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THE BALANCED SYSTEM®

NEEDS ANALYSIS SUMMARY REPORT FOR EARLY YEARS DERBY CITY – 2019 REFRESH

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DECEMBER 2019

Introduction

This report provides a high-level summary of an updated needs analysis in relation to speech, language and communication in the Early Years in Derby as part of the Early Outcomes Fund Early Years project across Leicester, Nottingham and Derby Cities.

Detailed data capture can be found in the Balanced System® Early Outcomes Fund account which can be accessed by Strategic and City Leads. A previous needs analysis was undertaken in 2018 and this report should be read in conjunction with the Early Years Part 1 of that audit.

THE BALANCED SYSTEM®

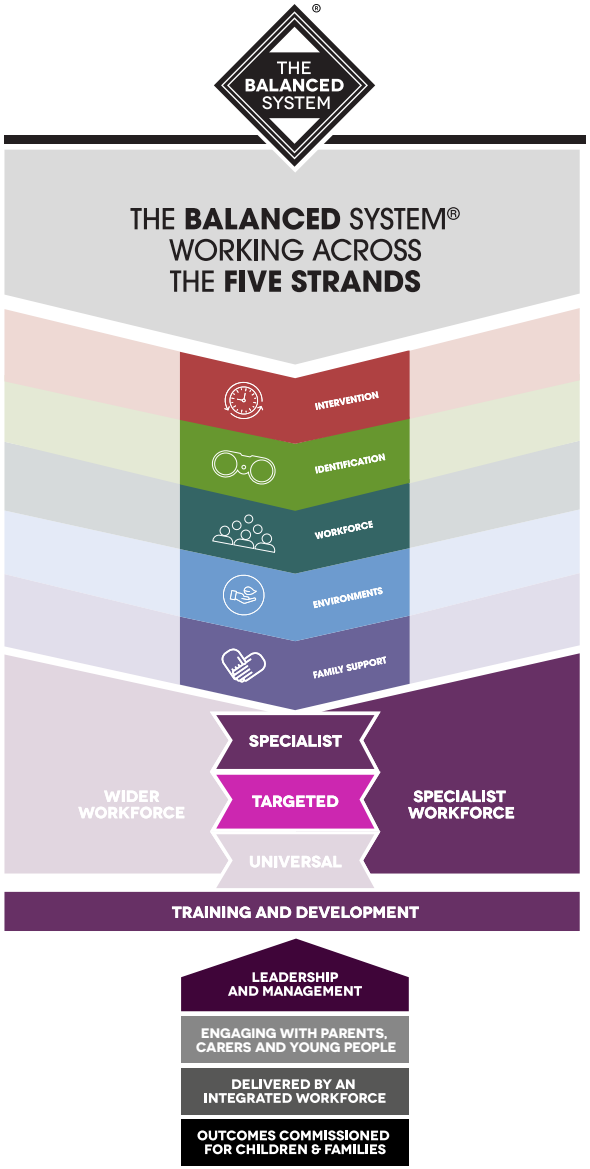
The Balanced System®

The methodology for the audit uses the Balanced System® Core Model (see diagram) and associated online tools to audit quantitative and qualitative data.

Quantitative data include an analysis at ward level of the population, demographic, predicted speech, language and communication needs along with demand in the form of referrals and caseload of children and young people known to the speech and language therapy service and the workforce to meet the identified need.

Workforce and known caseload data, where this has been shared, are available at a City-wide level but is not readily available to triangulate at ward level. Educational attainment data and Ofsted data are also considered. This quantitative analysis is triangulated with qualitative information about the range of provisions and identified gaps in provision across the Five Strands of the Balanced System®: Family Support, Environment, Workforce, Identification and Intervention and across the three levels of universal, targeted and specialist support. Although this report focuses on the Early Years element there are a significant amount of data relevant across the age range.

The Balanced System® tools interact with national data sets where appropriate and local information was obtained through extensive research conducted by the City Leads and Project Officers.



THE BALANCED SYSTEM® HIGH LEVEL OUTCOMES FOR SPEECH, LANGUAGE AND COMMUNICATION NEEDS

FAMILY SUPPORT	ENVIRONMENT	WORKFORCE	IDENTIFICATION	INTERVENTION
FS3. Specialist - Parents and carers of children with specialist SLCN receive specific specialist support to ensure confidence in their role as a key communication partner for their child and to increase their understanding of the specific communication challenges associated with their child's needs. Young people with SLCN are enabled to be active participants decisions about their support.	EE3. Specialist - Places where children and young people with specialist and complex SLCN spend their time for learning and leisure are communication friendly. The necessary adaptations are in place to maximise access in addition to the enhancements expected at a universal and targeted levels.	WW3. Specialist - Knowledge skills and expertise are developed in identified members of the wider workforce in order to ensure that, working with specialist support, there are staff that are confident and competent to support the delivery of specialist interventions including individual and small group work, support parents, adapt the environment and identify children who need specialist support.	ID3. Specialist - Children with specialist SLCN have their needs identified effectively and quickly. This includes multidisciplinary assessment where appropriate.	IN3. Specialist - Children and young people needing specialist intervention for their SLCN receive appropriate and timely provision in the most functionally appropriate context for their needs. Progress measures will include activity, participation and well-being goals in addition to goals relating to their core SLC impairment.
FS2. Targeted - Parents and carers of children with identified speech, language and communication needs (SLCN) access additional specific support to ensure confidence in their role as a key communication partner and educational support for their child. Families and young people with SLCN are supported to make choices and access services.	EE2. Targeted - Places where children and young people with identified SLCN spend their time for learning and leisure are communication friendly. Appropriate additional enhancements are made that enable children and young people with identified SLCN to more easily understand and to express themselves.	WW2. Targeted - The wider workforce is supported to develop specific knowledge and skills to support children and young people with identified SLCN. Setting and school staff are confident and competent to deliver targeted interventions, support parents, adapt the environment and identify children who need additional support.	ID2. Targeted - Efficient and accessible processes are in place that support the identification of more specific SLCN. The wider workforce, setting and school staff are supported to be confident and competent to identify children and young people who may require targeted support and/or referral to specialist services for their SLCN.	IN2. Targeted - Children and young people benefiting from targeted interventions will have access to evidence based targeted interventions to develop core speech, language and communication skills delivered in the most appropriate functional context. These might include 1:1 and / or small group interventions that are typically designed by specialist practitioners and delivered by those with appropriate training.
FS1. Universal - All parents and carers are supported with information and resources to encourage their role as effective primary communicative partners for their children. Families and young people are able to make proactive choices with respect to their child's or own needs.	EE1. Universal - Places where children and young people spend their time for learning and leisure are communication friendly. Environments have appropriate enhancements that make it easier for all children and young people to understand and express themselves.	WW1. Universal - The wider workforce is supported to have a good basic understanding of speech, language and communication including supportive strategies. Setting and school staff are confident in their role as facilitators of communication. The wider workforce has access to appropriate training around speech, language and communication.	ID1. Universal - Early identification of children and young people whose speech, language and communication needs may require targeted or specialist support is as efficient and accessible as possible. Preidentification information and advice is available in a given area, school or setting.	IN1. Universal - Homes, settings and schools are supported to develop the language and communication skills of all children and young people through language enrichment and supportive activities.

