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NEEDS ANALYSIS SUMMARY REPORT FOR EARLY YEARS LEICESTER CITY

Introduction

This report provides a high-level summary of the needs analysis in relation to speech, language and communication in the Early Years in Leicester 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.



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 includes 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.

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.

LEICESTER 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 in support of their children's SLCN?	To what extent are parental engagement 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

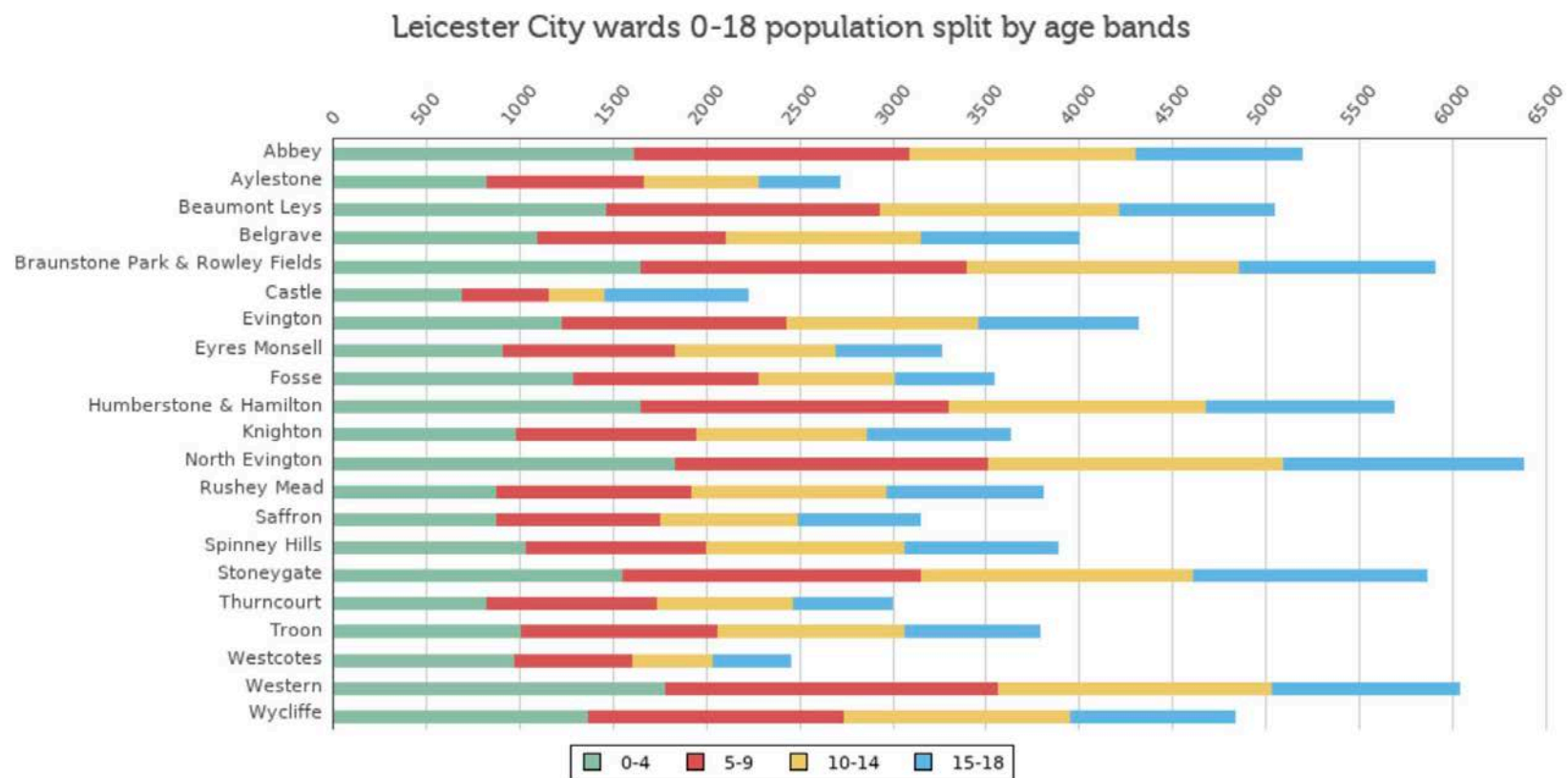
Leicester City has a young population relative to England averages. In England on average 6.1% of the population is aged 0-4, compared to Leicester City where 7.2% of the population is aged 0-4. This puts the % 0-4 population of Leicester City in the top 20% of Local Authorities in the country. Compared to the England and Leicester City averages, there are several wards which have a significantly higher proportion of children aged 0 to 4.

