Executive Summary

This report makes recommendations to Government about the steps it should take to transform provision for and the experiences of children and young people with speech, language and communication needs (SLCN) and their families. These recommendations are the culmination of ten months of extensive evidence gathering and analysis, as well as consultation with a wide range of stakeholders.

During the Review we identified five key themes – issues that need to be addressed for real change and improvement to happen. Our recommendations are gathered under these five themes:

- Communication is crucial;
- Early identification and intervention are essential;
- A continuum of services designed around the family is needed;
- Joint working is critical; and
- The current system is characterised by high variability and a lack of equity.

How to improve understanding that communication is crucial

The ability to communicate is an essential life skill for all children and young people and it underpins a child’s social, emotional and educational development. Evidence illustrates that there is insufficient understanding of the centrality of speech, language and communication among policy makers and commissioners nationally and locally, professionals and service providers, and sometimes parents and families themselves. It follows that insufficient priority is attached to addressing SLCN.

To raise the national profile of speech language and communication and all forms of SLCN:

**We recommend that the Government creates a Communication Council to monitor and support implementation of this Review’s recommendations.** [Recommendation 1]

**We recommend that the Government creates the post of a Communication Champion to lead on awareness raising and best practice dissemination elements of the Communication Council’s work.** [Recommendation 2]

**We further recommend that the Government commissions a National Year of Speech, Language and Communication to be led by the Communication Champion.** [Recommendation 3]
To increase understanding of speech, language and communication among all families and provide information, advice and support to families of children and young people with SLCN:

We recommend that all parents receive information which emphasises the importance of speech, language and communication to all children through the Child Health Promotion Programme. [Recommendation 4]

Once a child’s SLCN has been identified, we recommend that a range of information, advice and support should be readily available to families, particularly at key stages and transition points in a child’s life. [Recommendation 5]

We further recommend that the Government considers the case for funding national, regional and local support services for parents. [Recommendation 6]

To ensure that it is clear to all parents what provision is available in their local area, we recommend that the Government reminds local authorities of their current duties to provide information to families, including about publicly funded provision. [Recommendation 7]

How to ensure that early identification and intervention are recognised as essential

Early identification means recognising a child’s difficulty quickly: both as early as possible in his or her life and as soon as possible after the difficulty becomes apparent. Early intervention means making a prompt intervention to support the child and family. In addressing SLCN, there is strong clinical opinion about the value of early intervention and the danger of its absence. If a child receives the right help early on, he or she has a better chance of tackling problems, communicating well and making progress. If a child does not benefit from early intervention, there are multiple risks – of lower educational attainment, of behavioural problems, of emotional and psychological difficulties, of poorer employment prospects, challenges to mental health and, in some cases, of a descent into criminality.

To ensure a robust system for early identification of children and young people with SLCN:

We recommend that PCTs and local authorities work together to undertake surveillance and monitoring of children and young people to identify potential SLCN across the age range, and particularly at key transition points. [Recommendation 8]

For children up to the age of five, we recommend that surveillance and monitoring is delivered through PCTs adopting the recently updated Child Health Promotion Programme and, in particular, implementing the child and family health and development reviews, including the review of speech and language development. [Recommendation 9]

We recommend that the Government considers a review of the ‘red book’ (the Personal Child Health Record), to ensure that families and professionals have a clear record of a child’s speech and language development at key ages and stages. [Recommendation 10]

To help ensure that where a SLCN is identified, appropriate provision is available to intervene promptly, we recommend that speech, language and communication is prioritised by all Children’s Centres and that it is a primary focus for measuring every child’s progress. [Recommendation 11]
We recommend that the Department for Children, Schools and Families (DCSF) asks Sir Jim Rose to examine how to strengthen the focus on speech, language and communication in the primary curriculum and that the Department be ready to act on his advice. [Recommendation 12]

To deliver early identification and intervention for older children and young people with SLCN we recommend that the DCSF reinforces its inclusive approach to SEN in the revised secondary curriculum by preparing and disseminating widely exemplifications of the effective removal of barriers for pupils with SLCN, in line with the principles of the National Curriculum inclusion statement. [Recommendation 13]

We further recommend that, when issuing guidance to local authorities and schools on the use of funding, including that for personalised learning, the DCSF emphasises the importance of meeting the needs of all children and young people with SLCN. [Recommendation 14]

How to design a continuum of services around the family

The requirements of children and young people with SLCN and their families will be met when, and only when, appropriate services to support them, across the age range and spectrum of need, are designed and delivered in a way that is accessible to them. This will require a broad and varied continuum of universal, targeted and specialist services, delivered by an appropriately skilled and supported workforce.