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BASELINE EVALUATION

Baseline evaluation

The baseline evaluation, a self-rating by the strategic and city leads at the outset of the project, seeks to gain a view of the strategic level outcomes across the key building blocks of the Balanced System® namely commissioning; integration of workforce; engagement with parents and carers and young people; leadership and management and training and development.

CYCLE YEAR 1 DERBY CITY SLCN UNDERSTAND BASELINE EVALUATION

NOT AT ALL	PARTIALLY	MOSTLY	COMPLETE	DON'T KNOW

AREA	LEVEL 1: INPUT	LEVEL 2: REACH	LEVEL 3: QUALITY	LEVEL 4: IMPACT
Commissioning/funding	To what extent are all commissioners with a remit for children and young people including the needs of this population in needs assessment and commissioning of their element of children and young peoples' services?	To what extent are commissioners ensuring that their collective activity reaches the full population of children and young people with SLCN?	To what extent are providers delivering services to meet the specifications developed by commissioners as intended?	To what extent has the collective commissioning activity for children and young people yielded demonstrable change in their speech, language and communication skills?
Integrated workforce	To what extent is the workforce working in an integrated way?	To what extent does an integrated workforce support all pupils with SLCN?	To what extent is the integrated workforce demonstrating high quality collaborative working?	To what extent is the integrated workforce impacting on the wider community?
Engaging parents and carers	To what extent are services for children and young people with SLCN engaging with parents on support of their children's SLCN?	To what extent are parental engagements strategies and activities reaching all parents of pupils with SLCN?	To what extent is parental engagement consistently of high quality?	To what extent are improved parental participation and confidence in supporting pupils' SLCN demonstrated?
Leadership and management	Is there leadership and management of provision across agencies and disciplines?	Are the leadership and management arrangements facilitating services to reach all children with SLCN as appropriate?	Is the leadership and management of high and consistent quality?	Does the leadership and management contribute to achieving improved speech, language and communication skills for children and young people with SLCN?
Training and development	Is there a range of training and development on offer to parents and the workforce?	Is the training and development accessible in terms of funding, time, location?	Is the training and development of high and consistent quality?	Does the training and development result in improved skills to support children and young people with SLCN?

CONTEXT

POPULATION

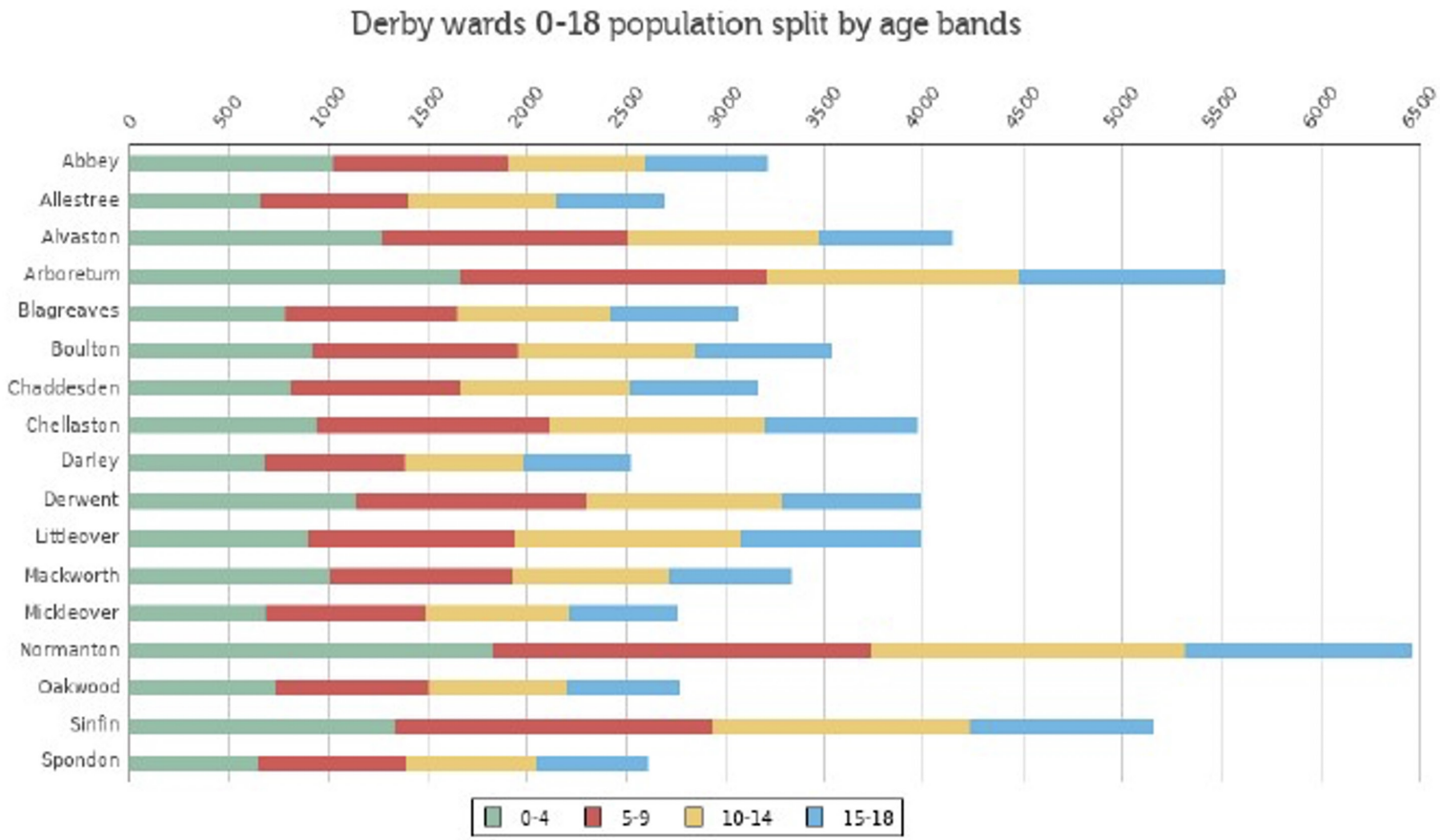
Derby City has a young population relative to England averages. In England on average 6.1% of the population is aged 0-4, whereas in Derby City, 6.6% of the population is aged 0-4. This puts the % 0-4 population of Derby City in the top 20% of Local Authorities in the country. In all the young people age categories, Derby City exceeds the national average. At a ward level, compared to both the England and Derby City averages, several wards have a significantly higher proportion of children aged 0 to 4.