The five wards with the highest % of 0-4 year olds are: Wycliffe (9.2%, 1400), Fosse (9.1%, 1300), Western (8.9%, 1800), North Evington (8.7%, 1800) and Humberstone & Hamilton (8.4%, 1700). North Evington and Western are also the wards that have the highest population of children and young people overall in Leicester City, meaning that in terms of pure numbers these are priority wards.

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

Leicester 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 Leicester City has moved from the 21st (of 326) most disadvantaged Local Authority in 2015 to the 32nd (of 317) most disadvantaged Local Authority. However, the Index of Disadvantage Affecting Children (IDACI) identifies that Leicester has moved from the 28th to the 26th most disadvantaged Local Authority when only considering factors that affect children.

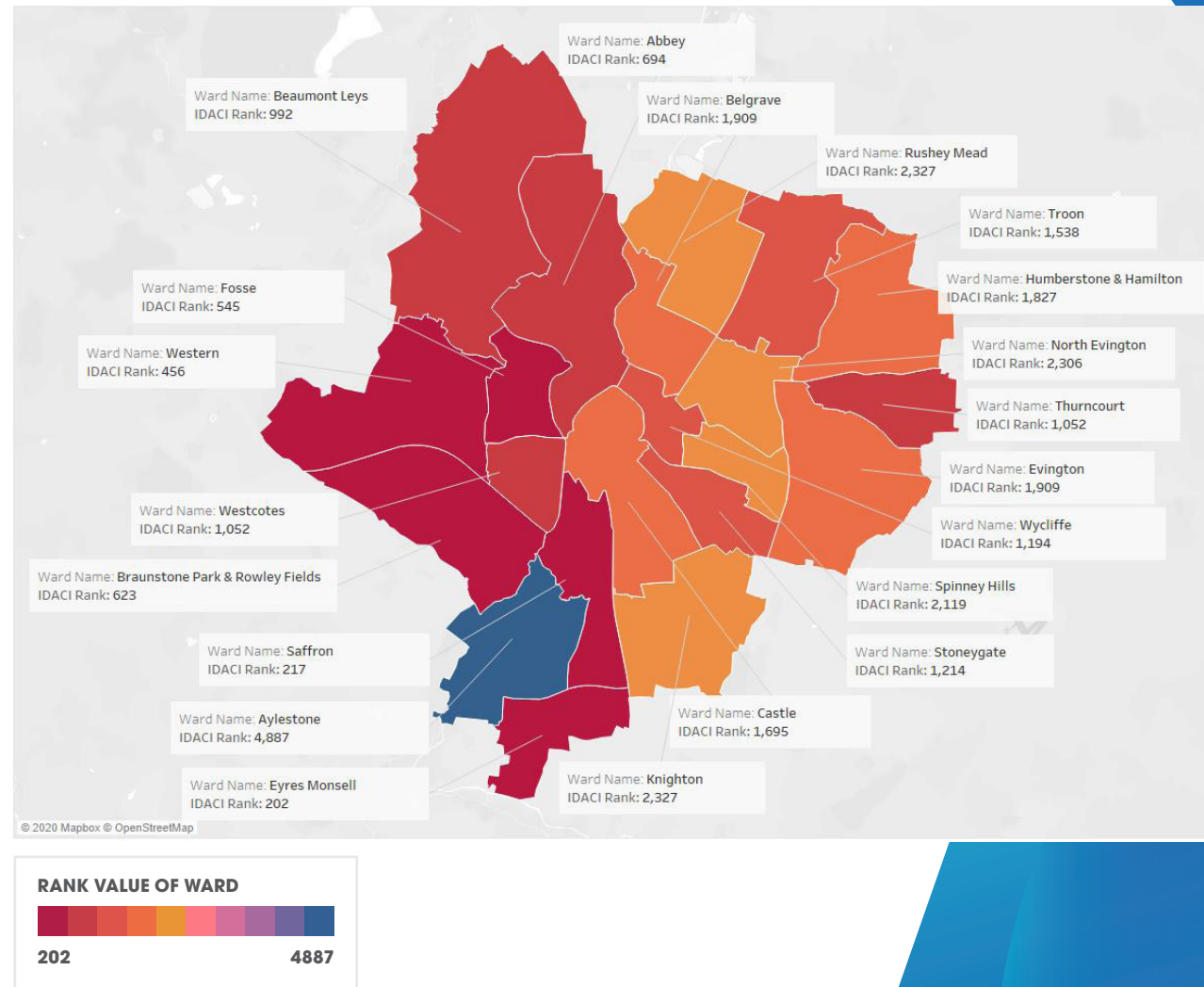
Based on the 2015 IMD data, analysis at ward level shows that Abbey, Braunstone Park & Rowley Fields, Eyres Monsell, Fosse, North Evington, Saffron, Western & Wycliffe are all in the 20% most disadvantaged nationally. Of these, Eyres Monsell (=85th) and Saffron (=261st) are the most disadvantaged Leicester wards. IMD 2015 data combined with 2016 English Wards (7427 wards) indicates that all the wards in Leicester City are in the 60% most disadvantaged in the country.

