

**Wrexham Flying Start**

**Speech and Language Intervention Case Study**

**Family Composition (Anonymised)**

Mother- Nicola

Children- Alana (now age 4), Ollie (now age 5)

**Family background and history of contact with Flying Start**

Mum Nicola has ADHD and experiences difficulties with her mental health, in particular with anxiety, and finds meeting new professionals difficult. She became pregnant with her first child, Ollie, at the age of 18. When Ollie was a baby, Nicola became a victim of domestic abuse and there was social services involvement to safeguard Nicola, Ollie and Alana, who was not yet born.

Through Flying Start, Nicola has accessed:

* Flying Start Intensive Health Visiting
* The Freedom Programme with the Flying Start Social Worker
* Parenting support with a Flying Start Nursery Nurse
* Mental health support with a Flying Start Primary Care Mental Health Practitioner.
* Flying Start childcare provision for both children
* Speech, language and communication support with a Flying Start Nursery Nurse, a Flying Start Speech and Language Therapist and a Flying Start Speech and Language Therapy Assistant.

**Concerns with Alana’s speech and language development**

When Alana’s Health Visitor conducted a SOGS as part of Alana’s 15 month check, this showed a mild delay in her receptive and expressive language skills. The Health Visitor offered Nicola some support with speech language and communication, but Nicola did not feel she needed the support at this time. Alana’s progress was reviewed at 19 months and 24 months, but there was very little change in her understanding or use of language, and the delay was becoming more pronounced. Support was offered again but on each occasion Nicola declined; this was a period when she was struggling with her own mental health.

It took the Health Visitor several attempts to complete Alana’s 27 month review, but when this was completed, the Health Visitor was even more concerned with her speech and language development. Alana was now 30 months old. According to the SOGS assessment and the Wellcomm Screen, Alana’s expressive language skills were at 12 months of age, and had shown no improvement over the course of a year. Despite this, her other areas of development were within normal limits. At this point, Nicola was ready to accept some support with Alana’s speech and language development, and the Flying Start Health Visitor referred Nicola and Alana to access some intensive support sessions at home with a Flying Start Nursery Nurse.

After three home sessions, the Nursery Nurse gained consent from Nicola to use the Flying Start Speech and Language Therapy Team’s ‘Request for Help’ process. This process means that, rather than submitting a Speech and Language Therapy referral which may not always be required, or contain insufficient information, practitioners are encouraged to have a discussion with the Flying Start Speech and Language Therapist around the child’s communication skills, what interventions have already been tried and the families’ readiness for therapy. A decision is reached together about the next step in the child’s care, which may be a referral for an assessment with the Flying Start Speech and Language Therapist, or may be accessing other universal and targeted services offered by Flying Start.

In Alana’s case, following discussion a decision was reached that referral to the Flying Start Speech and Language Therapist would be appropriate.

**Arranging the first SaLT contact**

The Flying Start Speech and Language Therapist called Nicola to arrange an appointment to take a case history. Unfortunately, she was not able to get through despite calling on several occasions, sending text messages and a letter. The Speech and Language Therapist liaised with the Nursery Nurse and discovered that Nicola’s phone had been disconnected, and the letter had not arrived. The Nursery Nurse provided Nicola with the therapists phone number and encouraged her to make contact. Nicola was able to borrow a phone and contacted the Speech and Language Therapist to arrange a face to face appointment.

**SaLT Case History and Initial Assessment**

Alana’s initial assessment with Speech and Language Therapy took place when she was 2 years and 8 months old. Of note from the case history was the fact that Alana had always been a quiet child and had not really babbled, and that her father has a diagnosis of ASD and attended a specialist language resource provision for part of his education.

At the assessment, the Flying Start Speech and Language Therapist noted that Alana’s social skills were excellent- she had good social referencing and eye contact, and managed to get her message across with gestures, expression and showing things to adults. She had good pretend play skills and enjoyed trying to join in with nursery rhymes. The therapist noted that that Nicola was already using some positive adult-child interaction strategies without realising it, and Alana’s brother Ollie (then aged 3yrs 11m), was very talkative.

However, Alana’s understanding of language was at 1 key word level only. She used no clear words during the appointment; it was unclear at times if Alana was trying a word or just vocalising, as all her attempts consisted of vowel sounds only.

The therapist discussed Alana’s language difficulties with Nicola and recommended some therapy sessions to support Alana’s language development through play. She also recommended that Nicola take Alana and Ollie to the weekly Flying Start Language and Play sessions in the local library which was within walking distance.

The Speech and Language Therapist, with Nicola’s consent, shared and discussed her report with the Flying Start Health Visitor and the Flying Start Advisory Teacher supporting Alana’s Flying Start childcare setting. The childcare setting was already proving targeted universal provision for Alana and the Advisory Teacher continued to monitor Alana’s progress within childcare.

**Flying Start SaLT Interventions**

The first intervention provided through Flying Start was the Launch into Language workshop (as per the All Wales Language Pathway), which provides a range of strategies for parents to use to support early language development. Flying Start Speech and Language Therapy Technical Instructor delivered this one to one with Nicola in the home. During this session, Nicola expressed that the thought of attending group sessions made her very anxious, and for this reason she had not attended the Language and Play sessions recommended by the Speech and Language Therapist, and didn’t feel she would be able to.