The five wards with the highest % of 0-4 years old are: Alvaston (7.5%), Arboretum (8.1%), Derwent (8%), Normanton (9.5%) and Sinfin (8.3%).

Arboretum and Normanton are also the wards that have the highest population of children and young people overall in Derby City, meaning that in terms of pure numbers these are priority wards. The split of 0-4 year olds across the wards is mixed with some wards falling below the average for England. The lowest two are Darley (4.4%) and Allestree (4.8%).

The population data are presented in Figure 1 for the whole City, by age band and ward.

Figure 1: Population by age band and ward



SOCIAL DISADVANTAGE AND SOCIAL MOBILITY

Derby City is in the 20% of Local Authorities in England with the highest levels of disadvantage regardless of the measure used. In 2019, the Index of Multiple Deprivation (IMD) was renewed and reveals that Derby City has moved from the 55th (of 326) most disadvantaged Local Authority in 2015 to the 67th (of 317) most disadvantaged Local Authority. In addition, there are signs of positive improvements for young people as the Index of Disadvantage Affecting Children (IDACI) identifies that Derby City has moved from the 51st to the 59th most disadvantaged Local Authority when only considering factors that affect children.

Based on the 2015 IMD data, analysis at ward level shows that many of the Derby City wards are among the 20% most disadvantaged nationally. Of these, Arboretum (=85th) and Normanton (=193rd) are the most disadvantaged Derby City wards. Four wards (Allestree, Blagreaves, Littleover and Mickleover) have no data zones in the most disadvantaged 20%, so are classed among the least disadvantaged wards in the country.

The social mobility index ranks Derby City at 316 out of the 326 Local Authorities in England indicating that life chances for children born in the city are among the most challenging nationally.

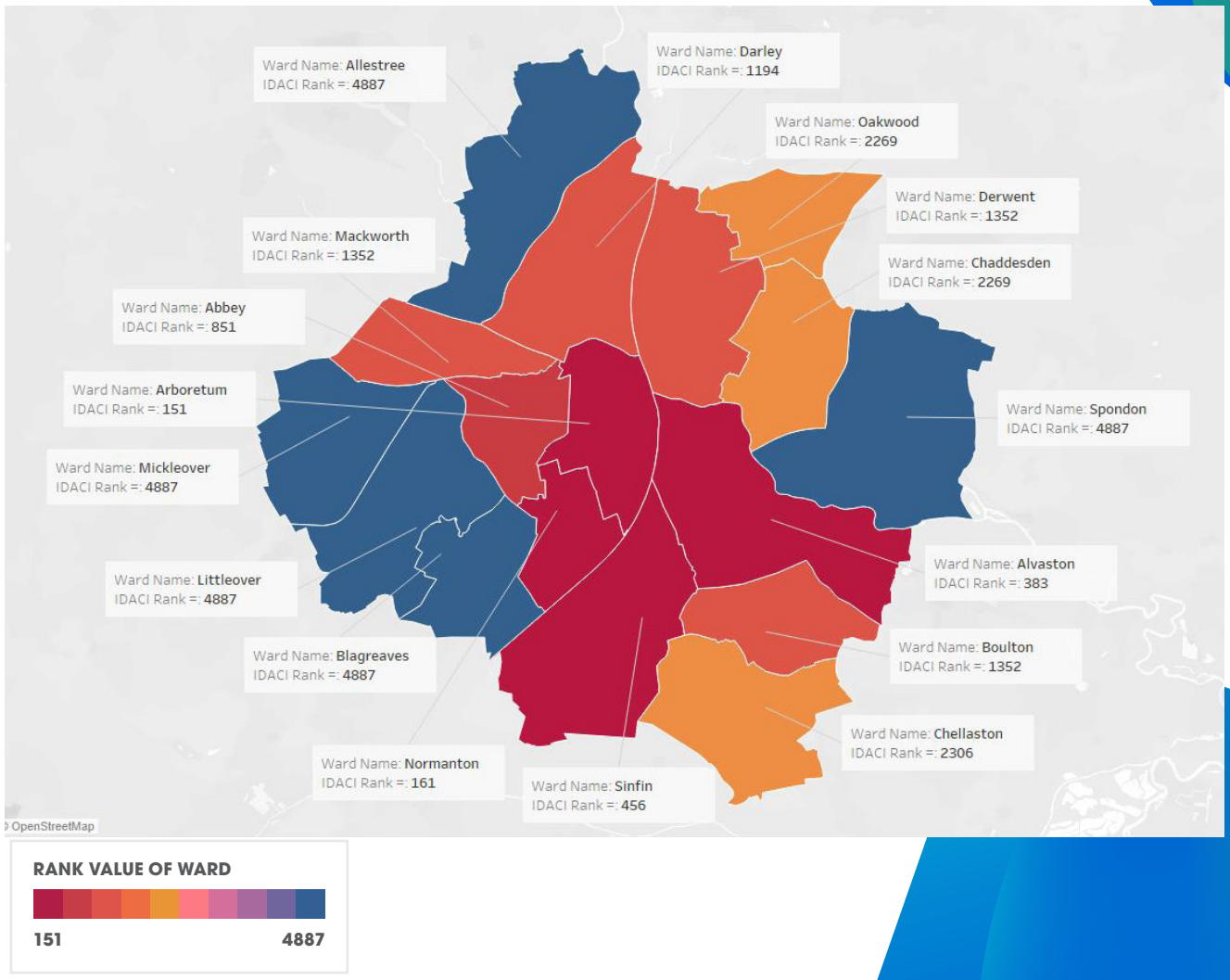
Figure 2: Relative social disadvantage between wards

Quintiles	1st - MOST DEPRIVED	2nd	3rd	4th	5th LEAST DEPRIVED

DERBY WARDS	LSOA % (IMD RANK)	LSOA % (IDACI RANK)
ABBEY	12.5% (2111)	50% (851)
ALLESTREE	0% (4829)	0% (4887)
ALVASTON	50% (872)	70% (383)
ARBORETUM	100% (85)	90% (151)
BLAGREAVES	0% (4829)	0% (4887)
BOULTON	55.56% (721)	33.33% (1352)
CHADDESDEN	11.11% (2169)	11.11% (2269)
CHELLASTON	10% (2201)	10% (2306)
DARLEY	25% (1661)	37.5% (1194)
DERWENT	44.44% (1023)	33.33% (1352)
LITTLEOVER	0% (4829)	0% (4887)
MACKWORTH	22.22% (1765)	33.33% (1352)
MICKLEOVER	0% (4829)	0% (4887)
NORMANTON	88.89% (193)	88.89% (161)
OAKWOOD	11.11% (2269)	11.11% (2169)
SINFIN	77.78% (319)	66.67% (456)
SPONDON	25% (1661)	0% (4887)

Figure 3 shows that the most disadvantaged wards are in the centre and south of the city.