Figure 2: Relative social disadvantage between wards

Quintiles	1st - MOST DEPRIVED	2nd	3rd	4th	5th LEAST DEPRIVED
LEICESTER WARDS	LSOA % (IMD RANK)	LSOA % (IDACI RANK)			
ABBAY	66.67% (512)	55.56% (694)			
AYLESTONE	14.29% (2026)	0% (4887)			
BEAUMONT LEYS	45.45% (1005)	45.45% (992)			
BELGRAVE	40% (1128)	20% (1909)			
BRAUNSTONE PARK & ROWLEY FIELDS	66.67% (512)	58.33% (623)			
CASTLE	41.67% (1087)	25% (1695)			
EVINGTON	30% (1483)	20% (1909)			
EYRES MONSELL	100% (85)	85.71% (202)			
FOSSE	75% (369)	62.5% (545)			
HUMBERSTONE & HAMILTON	22.22% (1765)	22.22% (1827)			
KNIGHTON	9.09% (2217)	9.09% (2327)			
NORTH EVINGTON	60% (637)	10% (2306)			
RUSHEY MEAD	18.18% (1896)	9.09% (2327)			
SAFFRON	83.33% (261)	83.33% (217)			
SPINNEY HILLS	14.29% (2026)	14.29% (2119)			
STONEYGATE	18.18% (1896)	36.36% (1214)			
THURNCOURT	42.86% (1061)	42.86% (1052)			
TROON	28.57% (1531)	28.57% (1538)			
WESTCOTES	28.57% (1531)	42.86% (1052)			
WESTERN	58.33% (667)	66.67% (456)			
WYCLIFFE	62.5% (594)	37.5% (1194)			

Figure 3 shows that the most disadvantaged wards are in the west of the City. Aylestone is an unusual anomaly. It is ranked 4887 in the IDACI ranking as none of its data zones are in the 20% most disadvantaged, yet it is a neighbour of Leicester's two most disadvantaged wards, Saffron and Eyres Monsell.

