We feel that our Commissioners know our local population and its needs.
- Commissioners respond to changes in provision required.
- We have effective models of service provision commissioned.
- Targeted and universal services are commissioned alongside specialist SLT provision.



## References



1. SEND code of practice 4.40 and 9.74
2. SEND Code of Practice chapter 3; 3.3, 3.9, 3.10 - 3.13,3.18,3.36, 3.38, 3.45, 3.59
3. SEND Code of Practice 3.10 P41
4. Law J, Lee W, Roulstone S, Wren Y, Zeng B & Lindsay G (2012), *“What works” – interventions for children and young people with speech, language and communication difficulties*, Better Communication Research Programme
5. The Communication Trust *A Generation Adrift*, (Jan 2013) P14



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# The Local Offer

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The Local Offer should be, collaborative ...  
accessible ... comprehensive ... up to date ...  
transparent.

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## What does the Code say<sup>2</sup>?

The Local Offer sets out, in one place, information about Education, Health and Social Care provision a Local Authority expects to be available for children and young people in their area with Special Educational Needs and/or Disabilities (SEND). Every Local Authority has a duty to publish, maintain and update their Local Offer. It must be published on a website and be accessible both to those who do not have access to the internet and to those with different types of SEND.

### The Local Offer:

- Should provide details on the range of services available, across universal, targeted and specialist services.
- Should include services for children and young people with SEND who may receive assistance in early years settings or school through Special Educational Needs (SEN) support, those who have an Education Health and Care plan and those currently without a diagnosis.
- Is particularly important for children and young people with SEND but who don't have an EHC plan. While having an EHC plan creates access to a range of services, a system of review and a mechanism for action if the services specified in the plan are not delivered, this is not the case for those without a plan, so the Local Offer is the only place where services available to them will be set out.
- Must also include information on provision outside of the local area, if it is likely to be used by children and young people the Local Authority has responsibility for.
- Should provide information on services such as:
  - Therapies e.g. Speech and Language Therapy, Occupational Therapy and Physiotherapy
  - Child, Adolescent and Mental Health Services (CAMHS)
  - Those assisting educational provisions to support children and young people with medical conditions.
- Should also include highly specialist services commissioned centrally by NHS England such as securing alternative communication systems.

#### The Local Offer must also:

- Be promoted to children and young people with SEND and their families and the information should be easy to understand, and jargon free.
- Involve parents, children and young people in its development. The Local Authority has a duty to consult with users in reviewing what is currently available in the local area. This could mean the use of Parent Carer Forums or focus groups.
- Give details on how services can be accessed and any admission or eligibility criteria.
- Give details on how to access information, advice and support.
- Say how to complain about provision or appeal against decisions.

For schools, each school must publish their SEN Information Report on their school website, and this information feeds into the Local Offer from the Local Authority. This is not the case for early years providers or FE provision.

#### Additionally the Local Offer

- Builds on the requirements for Local Authorities and Health services to complete Joint Strategic Needs Assessments for their areas of responsibility, and should reflect the service options arising from the Joint Commissioning Arrangements (JCA). For more information on [joint commissioning](#), please read the section on this.
- Should also set out how services will meet the identified local need and achieve the outcomes set out by the JCA. In this way, the Local Offer is envisaged as a useful tool to assist with the monitoring and improvement of provision.



## What are the Key Issues for SLCN?

- Children and young people with speech, language and communication needs (SLCN) can easily fall through the gaps in provision. Many will not have their needs identified or their needs may be wrongly labelled.
- Even for children and young people where a communication need is identified, there may be many who will not be eligible for EHC plans. For those without an EHC plan access to a quality Local Offer will be imperative.
- Although SLCN is the most common SEN, it is a broad term and we know that families can struggle to find the right information and support. As discussed in the [introduction](#), SLCN can be missed, misinterpreted or misunderstood.
- SLCN is an umbrella term and the diversity of different types of SLCN can make it hard for families to find the specific support that they need. It is important that each family is able to find support that is right for their child, even if that is through a smaller specialist organisation.
- The Local Offer should contain information on a range of services appropriate for children and young people with SLCN. Families will be expecting services to be joined up, as part of one Local Offer. Although there is an emphasis with EHC plans on joined up working, it will be important that this is experienced by all children and young people with SLCN, whether they have an EHC plan or not.
- There are challenges in ensuring information is clear and accessible both to children and young people with SLCN, many of whom will also have associated difficulties with literacy, and their parents.
- There are clearly challenges in engaging the views of children and young people with SLCN, and in expressing their views in influencing local changes and may be even more difficult at this more strategic level. This is discussed more in the section on [children and young people at the centre](#).