To ensure effective joint commissioning of services for children and young people with SLCN:

We recommend that, as part of the work on World Class Commissioning, the Government produces a joint framework for commissioners, including Children’s Trusts and schools, on the commissioning of a continuum of universal, targeted and specialist services for children and young people with SLCN across the age range 0-19. [Recommendation 15]

We recommend that the commissioning framework is developed through a programme of pathfinders, funded and supported by the Government, to identify best practice and evidence of effective interventions for children and young people with different types of SLCN and to show how joint working and commissioning works well in a range of local areas. [Recommendation 16]

To support commissioners further and embed incentives to commission services for children and young people with SLCN we recommend that the Department of Health creates a speech, language and communication annex to Standard 8 of the Children’s National Service Framework: Disabled Children and Young People and those with Complex Health Needs. [Recommendation 17]

In recognition of the fact that greater delegation of funding to schools and their increasing role as commissioners has further complicated the commissioning challenge, we recommend that the current DCSF review of the Dedicated Schools Grant should take account of how the school funding system supports the delivery of universal, targeted and specialist services for children and young people with special educational needs. [Recommendation 18]
To ensure that strategic commissioning is successfully supported by the workforce:

We recommend that the commissioning framework includes advice on:

- how to assess the range of skills in local children’s workforces;
- how to identify the right skills and capacity mix required in the children’s workforce to deliver services and agreed outcomes, including staff with specialist skills able effectively to assess and support children and young people with SLCN;
- how to develop the workforce by identifying and addressing skills or capacity ‘gaps’; and
- how to develop effective collaborative practice between different services and members of the workforce. [Recommendation 19]

To support further the workforce to deliver we recommend professionals from across the children’s and young people’s workforce undertake pre-qualification training in collaborative and multidisciplinary working, alongside professionals from other backgrounds. [Recommendation 20]

To improve the training and continuous professional development related to speech, language and communication and SLCN which is available to the workforce:

We recommend that the Children’s Workforce Development Council, in collaboration with the Children’s Workforce Network, ensures that speech, language and communication and SLCN are a core requirement or unit at the appropriate level in all qualifications for the children’s workforce as part of the emerging Integrated Qualifications Framework. [Recommendation 21]

We further recommend that the standards for Qualified Teacher Status ensure that students develop a better understanding of children and young people’s SLCN and of how to address those needs. [Recommendation 22]

We recommend that DCSF includes speech, language and communication, both as a core requirement and as an elective module, in the new Masters in Teaching and Learning. [Recommendation 23]

We recommend that the Government ensures that good quality training, such as that provided through the Inclusion Development Programme (IDP), is available to everyone in the children’s workforce, including health and education professionals, to develop their skills in relation to speech, language and communication. This should include training for staff wishing to specialise in working with children and young people with more severe and complex SLCN. In ensuring that training is available, the Government should consider how it should best be provided, including consideration of whether training should be an entitlement and the circumstances in which it would be appropriate to fund the ‘backfilling’ of posts in order to enable staff to undertake training. [Recommendation 24]

To provide more information to local areas on the workforce resources required to meet needs, we recommend that the Government, working with other partners, undertakes a modelling exercise to help Strategic Health Authorities and Primary Care Trusts, in
partnership with their local authorities, to estimate the workforce that they will require to deliver appropriate services for children and young people with SLCN. [Recommendation 25]

To improve understanding of what support and interventions work for children and young people with SLCN we recommend that the Government considers a programme of research to enhance the evidence base and inform delivery of better outcomes for children and young people. [Recommendation 26]

In this report, we examine the difficulties faced by groups with particularly severe or on-going needs that are not currently being met. To address the needs of children and young people who use Assistive and Augmentative Communication aids (AAC) we recommend that the Government develops a ‘hub and spoke’ model of regional provision, coordinated by a national organisation. Moreover, we recommend that on appointment the Communication Champion should immediately evaluate the effectiveness of local areas’ AAC provision, and report findings to the Communication Council. [Recommendation 27]

To strengthen support in one of the most acute examples of on-going SLCN, we recommend that the Government’s forthcoming Youth Crime Action Plan and the follow-up work on young offenders’ health should consider how best to address the SLCN of young people in the criminal justice system, including those in custody. [Recommendation 28]

To ensure that families and others get the opportunity they deserve to have their voices heard where closure of language units is being proposed, we recommend that the DCSF reminds local authorities of their statutory responsibilities and parents of their rights regarding consultation procedures. [Recommendation 29]

**How to promote more and better joint working**

In planning, commissioning and delivering universal, targeted and specialist provision, it is critical that health services and children’s services, including schools, work together in support of children and young people with SLCN. No single agency can deliver any one of the five Every Child Matters outcomes for children and young people by working in isolation. Operating in separate silos produces misunderstandings, causes divisions and can be bewildering or infuriating to parents.

