



DEVELOPMENT & IMPLEMENTATION

The Speech, Language and Communication Triage Panel

Following the introduction of the Early Years Speech, Language and Communication pathway in 2018, a new Triage panel was introduced to ensure smooth journeys for families through the service. Launched in 2020, the panel includes representatives from the NHS, Better Start, the Local Authority, and a commissioned Speech, Language and Communication Service, to work collaboratively to identify the correct support for children and their parents.

“Having the triage panel allows all voices to be heard, when sometimes the clinical voice could be seen as the loudest.”

Understanding the Challenge

Speech, Language and Communication needs are heightened in areas of socio-economic deprivation (The Royal College of Speech and Language Therapists, 2013). Young children in more deprived populations are more likely to experience delayed communication skills but also often receive inadequate, ineffective and inequitable support which potentially impacts on their educational outcomes.

Blackpool is one of the most deprived Local Authorities in England and children’s attainment as measured on the Early Years Foundation Stage Profile has indicated that children are at a disadvantage to their peers and lower proportions are reaching the expected level of development.

The Speech, Language and Communication Pathway

The pathway is based on The Balanced System®, which brings together 5 strands of support:

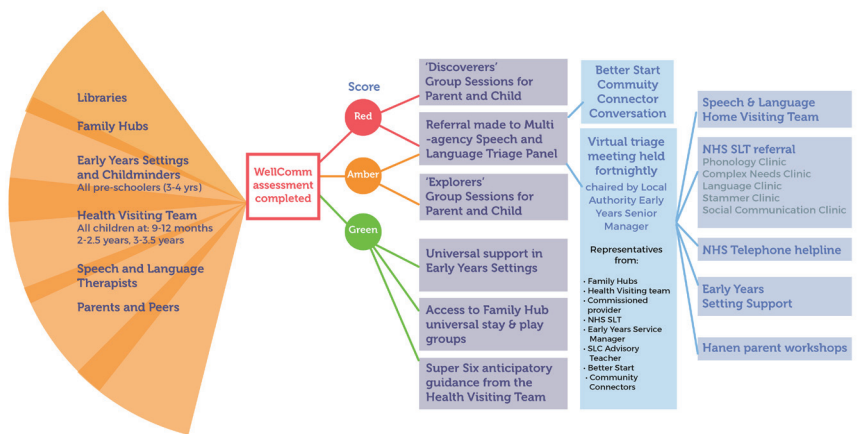
Family Support: Parents are coached and given strategies to support children’s communication.

Environments: Settings are audited, provision is enhanced and guidance given to embed and share strategies.

Training: Staff are trained to assess childrens Speech, Language and Communication needs and provide age related support to language development.

Identification: Creating a ‘one door’ approach for practitioners and families through the Post Wellcomm SLC Triage Panel.

Intervention: Targeted, evidence-based interventions, delivered at home, in groups and in settings.



“Parent voice is really important. Through the conversations the Community Connectors have with parents we get information from the parents about where they think their concerns are and, also more importantly, what pathway they think would be best fit. What the parents might be saying is, I don’t want the home-visiting service because, ‘I’ve got three children under 5’ or, ‘I’ve got four dogs – don’t come to the house.’ They equally could be saying: ‘I cannot get to the intervention’. ‘I’ve got mobility issues’ or ‘I’ve got social anxiety, I don’t want to do a group.’”

What we did

The Post Wellcomm Speech, Language and Communication (SLC) Triage panel

Children aged 0-5 who need support with SLC are eligible to be referred to panel to have their needs discussed if after the WellComm screening they are scored as 'red' or 'amber'. Fortnightly panels are held which receive referrals from Health Visitors and Early Years Settings. The panel is multi-agency and is made up of representatives from service providers. Where a need is identified a pathway of support is offered based on the child's and family's needs to ensure support is provided in the right place, at the right time and with the right people.

Children's needs are discussed alongside additional information about the child and their family which has been collected by the Community Connectors to ensure that the best fit of service is selected. The targeted services, offered through the triage panel, include 'It Takes Two to Talk' (ITTT), Early Years Setting Support, The Early Communication Service and Groups in the community ('Discovers' and 'Explorers').

Children presenting at panel with multiple and complex needs are further referred into specialist services through the NHS.

What makes the triage panel work, I think that it's time, trust, relationships and patience. Members meet on a Monday for an hour (pre panel meeting). They look at all the referrals that have come in, look at all the extra information that's been gathered. So, when the panel actually meets, we only really discuss the children where we have different opinions.

Key Learning from the Last 5 Years

Relationships: The Community Connector contacts families to explain the triage process, explore support options, discuss attendance barriers, and answer questions to ensure the service meets their needs and encourages engagement.

Connecting Systems: Different IT systems made sharing information difficult, so Microsoft SharePoint was introduced to securely store and share documents among panel members.

Data Sharing: Referrals need informed parental consent to be considered; if missing, the administrator asks the referrer to get it.

Referral Forms: Multiple file types slowed admin work, so Microsoft Forms was trialled to streamline data entry and automatically create a spreadsheet for the panel.

Outcomes

Reach

Since the start of panels, 5,468 children have been discussed.

55% of children referred live in the most deprived households in Blackpool (IMD1)

Provision

Of those children that have been referred to the panel, 94% have been allocated a service.

Once the child has received support, they undertake another WellComm screening which is presented to panel to ensure no additional support is needed.

Intervention Success

Last year only 1.7% of children were referred to other services following support allocated by the panel.

Overall Impact

In the three years where the new EYFSP measure has been used, there has been a 3.1% increase in the number of children reaching a 'Good Level of Development'. This is higher than the national rate of increase.