Figure 3: Wards colour coded by disadvantage showing actual rank value (IDACI 2015)



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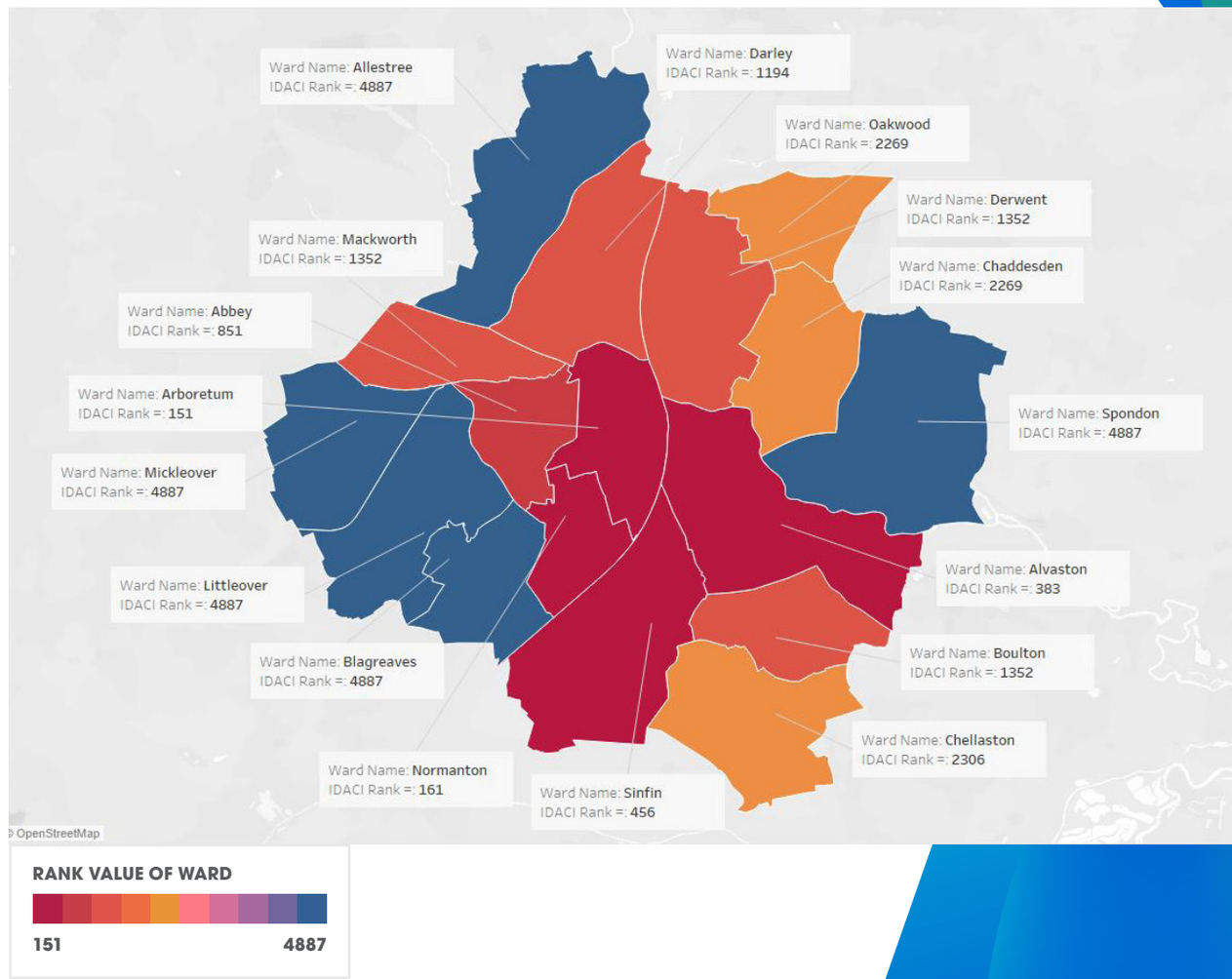


The updated 2019 IMD index can be used to highlight where the disadvantage of data zones within wards has changed over the 4-year period (between 2015 and 2019). Derby City has seen a change in three of its wards. Boulton has moved towards being less disadvantaged however Abbey and Chaddesden are now both ranked as more disadvantaged.

Figure 4: IMD wards - most disadvantaged % of data zones in 2015 compared to the new IMD release in 2019

WARD NAME (2019)	% OF DATA ZONES IN 20% MOST DISADVANTAGED DATAZONES		
	2015	2019	Difference
ABBEY	13	25	13
ALLESTREE	0	0	0
ALVASTON	50	50	0
ARBORETUM	100	100	0
BLAGREAVES	0	0	0
BOULTON	56	44	-11
CHADDESDEN	11	33	22
CHELLASTON	10	10	0
DARLEY	25	25	0
DERWENT	44	44	0
LITTLEOVER	0	0	0
MACKWORTH	22	22	0
MICKLEOVER	0	0	0
NORMANTON	89	89	0
OAKWOOD	11	11	0
SINFIN	78	78	0
SPONDON	25	25	0

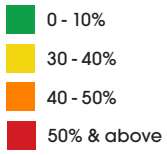
PREDICTION OF SPEECH, LANGUAGE AND COMMUNICATION NEED

Figures 5 and 6 show the % of children 0-4 predicted to have some level of SLCN by ward and by ward represented geographically. The tool to generate this data interfaces with the evidence base for prevalence and the population and demographic factors and highlights the 'hot spots' for Early Years SLCN. Six of the city's 17 wards have a predicted SLCN level of over 50% - this means that 1 in 2 children in these wards are predicted to have a level of SLCN.

The definition of SLCN for this purpose is any aspect of speech, language and communication that is not in line with expected levels but does not imply that these numbers of children should all require speech and language therapy support.