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### Research snapshot...

20.6% of pupils with SEN in primary, secondary and special schools have SLCN as their primary need, making it the most prevalent of all SEN; in primary schools this figure is 31.6% (DfE SEN in England, 2014 statistics).

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## What are the key strategies for SLCN?

- The Communication Trust has developed an online resource which sets out 10 key principles for seeing how a Local Offer addresses the key issues for children and young people with SLCN. It also provides links to resources that Local Authorities can add to their Local Offer which will help meet these principles. These resources can be found at:  
[www.thecommunicationtrust.org.uk/localoffer](http://www.thecommunicationtrust.org.uk/localoffer) and  
[www.thecommunicationtrust.org.uk/localofferreadme](http://www.thecommunicationtrust.org.uk/localofferreadme)
- The 10 principles are derived from the findings of the most recent review into the needs of children with SLCN (The Bercow Review), and draws on experiences from the categorisation of services for disabled children by other organisations.

### *A little more about...*

**The Bercow Review** was commissioned by the Government in September 2007 and aimed to improve services for children and young people from birth to 19 who have speech, language and communications difficulties. It is now in common use, including informing the Code of Practice.

## 10 principles of a Local Offer in relation to SLCN:

### **A Local Offer should:**

1. Enable families to easily locate what universal services are available for children and young people with SLCN.
2. Enable families to easily locate what targeted services are available for children and young people with SLCN.
3. Enable families to easily locate what specialist services are available for children and young people with SLCN and whether these services are available to be purchased if the family is in receipt of a personal budget.
4. Enable families to easily locate what other resources are available or accessible within the community which may be of assistance to children and young people with SLCN, but are not funded by either the local statutory services or by personal budgets.
5. Enable parents, young people and children with SLCN to engage with the local authority and local Clinical Commissioning Group (CCG) as they commission services.

### **A good Local Offer for children and young people with Speech, Language & Communication Needs (SLCN) will include:**

6. Speech, Language and Communication as a major topic within the Local Offer, which is easily found by families.
7. A comprehensive section for families who are concerned about their child's speech, language or communication.
8. A comprehensive offer of early intervention available for children and young people with SLCN.
9. A description as to how services will work together jointly for children and young people with SLCN.
10. Quality resources that are consistent across the Local Authority and can be accessed equally by families across the Local Authority.

## What does success look like?



- Families who have children with SLCN can turn to their Local Offer and find a comprehensive set of information about the services that are available to their child which will enable them to start the journey towards having their needs correctly identified.
- Through the Local Offer a family with a child with SLCN can decide whether they want an EHC assessment and apply for it.
- The Local Offer enables families to find and access universal services that they experience as being inclusive of their child.
- The Local Offer enables families to find targeted support that their child may need, whether they have an EHC plan or not.
- Through the Local Offer families are able to access specialist services where appropriate, and those with low incidence need will find the specialist support they require, even if it is only available from a national or regional organisation.
- Families experience services as being joined up working together holistically, whether they have an EHC plan or not.
- Families feel that they can input into the development of the Local Offer and the commissioning of services that support it.



## References



1. SEND Code of Practice section 4.2
2. SEND Code of practice Chapter 4



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There is a wide range of other guidance available to help practitioners deliver the Reforms which Communicating the Code seeks to add to rather than duplicate. Follow [this link](#) to find additional resources and support and [this link](#) to see examples of good practice and case studies relating to the Code of Practice.

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# Youth Custody

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The local authority must promote the fulfilment of the detained person's learning potential while they are in custody and on their release, whether they have an EHC plan or not.<sup>1</sup>

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## What does the Code say<sup>2</sup>?