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



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 (2015 to 2019). In Leicester City, 9 wards show decreases in the number of data zones within them which are ranked in the 20% most disadvantaged data zones (Figure 4).

However, two wards, Aylestone and Spinney Hills have both seen an increase in the number of data zones that they contain which are in the 20% most disadvantaged. This suggests that disadvantage in these wards is not improving as with the rest of the city and should be areas of interest to understand the cause of this and possible impact on increasing SLCN in these wards.

The social mobility index ranks Leicester City at 289th 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 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	67	56	-11
AYLESTONE	14	29	14
BEAUMONT LEYS	45	45	0
BELGRAVE	40	30	-10
BRAUNSTONE PARK & ROWLEY FIELDS	67	67	0
CASTLE	42	17	-25
EVINGTON	30	30	0
EYRES MONSELL	100	100	0
FOSSE	75	38	-38
HUMBERSTONE & HAMILTON	22	22	0
KNIGHTON	9	0	-9
NORTH EVINGTON	60	30	-30
RUSHEY MEAD	18	9	-9
SAFFRON	83	83	0
SPINNEY HILLS	14	29	14
STONEYGATE	18	18	0
THURNCOURT	43	29	-14
TROON	29	29	0
WESTCOTES	29	0	-29
WESTERN	58	58	0
WYCLIFFE	63	50	-13

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. Eight of the city's 21 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 PREDICTED TO HAVE SLCN		
LEICESTER CITY WARD	0-4 YEARS	5-9 YEARS
ABBEY	54.06%	52.60%
AYLESTONE	38.63%	39.88%
BEAUMONT LEYS	47.13%	47.60%
BELGRAVE	47.09%	47.40%
BRAUNSTONE PARK & ROWLEY FIELDS	51.88%	55.12%
CASTLE	46.86%	44.80%
EVINGTON	44.50%	43.25%
EYRES MONSELL	58.56%	59.56%
FOSSE	54.69%	54.40%
HUMBERSTONE & HAMILTON	39.29%	41.63%
KNIGHTON	35.00%	34.40%
NORTH EVINGTON	53.17%	51.71%
RUSHEY MEAD	38.11%	40.80%
SAFFRON	54.78%	55.11%
SPINNEY HILLS	38.90%	36.50%
STONEYGATE	37.88%	38.94%
THURNCOURT	49.38%	48.56%
TROON	43.10%	41.18%
WESTCOTES	41.90%	45.17%
WESTERN	51.39%	51.50%
WYCLIFFE	51.57%	51.57%