Similarly, she said that although she would like to learn some Makaton signs to support Alana, She would be uncomfortable attending the group session which was offered. The Speech and Language Technical Instructor agreed to add some Makaton sign instruction to the sessions planned to follow, which focussed on coaching Nicola to use positive adult child interaction strategies to support Alana’s understanding and expressive language. Nicola’s engagement with this package of care was excellent, and 5 sessions were completed over 6 weeks.

In the July, the Speech and Language Therapist attended a ‘one page profile’ meeting with Alana’s Flying Start childcare setting, her nursery class teacher for the following school year, and Nicola. This meeting was invaluable for sharing information about how Alana communicates and how best to support her. All agreed that Alana needed an enhanced transition to nursery class. The Flying Start Speech and Language Therapist suggested that Flying Start Speech and Language Technical Instructor could go to school to do some skill sharing sessions to help the class teacher support Alana with the same strategies that Mum was now using at home.

The Speech and Language Therapist reviewed Alana’s progress at home a few weeks later. Alana had made some progress with understanding but still had gaps in her receptive vocabulary, particularly verbs. The therapist noted that Alana seemed to be attempting to say more words, and attempting to copy words after adults, but these were still vowel sounds only, and not always the correct vowel, making them unintelligible and out of context. The therapist felt that although Alana was making some progress, her communication difficulties warranted further investigation and support. With Nicola’s consent, the Flying Start Speech and Language Therapist made a referral to audiology to rule out hearing difficulties, and arranged discussions with two specialist Speech and Language Therapists within the BCUHB core universal Speech and Language Therapy Service- one specialising in speech and language disorders, and one specialising in assistive and augmentative communication (AAC). Both agreed that Alana would benefit from their specialism; Alana was put on the waiting list to have a specialist speech and language assessment, and on the waiting list to have a trial of a communication book.

Over Alana’s first term in nursery entitlement following on from her Flying Start childcare, the Flying Start Speech and Language Therapist delivered intervention at home to work on Alana’s targets. At the same time, the Flying Start Speech and Language Technical Instructor supported Alana’s class teacher by sharing Makaton and communication strategies.

**Support to access specialist intervention**

In the weeks before Alana’s specialist assessment and AAC trial, the Flying Start Speech and Language Therapist acted as a point of contact for Nicola, school and professionals, facilitating communication between them. She supported Nicola to fill in a questionnaire about Alana’s family, friends, likes and dislikes, so that a draft communication book could be drawn up. She also attended the appointments at school to support Nicola.

Following the specialist assessment, the Specialist Speech and Language Therapist concluded that Alana had a very significant expressive language and speech disorder. She recommended that Alana should get intensive support in Reception class through the Language Outreach Service, and should also be considered for a place in a language resource setting when a place becomes available.

Following the AAC trial, the Specialist Speech and Language Therapist said that Alana would benefit greatly from this sort of aid and a bespoke communication book was made. When this was ready, the AAC (Specialist) Speech and Language Assistant and the Flying Start Speech and Language Technical Instructor conducted a home visit together to show Mum how to use the book and have another trial with Alana. The Flying Start Speech and Language Technical Instructor then commenced another set of six sessions at home to work on Alana’s specialist targets and to embed the use of her communication book.

The communication book proved to be a great success. When the Flying Start Technical Instructor checked in with the class teacher to find out how staff and Alana were finding using it in school, she said that Alana had for the first time used the book to tell the teacher she felt angry, and later that day, approached her with the book to ask for more paint. On a home visit, Alana became upset and agitated, and with encouragement to use her communication book, could tell Mum and the Technical Instructor that she wanted her doll. On another visit shortly after her 4th birthday, she was able to use a combination of gesture and pictures in the communication book to communicate to the Flying Start Speech and Language Technical Instructor that she had had a ‘Frozen’ party, worn a dress and shoes that she liked, and then went on a trampoline.

The Flying Start Speech and Language Technical Instructor also noticed a change in Nicola. Nicola was able to confidently ask her about the plan for Alana’s outreach support and whether she could get some more information about what would happen next. She informed the Technical Instructor when Alana’s paediatrician appointment was coming up and discussed what she wanted to raise, attended the appointment, and then discussed what the paediatrician had said with the Technical Instructor the following week.

**How has Flying Start changed outcomes for Alana?**

It is looking likely that Alana’s difficulties with speech and language will be long term and persistent, and in this regard, could not have been prevented by any service. However, the family’s difficult start and multiple disadvantages could well have prevented Alana from getting the early support she needed to make progress, and in this respect that the care and support of the Flying Start team has been invaluable in ensuring the provision of support. To summarise;

* Support around domestic abuse, parenting and mental health supported Nicola’s parenting ability and her ability to engage with services.
* Intensive health visiting meant that Alana’s development was monitored closely and her difficulties were noticed early.
* Multi-disciplinary team working meant that everyone involved knew about the difficulties facing the family and adjusted their support accordingly and could coordinate interventions.
* Multi-disciplinary and multi-agency working and good communication meant that health, education and specialist services could work together to provide the support Alana needed.
* The regular and intensive support enabled the establishment of good relationships to be built with Nicola and supported her to work with different professionals, while raising her confidence enough that she can now do this on her own.

Because of Flying Start support, Alana has been able to benefit from specialist support earlier. She has a way to communicate with friends, family and other adults, and is starting school with support already in place, giving her the best chance to succeed.

Although Nicola’s ultimate goal is for Alana to speak clearly, she feels that input from Flying Start has led to significant progress with her understanding. She is relieved that Alana is starting school with support already in place.