- The new requirements aim to provide continuing and appropriate special Educational and Health provision needed by a child or young person with special educational needs and/or disabilities (SEND).
- This part of the framework applies to children and young people aged 18 and under who have been sentenced or remanded by the Courts to relevant youth accommodation in England. Relevant youth accommodation is a Young Offender Institution, a Secure Training Centre or a Secure Children's Home and in future will include, Secure Colleges.
- The principles of the Reforms support the timely identification and assessment of special educational needs (SEN) and provision of high quality support at the earliest opportunity – this is relevant both in the community and for children and young people detained in youth custody.
- The home Local Authority must promote the fulfilment of all detained children and young people's learning potential while they are in custody and on release whether they have an Education and Healthcare (EHC) plan or not. Education providers should ensure SEN provision, identification and support follows the model for schools and colleges.
- Where a child or young person has an EHC plan in place on entering custody, the home Local Authority must keep it and any education and/or health provision specified in it must be arranged. If the provision specified appears no longer to be appropriate the Local Authority or Health care Commissioner must arrange provision it considers appropriate. Similarly, if the specified provision in their EHC plan is not practicable, provision as close as possible to it must be arranged.

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### *A little more about...*

The Home Local Authority is where the detained young person is 'ordinarily resident'

Ordinarily resident is a legal term defined as 'The place where in the settled routine of an individual's life, he or she regularly, normally or customarily lives'

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- For a child or young person entering custody without an EHC plan, the person in charge of the relevant youth accommodation, the child's parent/carer or the young person themselves have the right to request an assessment of their post-detention needs to establish whether an EHC assessment is necessary. If a child or young person has been assessed as requiring an EHC plan, one must be prepared and the provision in it arranged.
- When a child or young person is detained, the Youth Offending Team (YOT) must tell the Local Authority, and if they have an EHC plan, the Local Authority must send it to the YOT and the secure establishment. If the child or young person is known to have SEN, details of this and any assessments undertaken should also be passed on.
- The Code is also clear that identification is important and mentions the screening process for speech, language and communication needs (SLCN) specifically. On entry to custody, all detained children and young people are screened using the Comprehensive Health Assessment Tool (CHAT) which includes a screening for SLCN. They are also all assessed using the approved Youth Justice Board Assessment Tool and this includes collecting information from a number of different sources including the child education institutions, Local Authorities and health providers.



## What are the Key Issues for SLCN?

- SLCN are remarkably common within the youth justice sector: upwards of 60% of children and young people who offend have SLCN.<sup>3</sup>
- Identification of SLCN in youth justice settings is of paramount importance and staff's ability and confidence to recognise and support SLCN is essential.
- It is especially important that the support detained children and young people with SLCN who do not have EHC plans get from all those working with them is effective in supporting their needs. This may include the education provider, their YOT case worker and other key professionals including where relevant specialists such as Speech and Language Therapists.
- It is important that the role a child or young person's SLCN may have played in their journey to committing an offence is understood and addressed and that the SEND support process is used.
- Pathways for accessing Speech and Language Therapy (SLT) in youth custody are often different from those in the community. It is important that those working in relevant accommodation have a clear understanding with Local Authorities and NHS England as the health provider about how SLT provision will be arranged and delivered in their setting. It is essential that confusion or disagreement around this process does not lead to children and young people missing out on the required level and type of SLT support.

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### *Research snapshot...*

While research identifies that large numbers of children and young people in the youth justice sector will have SLCN, many of these needs will not have been identified- one piece of research found that in only 5% of cases were SLCN identified before the offending began.<sup>4</sup>

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## What are the Key Strategies for SLCN?