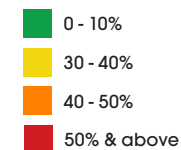


Figure 6: % predicted SLCN by ward for 0-4 year olds

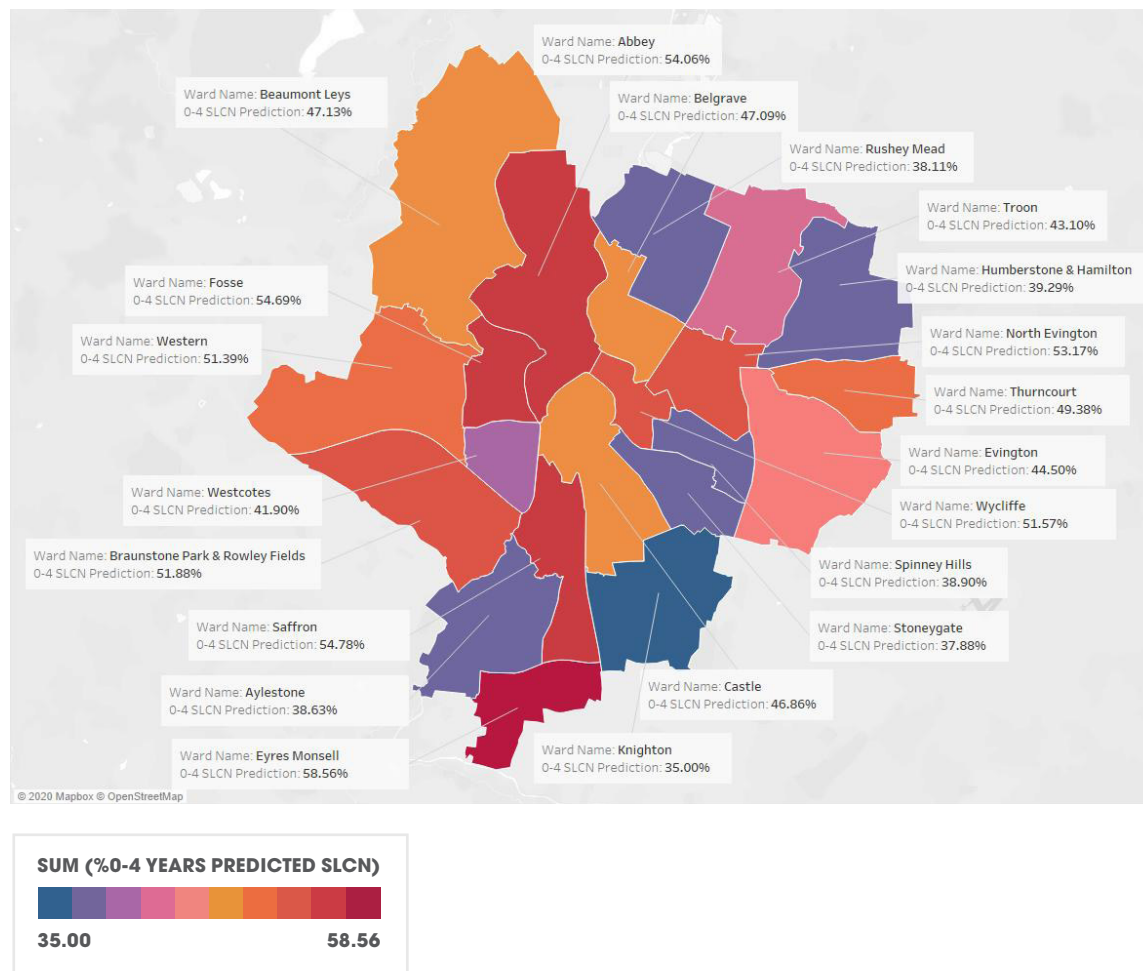


Figure 7: Numbers of predicted SLCN by ward

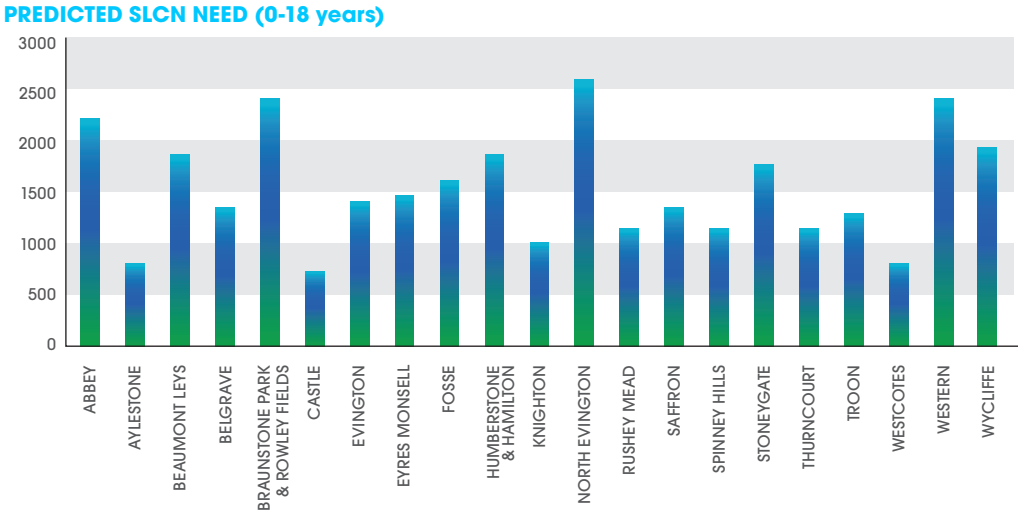
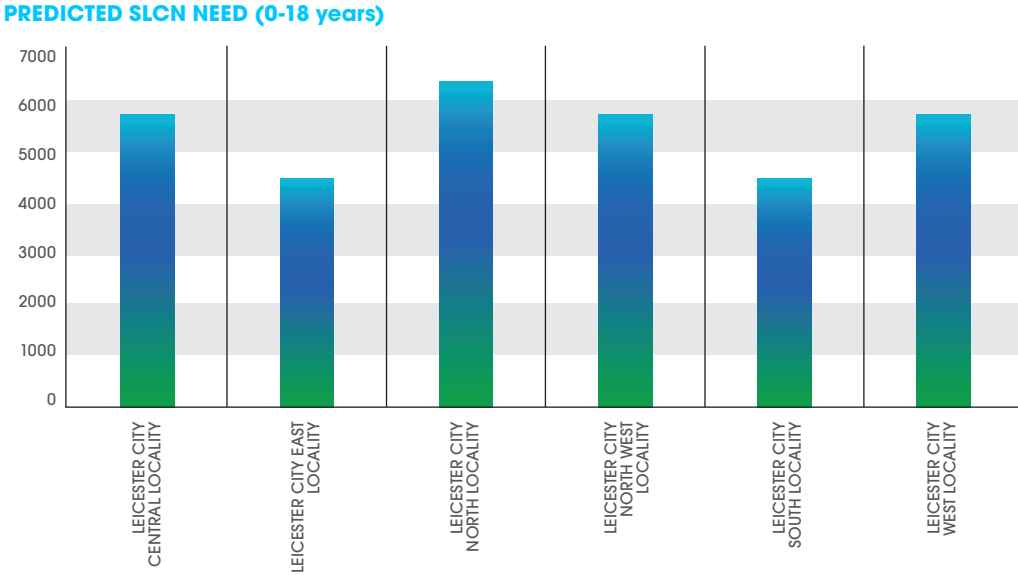


Figure 8: Numbers of predicted SLCN by locality



Predicted SLCN is also shown in anticipated numbers by ward and locality. The six localities in Leicester have a different level of identified need. For example, the north locality has a predicted need that is significantly greater than the east locality.

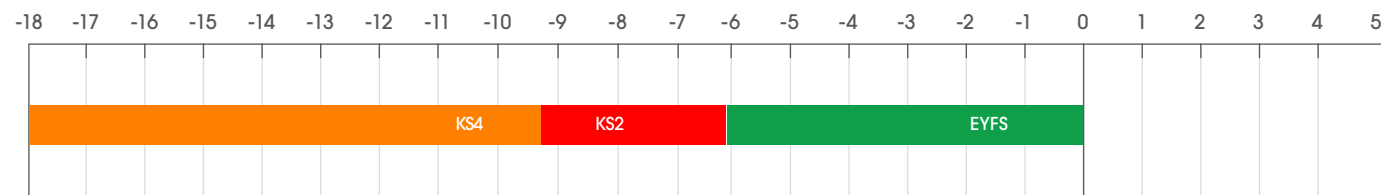


ATTAINMENT

Attainment at key points that are collected and compared nationally indicate that, on average, children and young people in Leicester are achieving levels of attainment at all levels below those expected relative to the England average. However, it is worthy of note that the KS2 attainment data indicates relatively good progress in this phase.