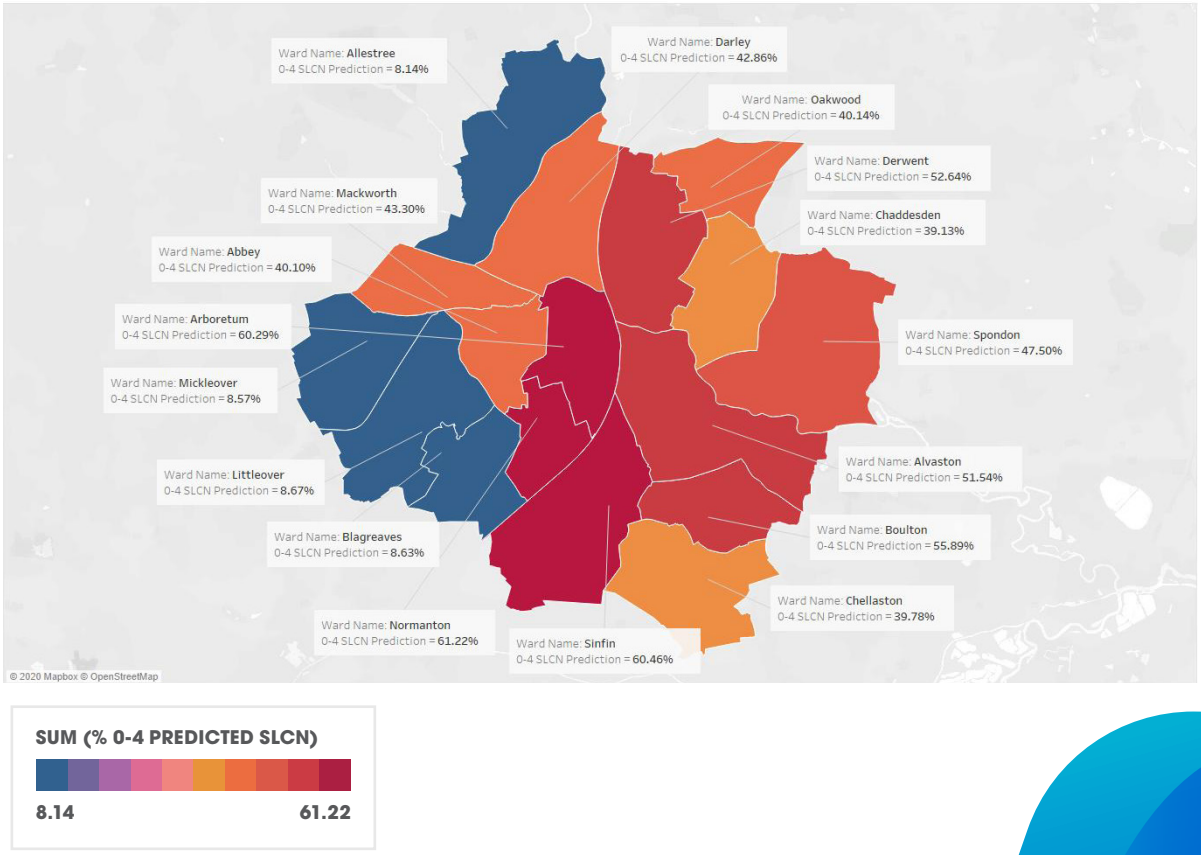
Figure 5: % predicted SLCN by ward

PREDICTION OF SLCN AS % OF ESTIMATED POPULATION		
DERBY CITY	**0-4 YEARS**	**5-9 YEARS**
ABBEY	40.10%	38.56%
ALLESTREE	8.14%	8.38%
ALVASTON	51.54%	55.17%
ARBORETUM	60.29%	63.93%
BLAGREAVES	8.63%	8.44%
BOULTON	55.89%	56.70%
CHADDESDEN	39.13%	36.89%
CHELLASTON	39.78%	37.75%
DARLEY	42.86%	45.14%
DERWENT	52.64%	50.42%
LITTLEOVER	8.67%	9.30%
MACKWORTH	43.30%	44.22%
MICKLEOVER	8.57%	8.88%
NORMANTON	61.22%	61.47%
OAKWOOD	40.14%	37.63%
SINFIN	60.46%	59.69%
SPONDON	47.50%	47.57%



Predicted SLCN is also shown in anticipated numbers by ward and locality. The three localities in Derby have a different level of identified need. However, the clearest distinctions are at ward level with Normanton predicted to have 10 times the number of children with SLCN compared with Mickleover.

Figure 6: % predicted SLCN by ward for 0-4 year olds



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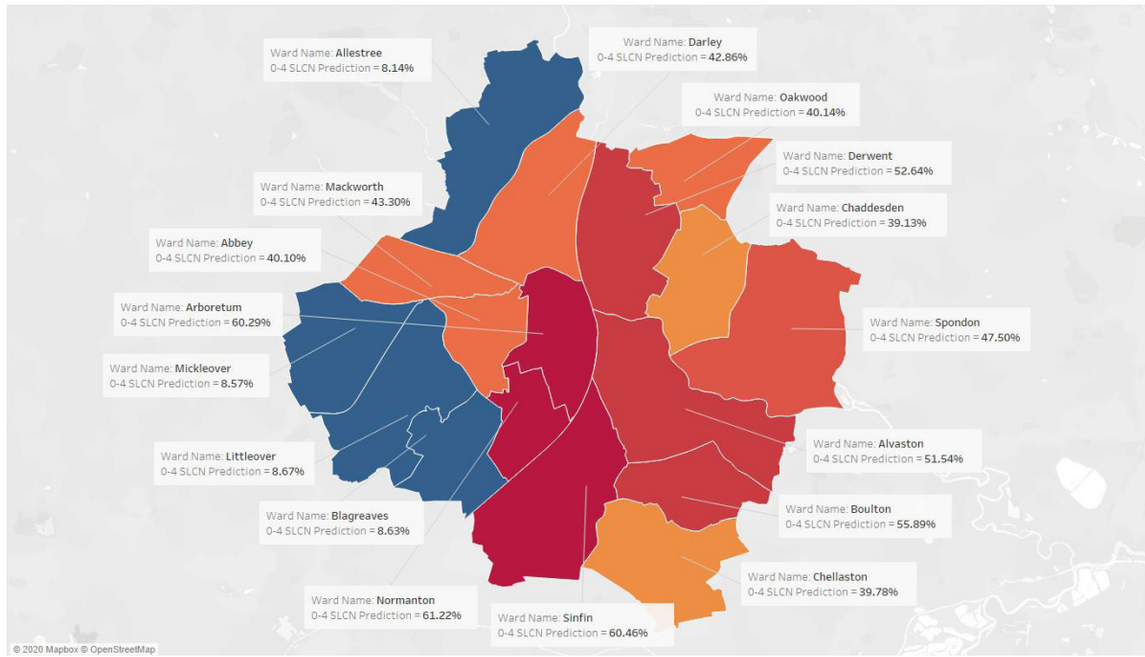