- Being aware of the prevalence levels of SLCN in children and young people in youth custody is important.
- Be aware of developmental norms and the signs of SLCN. This is essential for staff working with detained children and young people to help them identify those who might be struggling.
- Screening tools should not replace assessment by a specialist. Whilst it is beneficial that there are screening processes in place for identifying SLCN (as outlined above) it is essential that where need is identified in this screening process that this results in a referral for a full speech, language and communication needs assessment by a specialist, to ensure the child or young person's needs are accurately met.
- Be aware of how many complex terms a young person will encounter within the youth justice system. There's a list in *Sentence Trouble* which may be helpful.
- Ensure all those working with children and young people are aware of and use key strategies to support SLCN through access to information, training and professional development. The Communication Trust's *Sentence Trouble* and *Doing Justice to SLCN* resources have useful ideas and information to support this.
- Work as closely as possible with a range of different professionals. Joined up working is a key feature of the Code and this applies equally in relevant youth accommodation. There are a large number of adults involved in each detained young person's day to day support and education. Ensuring these adults are joining up and using shared strategies and approaches and also that they have an appropriate and consistent knowledge of the child or young person's SLCN is essential. Joint working is equally important at a more strategic service level to ensure each setting is providing a joined up and efficient support network.

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### *A little more about...*

The CHAT SLCN screen will be an important part of this, as will the AssetPlus SLCN and neuro-disability screening tool which is available from the Youth Justice Board. However, if all staff are confident in knowing the signs of a young person who's struggling with their communication, identification processes will be further strengthened. The Code provides new rights and responsibilities to those working with these children and young people who they suspect to have SEN to bring them to the Local Authority's attention, and being equipped with this basic knowledge about SLCN will ensure all staff are able to use this new opportunity to best effect.

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### *For example...*

Instead of 'adjourn', say 'the court hearing has stopped for now and will begin again on X day.'

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### *For example...*

Strategies such as using simple language and short chunks of information can help understanding; using visual aids such as drawings or pictures are also helpful.

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- Develop strong working relationships with the Local Authority SEND team. In some areas, this is an approach already in place and it has been shown to be highly effective both in terms of benefiting children and young people with SLCN but also in that it offers important development opportunities for staff both in the community and in relevant youth accommodation. It is also an important element of ensuring the requirements around information sharing are met.
- Having a robust system in place to monitor and evidence progress made around speech, language and communication should be a priority in relevant youth accommodation given the numbers of children and young people with SLCN in these settings. There are a number of resources available which can support this process including The Communication Trust's *Progression Tools* and *Universally Speaking*.
- There is a real opportunity for data gathered from relevant youth accommodation to feed into the joint strategic needs assessment processes as part of the commissioning cycle. The level of SLCN we would expect to be identified in relevant youth accommodation could have a significant impact on better understanding and planning nationally and locally for SLCN prevalence, and this could in turn lead to better early identification and access to timely support.

## What does success look like?



From the child or young person's perspective:

- My speech, language and communication needs have been recognised and the adults around me are supporting me to make progress and develop my skills.
- All the staff I come into contact with understand my needs and have knowledge about what helps me to understand and to participate to the best of my ability. They make adaptations to their language and also use visual supports to help me to understand.
- I have an EHC plan which outlines the support I need to help me achieve the outcomes important to me.

OR

Though I don't need an EHC plan, the assessment process highlighted some things I struggle with and ways to help me. My family and I know about relevant resources and support available to help me through my Local Authority's Local Offer.

- The people who support me know how to access help and support from specialist services such as Speech and Language Therapy.
- I am involved in making decisions about my life. I am encouraged to make choices throughout my day. I feel listened to and understood.
- There will be good transition support for me for when I go back into the community. Information about what helps me will be shared with relevant others. There will be a clear plan in place that I will be involved in. Time will be taken to prepare me for any changes.



## References



1. SEND Code of Practice Section 10.74
2. SEND Code of Practice Sections: 10.60 – 10.150
3. The Communication Trust, *Sentence Trouble*



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# Communicating The Code

A resource to enable implementation of the code of practice



## *The Communication Trust*

The Communication Trust is a coalition of over 50 not-for-profit organisations. We have produced this Communicating the Code resource to give additional information on best practice to ensure children and young people with SLCN and their families get the best support possible.

This resource is regularly updated; to ensure you have the most up to date information, click on the link for the latest version:

[www.thecommunicationtrust.org.uk/communicating-the-code](http://www.thecommunicationtrust.org.uk/communicating-the-code)



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