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

% ATTAINMENT AGAINST UK MEAN AT EYFS, KS2 AND KS4



The Early Learning Goals 1 to 3 which are the main SLCN related goals suggest that Leicester scores (2018) are approximately 5% 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
Leicester	81.5	80.6	79.9

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 have been able to provide data at this point and the data from LAs varies in terms of to what it relates so this is an area of ongoing exploration.

For Leicester, the currently available information is summarised below. Please note that it does not include the CCG spend. Schools that responded to the survey indicate that a total of £54,000 is being spent on support for SLCN from school budgets.

Leicester City	Specialist teachers related to SLCN/DLD support	Specialist Teachers related to ASD support	SLT Therapists - core funded from NHS Provider	SLT spot purchase by child	Additional Resourced provision staffing	Total
SLCN CCG funding						0
SLCN Local Authority funding - SEN	140060.18	277160.96				417221.14
SLCN Local Authority funding - EYFS	180893.00					180893
SLCN CCG/Local Authority joint funding	7000		12000.00	42568.00		61568
SLCN School funding				54000		54000

WORKFORCE

The specialist workforce for SLCN consists of the speech and language therapy service for Leicester City along with an educational psychologist with special responsibility for SLCN and learning support teachers with a specialism in SLCN. There are also several independent providers of SLT in Leicester City working both with individual children and families and in supporting settings and schools.

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 0.64 / 1000 children with predicted need is very low with ratios in the region of 1.75-2.0/1000 children with predicted need being the typical range for those areas for which Better Communication CIC has data. 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

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

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



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



¹ <https://www.childrenscommissioner.gov.uk/publication/we-need-to-talk/>

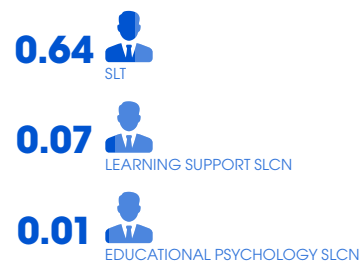
Additional workforce data has also been collected that relates to the wider workforce. Figure 11 compares these with population and Figure 12 compares those that have an identified specific role with SLCN with the predicted need. Two points are worthy of note:

- The numbers of health visitors, school nurses and midwives highlights the importance and opportunity of ensuring that these colleagues are fully informed to use their contact points with families to signpost to SLCN support and provide advice as appropriate.
- Even with the addition of those elements of the wider specialist workforce with designated roles with SLCN the ratio of total support remains low.

Figure 11: The wider workforce relative to 0-18 population (per 10,000)



Figure 12: The wider SLCN workforce relative to the predicted SLCN (0-18) need (per 1000)



CASELOAD

The caseload data represents the children 'known' to the SLT service on the day of sampling. The table below shows 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. Further enquiries are ongoing into this with the SLT service leads as it is surprising that this level of reach is being achieved with the reported staffing.

Non-attendance was reported at 206 missed sessions in a three month period. Further investigation of the reasons for families not being able to access sessions is indicated.

	0-4 years	5-9 years	10-14 years	15-18 years	Total 0-18	19-24 years
Total Caseload	1186	1372	259	63	2880	5
Population	25600	24700	21600	16900	88700	46700
Caseload as % of predicted SLCN	9.8%	11.8%	4.4%	2.2%	8.9%	0.3%
Caseload as % of population	4.6%	5.6%	1.2%	0.4%	3.2%	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 and Project Officer who spoke with a wider cross section of the community in order to gain a picture of the offer and gaps in the offer.

Figures 13 and 14 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 presents 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.

Within the online tools it is possible to see these graphics for each of the groups within the workforce. For the purposes of this report the focus is the overall summary which shows that there is a focus on universal and targeted interventions as well as specialist delivery.