Figure 7: Numbers of predicted SLCN by ward

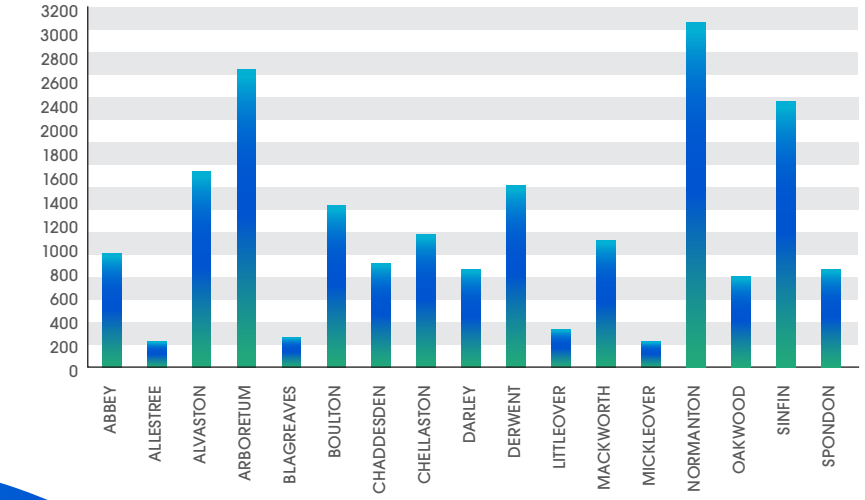
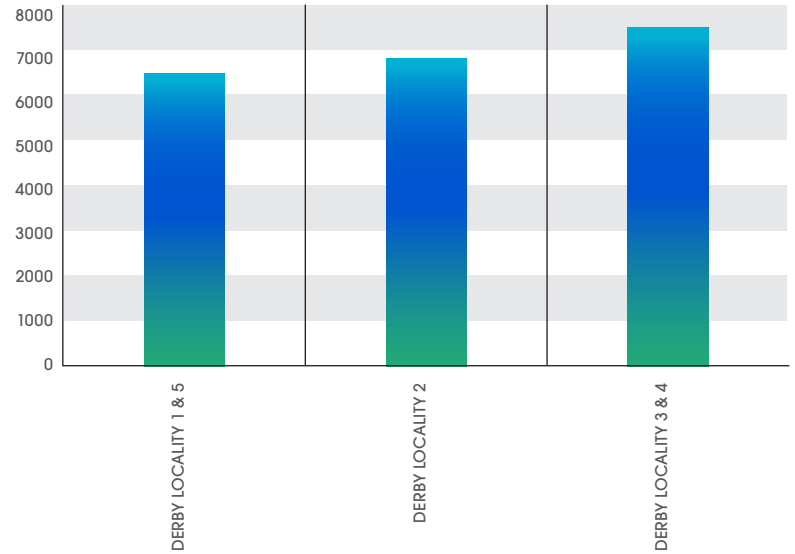


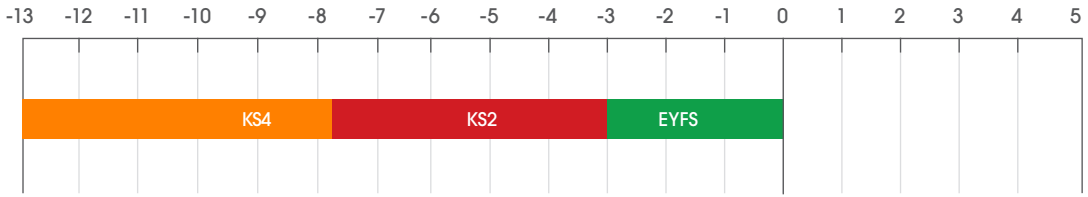
Figure 8: Numbers of predicted SLCN by locality



ATTAINMENT

Attainment at key points that are collected and compared nationally indicate that, on average, children and young people in Derby are achieving levels of attainment at all levels below those expected relative to the England average. However, it is worthy of note that the Early Years Foundation Stage attainment data indicates less of a gap from the expected level than either KS2 or KS4. Whilst this is promising and reflects consistent progress in the EY sector in the City over the past six years, these data also suggest that these gains are not being maintained at KS2 and beyond.

Figure 9: % attainment against UK mean at EYFS, KS2 and KS4 (2017/2018)



The Early Learning Goals 1 to 3 which are the main SLCN related goals suggest that Derby scores (2018) are approximately 3% points lower than the national average.

	ELG1: Listening and Attention	ELG2: Understanding	ELG3: Speaking
England	86.3	86.0	85.6
East Midlands	85.4	85.3	84.9
Derby	83.7	82.6	82.0

FINANCE AND COMMISSIONING

Finance data was requested from the Clinical Commissioning Group and Local Authority as well as from schools and settings via a survey. None of the CCGs involved in the Early Outcomes Fund project have been able to provide data at this point.

Only four schools shared information about their direct commissioning of additional support for speech, language and communication and the total spend was £3040.00 suggesting a small amount of specific training or support.

During the course of the Early Outcomes Fund project, Derby City Council has also commissioned various activities to support speech, language and communication, primarily focused on the eight most socially disadvantaged wards as part of Talk Derby Opportunity Area. The overall contract value for a mixture of training, campaign and awareness raising and strategic support for 30 schools and 50 PVIs is in the region of £750,000. The precise contract value of each element of the work is not available.

During the course of the project, commissioners from the CCG, Public Health and LA have been brought together around the issue of support for speech, language and communication in the City. The wider context includes a planned re-commissioning of provision across Derbyshire. The difficulty in mapping a clear, holistic picture of spend, resource and a whole system provision response has been significant.

Initial conversations between commissioners with a view to taking a more aligned commissioning approach going forward suggest positive steps in this respect.

WORKFORCE

The specialist workforce for SLCN consists of the speech and language therapy service for Derby City which is part of the wider SLT service across Derbyshire. The LA also employs highly trained Early Years Advisors and there are a number of practitioners in settings who have completed a Level 3 Award for SLCN. At the time of the initial report in 2018, an independent SLT company was providing significant universal and targeted training, coaching and support to schools and settings as well as undertaking several projects on behalf of the LA. At the time of this report this company has ceased trading and this has changed the local provider landscape. The training offer via Talk Derby is time limited and not part of the systemic offer in the City unless it is sustained beyond the end of the Opportunity Area funding.