To increase the effectiveness of Children’s Trust arrangements to facilitate joint working, the priority afforded to SLCN by Children’s Trusts and hence the impact on provision and outcomes for children and young people with SLCN, we recommend that each Children’s Trust appoints an appropriate senior member of its governing board to lead on speech, language and communication in the local area. This leadership role should include overseeing a drive to improve outcomes. [Recommendation 30]

To avoid confusion in joint commissioning of provision for children and young people with SLCN, the commissioning framework should make clear who the responsible commissioner is in complex cases. Where a lack of clarity about the responsible commissioner is identified, we recommend that the Government considers amending regulations and associated guidance. [Recommendation 31]

In 2009 the Government will introduce a new Comprehensive Area Assessment (CAA) of outcomes delivered by local authorities, both independently and in partnership with others. To
help ensure that Children’s Trusts fulfil their responsibilities for children and young people with SLCN, we recommend that the new CAA takes account of the effectiveness of Children’s Trusts in facilitating joint working and effective commissioning to deliver improved outcomes for children and young people with SLCN. [Recommendation 32]

We welcome the discussion paper on strengthening Children’s Trusts recently launched by the Government. We recommend that during the debate following this paper the Government considers whether sufficient numbers of Children’s Trusts are functioning effectively in terms of improving outcomes for children and young people with SLCN, and takes account of the evidence and recommendations of this Review in any plans to strengthen Children’s Trust arrangements, including by further legislation. [Recommendation 33]

In response to a report by the former Education and Skills Select Committee¹, the DCSF has commissioned Ofsted to carry out a detailed review of progress on Special Educational Needs (SEN) in 2009-10. Given the prevalence of SLCN within the SEN population and the fundamental importance of supporting children and young people with SLCN, we recommend that the forthcoming Ofsted review takes full account of the need for the joint provision of services for children and young people with SLCN. [Recommendation 34]

In particular, we believe the Ofsted review should consider:

- the effectiveness of joint working arrangements between schools, local authorities and health services in addressing SLCN;
- the contribution of community child health services commissioned by the PCT;
- the effectiveness of local authorities’ support to schools on improving outcomes for children and young people with SLCN;
- the effectiveness of School Action, School Action Plus and statements of SEN in improving outcomes for children and young people with SLCN; and
- how Ofsted itself might strengthen its contribution to raising standards for children and young people with SLCN, including what training may be required for Ofsted Inspectors in this area.

How to ensure greater consistency and equity for families

The current system for providing support to children and young people with SLCN is routinely described by families as a ‘postcode lottery’, particularly in the context of their access to speech and language therapy (SLT). Despite the hard work and commitment of many professionals in health and children’s services, the needs of many children and young people are still not being met.

Local leaders, particularly senior managers, are crucial to setting priorities and leading development of services that will improve outcomes for children and young people. To support the strengthening of the local leadership role, DCSF has published a national professional development framework in its document Leading and Managing Children’s Services in England (April 2008)². We recommend that the DCSF work closely with its central and local

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¹ Now Children, Schools and Families Select Committee.
² Available at www.dfes.gov.uk/publications/childrensplan/implement.shtml
government partners to promote the framework to local leaders, setting out in the 2009 Departmental Annual Report the steps taken and the progress made. [Recommendation 35]

In line with the focus on leadership development within Lord Darzi’s report of his NHS Next Stage Review, we recommend that the Department of Health supports the development of appropriately skilled and experienced clinical leaders who can interpret policy and research to support the delivery of evidence-based practice for children and young people with SLCN. [Recommendation 36]

To improve performance monitoring at a national level, we recommend that the Government considers retaining national early years targets beyond 2011. We further recommend that the Government considers introducing a national indicator specifically for SLCN to underpin a relevant Public Service Agreement from 2011. [Recommendation 37]

Whilst national targets will bring some external performance monitoring to certain aspects of provision, it will be essential for Children’s Trusts to maintain a comprehensive view of local performance. Trusts must be able to identify where satisfactory progress is being made and where it is not so that resources can be appropriately targeted. A continual cycle of self-evaluation is required in order to improve outcomes. We recommend, therefore, that the joint framework on commissioning emphasises the need for local agencies to monitor performance and publish their findings in forms accessible to children, young people, parents and professionals. [Recommendation 38]

We further recommend that the Government makes as much data as possible available about the educational attainment of children and young people with SLCN to allow it to be accountable for progress and to encourage improvement in provision [Recommendation 39]. Data should be readily understandable and accessible to all stakeholders with an interest in the outcomes for children and young people with SLCN.

To support all the above recommendations to strengthen improvement and performance management at all levels of the system, we recommend that progress on implementing the recommendations of this review is assessed through an independent progress check conducted in 18 months’ time. [Recommendation 40]
The Bercow Report – A Review of Services for Children and Young People (0–19) with Speech, Language and Communication Needs

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