Figure 13: Summary of qualitative mapping of provisions by strand and level – heat maps for provision and gaps

SLCN PROVISION HEAT MAP

LEVEL	FAMILY SUPPORT	ENVIRONMENT	WORKFORCE	IDENTIFICATION	INTERVENTION
Specialist	Provisions: 10	Provisions: 0	Provisions: 5	Provisions: 1	Provisions: 6
Targeted	Provisions: 10	Provisions: 2	Provisions: 10	Provisions: 7	Provisions: 11
Universal	Provisions: 21	Provisions: 10	Provisions: 24	Provisions: 4	Provisions: 5

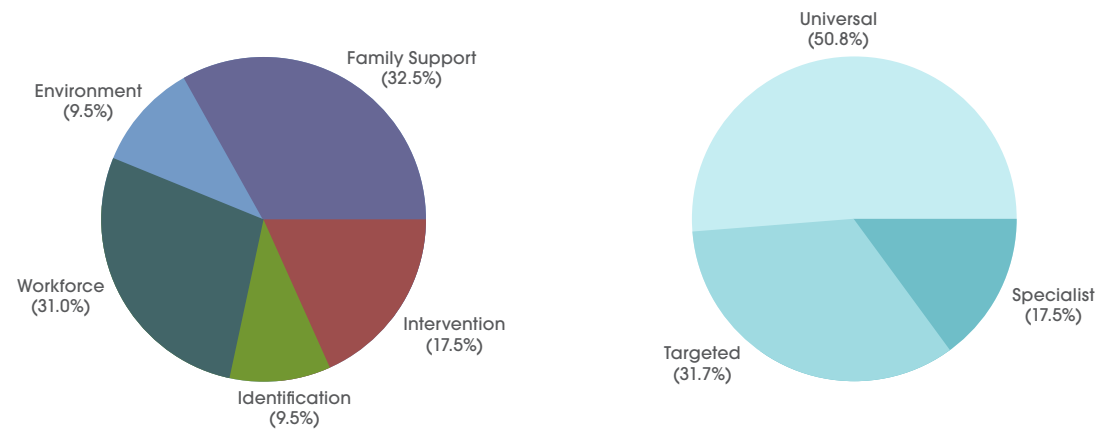
SLCN GAPS HEAT MAP

LEVEL	FAMILY SUPPORT	ENVIRONMENT	WORKFORCE	IDENTIFICATION	INTERVENTION
Specialist	Gaps: 3	Gaps: 1	Gaps: 2	Gaps: 1	Gaps: 1
Targeted	Gaps: 3	Gaps: 2	Gaps: 3	Gaps: 3	Gaps: 5
Universal	Gaps: 6	Gaps: 5	Gaps: 8	Gaps: 6	Gaps: 3



Figure 14: Summary of qualitative mapping of provisions by strand and level – pie charts for provision

COMBINED PROVISION SPLIT BY STRAND & 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 below.



Star quality...

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

My Star

- Parents praised the SALT expertise and approachability
- Let's Get Talking
- Stay and play
- Early support team & area SENCO
- Children's Centres
- Bookstart corner



Bug in the system...

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

My Bug

- Funding - more funding for services & staffing levels to increase
- Training - needed for EY settings so they can support better
- SLCN Service - long waiting lists, limited staff numbers, more flexibility needed in appointment times
- Children's Centres - where they have disappeared spaces and services are missed
- HV - Health Visitor centralisation has disrupted continuity of care



Reach for the moon...

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

My Aspiration

- An easy, prompt referral system
- More programmes that support reading and singing with children
- Every child having a story read to them whether by parents or first thing in primary school by a volunteer or teacher



KEY THEMES

Summary of Key Themes

- 1.** There is no joint commissioning or aligned commissioning of speech, language and communication support within Leicester City, however there are close collaborative arrangements in place between the speech and language therapy services and the Local Authority at a strategic level.
- 2.** A significant universal and targeted offer was identified by the city lead during stakeholder engagement
- 3.** Several schools have taken part in specific initiatives to improve language and literacy and therefore there is potential for local sharing of practice but this is not currently strategically driven.
- 4.** Given the needs profile of the City, the ongoing development of a strong targeted offer involving settings, schools, the education.





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