The SLT workforce has been compared with the population served and the population of predicted need. Figure 10 provides a visual representation of these ratios. There is no complete benchmarking set for these data however from the range of services analysed to date through the Balanced System® methodology the ratio of 0.82/1000 children with predicted need is low however does represent an increase from a ratio of 0.72/1000 children with predicted need in 2018. This supports the findings of the Children's Commissioner in the recently published national survey of spend for SLT where the East Midlands showed a significantly lower spend than all other regions of England.[1] That said, this workforce is currently commissioned to offer only a specialist service which potentially reduces the demand with this capacity.

Figure 10: Derby SLT workforce WTE per 10,000 children and per predicted 1,000 SLCN need

WORKFORCE (WTE) PER 1,000 CHILDREN (AGED 0-18)

0.27
DERBY CITY

WORKFORCE (WTE) PER PREDICTED 1,000 SLCN NEED (AGED 0-18)

0.82
DERBY CITY

[1] https://www.childrenscommissioner.gov.uk/publication/we-need-to-talk/

CASELOAD

The caseload data represents the children 'known' to the SLT service on the day of sampling. The tables below show this by age band and the calculation of reach into the population as a whole and the population predicted to have SLCN. Again, there are no national benchmarks for these data. However, from experience a reach as indicated below is average for a service working across the full offer of universal, targeted and specialist support. Given the staffing levels and specific nature of the commission therefore it would suggest that the specialist offer is comparable to that element of other services.

AREA: DERBY CITY		0-4 YEARS	5-9 YEARS	10-14 YEARS	15-18 YEARS	TOTAL 0-18	19-24 YEARS
REFERRALS							
No. of children referred in the past 12 months		598	347	90	21	1056	1
CEASE CONTACT							
No. of children referred in the past 12 months		276	545	145	34	1000	3
WAITING LISTS: NUMBERS WAITING							
Waiting for assessment		88	48	7	4	147	0
Waiting for intervention		0	0	0	0	0	0
WAITING LISTS: WAITING TIMES							
No. of children on waiting list for more than 12 weeks	For assessment	114	97	36	4	251	0
	For intervention	0	0	0	0	0	0
No. of children on waiting list for more than 18 weeks	For assessment	11	14	6	2	33	0
	For intervention	0	0	0	0	0	0
Average length of wait in past 12 months in weeks	For assessment	9	10	11	11	-	8
	For intervention	0	0	0	0	-	0
Length of longest current wait on waiting list	For assessment	22	19	26	33	-	0
	For intervention	0	0	0	0	-	0
CASELOAD DATA - SNAPSHOT ON ONE DAY							
Total caseload		570	708	116	25	1419	1
Population		17100	18000	15700	12000	62800	22700
Caseload as % of predicted SLCN		7.8%	9.2%	3%	1.3%	6.8%	0.1%
Caseload as % of population		3.3%	3.9%	0.7%	0.2%	2.3%	0%

QUALITATIVE DATA NARRATIVE – PROVISION AND GAPS

Detailed summaries of the provisions and gaps are available online and as separate documents

QUALITATIVE MAPPING OF PROVISIONS & GAPS

Qualitative mapping of provision and identified gaps in provision was carried out through extensive engagement by the City Lead who spoke with a wider cross section of the community in order to gain a picture of the offer and gaps in the offer. Initially these data were added as a 'refresh' to the data collected in 2017/2018. However, subsequently it was decided to report without the contribution of the independent SLT company that provided the majority of the universal and targeted offer from SLTs as this is no longer available and has not been systematically replaced.

In the interests of comparison, the data from the 2018 report is shown alongside the current mapping.

Figures 11 and 12 provide a graphical representation of the proportion of this mapping. The heat map shows which strands and levels of the Balanced System® are most widely reported as having provision whilst the pie charts present the information as proportions across the Five Strands and Three Levels. It should be noted that these analyses are of the provisions and gaps that were reported and recorded and do not represent a definitive picture as there may be unreported provision in the system.

Figure 11: Summary of qualitative mapping of provisions by strand and level – heat maps for provision and gaps

SLCN PROVISION HEAT MAP

2017-2018 HEAT MAP FOR ALL OF DERBY CITY

LEVEL	FAMILY SUPPORT	ENVIRONMENT	WORKFORCE	IDENTIFICATION	INTERVENTION
Specialist	Provisions: 26	Provisions: 7	Provisions: 25	Provisions: 28	Provisions: 39
Targeted	Provisions: 30	Provisions: 1	Provisions: 28	Provisions: 15	Provisions: 23
Universal	Provisions: 12	Provisions: 28	Provisions: 43	Provisions: 21	Provisions: 12

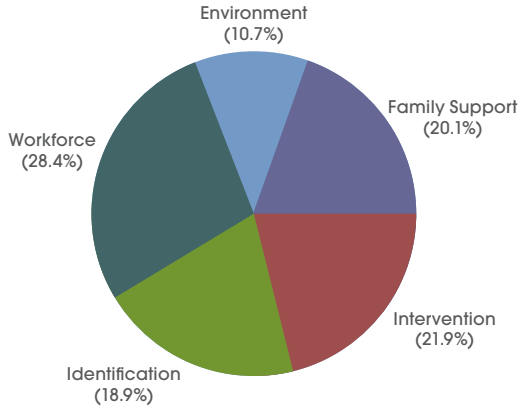
2019 HEAT MAP FOR ALL OF DERBY CITY

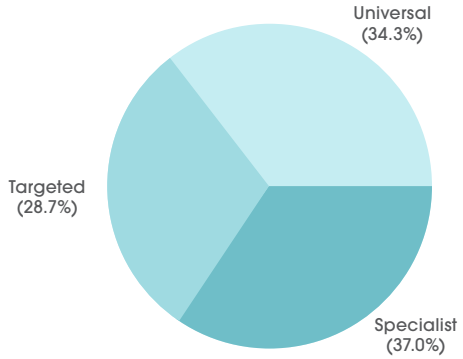
LEVEL	FAMILY SUPPORT	ENVIRONMENT	WORKFORCE	IDENTIFICATION	INTERVENTION
Specialist	Provisions: 26	Provisions: 7	Provisions: 24	Provisions: 28	Provisions: 37
Targeted	Provisions: 24	Provisions: 1	Provisions: 20	Provisions: 12	Provisions: 12
Universal	Provisions: 9	Provisions: 13	Provisions: 10	Provisions: 21	Provisions: 2

Figure 12: Summary of qualitative mapping of provisions by strand and level – pie charts for provision and gaps

2017 – 2018 MAPPING INFORMATION

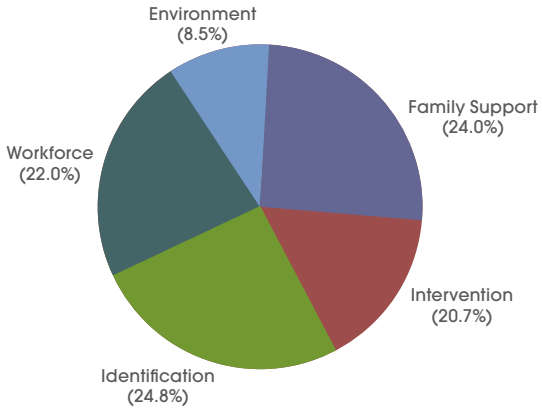
COMBINED PROVISION SPLIT BY STRAND & LEVEL

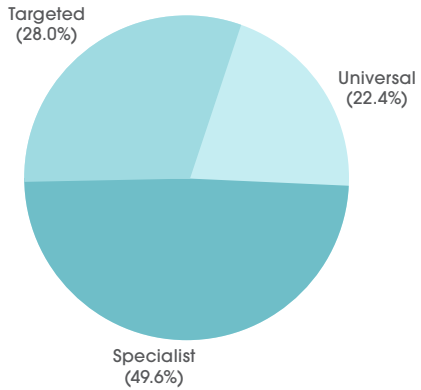




2019 MAPPING INFORMATION

COMBINED PROVISION SPLIT BY STRAND & LEVEL

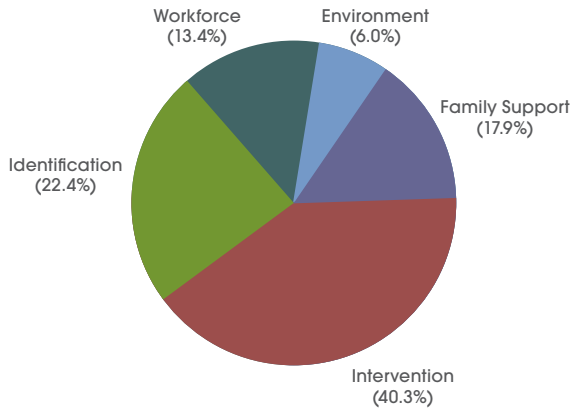


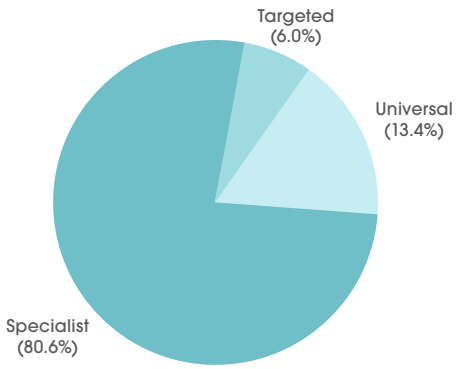


These data show that the current overall offer is impacted by a reduction in the core universal and targeted offer commissioned within the system relative to 2017.

The independent SLT provider offer shown on the following page is no longer in place whereas the core NHS commissioned speech and language therapy service continues to have a specialist focus.

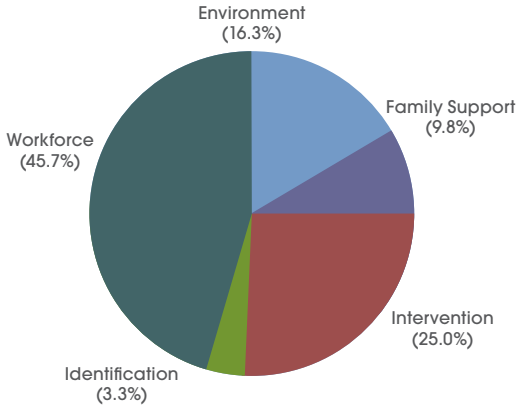
CORE SLT PROVISION SPLIT BY STRAND AND LEVEL

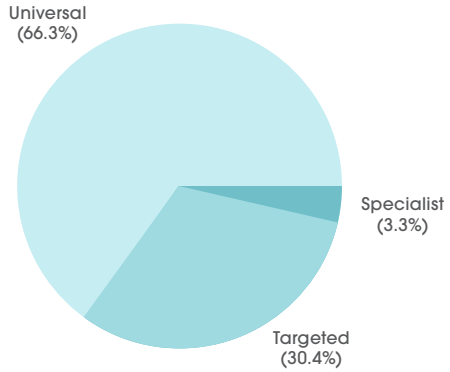




2017 - 2018 MAPPING INFORMATION

INDEPENDENT SLT PROVISION SPLIT BY STRAND AND LEVEL





STARS BUGS AND MOON

Stars bugs and moon

Stakeholders were also invited to answer three simple questions relating to what they value about the current offer, what they regard as a 'bug' in the system and something aspirational for the future. Key themes emerged which are summarised here.

Stars quality...

One thing that deserves a star in your current provision for children and young people.

My Star

- Parents praised the SALT service in a number of ways including highlighting assessments fun for the child, joint-working, compassion and very personable staff, open support and come along sessions.
- School support was highlighted as a strength
- Specific childminders and nurseries were highlighted

Bug in the system...

One thing that gets in the way of achieving outcomes for children and young people

My Bug

- Partnership working - Different organisations working in siloes with little or no cross-communication or working
- Schools - teachers needing to understand the importance
- Speech and language therapy - Understaffed
- Identification - The initial identification and support is only as good as the setting they attend
- Waiting Times – Too long to get assessed and get appointments
- Funding - Only work that is face to face can be carried out due to commissioning remit

Reach for the moon...

One thing that would really make a difference for children and young people

My Aspiration

- Several comments referred to the need for SLCN support at a very early age to help parents and children to solve issues before child reaches school
- SLT's for every early years provision
- Key worker system, following every child and family through
- Pre-school checking for height, weight & hearing like they do at reception

KEY THEMES

Summary of Key Themes

1. Derby continues to experience high levels of social disadvantage with the consequent impact on early language and communication skills development for many children.

2. There are several DfE and Public Health England funded initiatives operating in the City with some overlaps and with no security of long-term funding. Individually these are welcome in addressing some of the considerable needs, however, strategic oversight of the whole system offer is key if sustainability is to be achieved. Practitioners benefiting from workforce development will require ongoing support to share and further develop these skills.

3. The specialist SLT offer is not commissioned to support the system at a universal or targeted level and neither is any other part of the specialist workforce. Collaborative commissioning is under discussion and linking the workforce, including SLT and Health Visiting colleagues, alongside developing and supporting expertise within the Early Years workforce will be key. In order to do this SLTs within the system will need more flexibility to include a training and coaching role within their remit.

Derby City Council

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